










To: All WRS Users
From: WRS Development Team
Date: 03/24/2020 (**UPDATED**)
Re: Release of Patient Telehealth & Self-Check-in Module

WRS has expedited the release of new Telehealth functionality to assist providers in conducting remote patient encounters during the COVID-19 Pandemic. We are pleased to offer this functionality to all current clients at no cost until June 30, 2020.

Please complete the [Telehealth Signup Form](#) to enable the functionality below in your practice immediately.

ITEMS IN THIS RELEASE

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Sign Up for Telehealth Service

Note: In order to use this functionality, your practice must be enrolled in Telehealth functionality. It will be offered free-of-cost until June 30, 2020. Complete the [Telehealth Signup Form](#) for setup.



Patient Email Collection

Collection of patient email address is at the center of the Telehealth workflow. It's essential to check and/or enter the patient's email when scheduling an appointment.

Check Hardware & Software Setup

Be sure to setup the device (PC, MAC, iPad or Cell Phone) that you plan to use for the telehealth visit. Setup instructions and workflow overviews are presented in a series of Telehealth User Guides (PDFs and videos) that will be sent to you upon enrollment in the Telehealth Service.



Front Desk Headset

It is strongly suggested that a front desk representative is equipped with a noise-cancelling headset with microphone. This allows the front desk user to join the telehealth session in advance of the encounter (30-minutes prior) and privately assist the patient with Telehealth setup, Self Check-in and collection of intake data. This should happen 30-minutes before the actual encounter time with the provider.

New Telehealth (System Default) Appointment Type

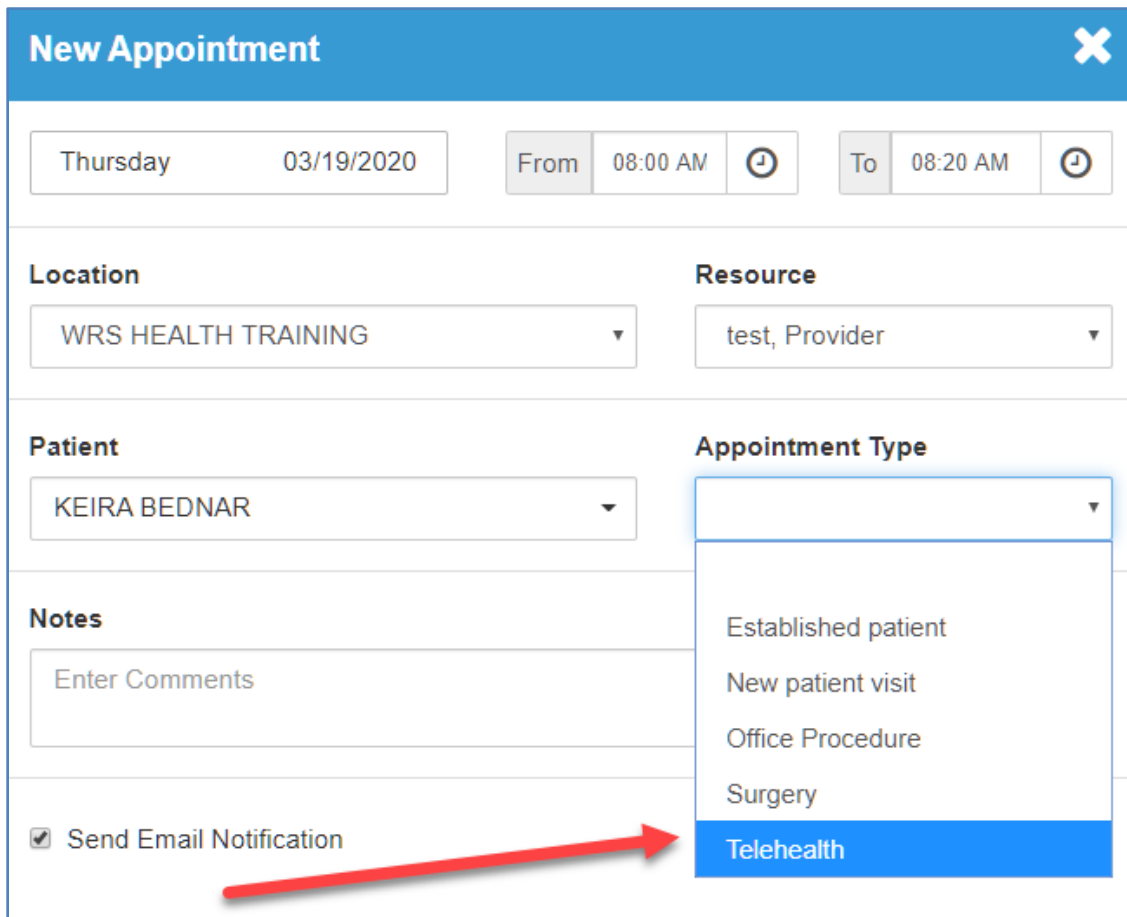
A new Telehealth (System Default) Appointment Type is now available in your practice. You will see this under **Administration>Scheduler Setup>Practice Appointment Type**.

Practice Appointment Type Administration			
			SSAPPOINTMENT TYPES <input type="text"/>
<input type="checkbox"/> Active Types	<input type="checkbox"/> Deactivated		
◆ TYPE NAME	◆ DESCRIPTION	◆ ABBREVIATION	◆ LENGTH(MIN)
Established patient	Established Pa	est	15
New patient visit	New Patient Vi:	new	15
Office Procedure (System Default)	Office Procedu	pro	1
Surgery (System Default)	Surgery	sur	10
Telehealth (System Default)	Telehealth App	tel	10

Schedule a Telehealth Appointment

IMPORTANT NOTE: Success with the Telehealth Workflow requires use of the Telehealth (System Default) Appointment Type. Use of any other appointment type will prevent the complete Telehealth workflow.

Any previously created (non-default) custom “Telehealth” appointment type should be renamed to avoid confusion. Appointments that were made with these custom types should be adjusted to use the new Telehealth (System Default) Appointment Type.



The screenshot shows a 'New Appointment' form with the following fields and options:

- Date:** Thursday 03/19/2020
- From:** 08:00 AM
- To:** 08:20 AM
- Location:** WRS HEALTH TRAINING
- Resource:** test, Provider
- Patient:** KEIRA BEDNAR
- Appointment Type:** A dropdown menu is open, showing options: Established patient, New patient visit, Office Procedure, Surgery, and **Telehealth** (highlighted in blue). A red arrow points to the 'Telehealth' option.
- Notes:** Enter Comments
- Send Email Notification

- (1) To make a Telehealth Appointment just use your existing Appointment Scheduling workflow.
- (2) Simply select “Telehealth” under the dropdown Appointment Type Box.

Review Patient Email & Self-Check-In Workflow

Once you have scheduled a patient using the new Telehealth Appointment Type, the patient will receive a Telehealth Appointment Confirmation Email and Appointment Reminder Emails. These emails include links to PDFs and videos that explain the use of the Patient Self Check-In process (desktop and iPad only):

YOUR telehealth Appointment is Scheduled

Date: 03/20/2020, Friday
Time: 7:10 PM
Appointment Type: Telehealth
Provider: Lawrence Gordon
Video Visit: [Click this link](#)

Step 1 - Prepare Your Device. Do Now

Please do this now. Setup for your visit now.
Hardware and Software Instructions

USING A COMPUTER WORKSTATION	USING A PHONE OR MOBILE DEVICE
<ul style="list-style-type: none">• PC Set up Video• PC Set up PDF	<ul style="list-style-type: none">• Mobile Set up Video• Mobile Set up PDF

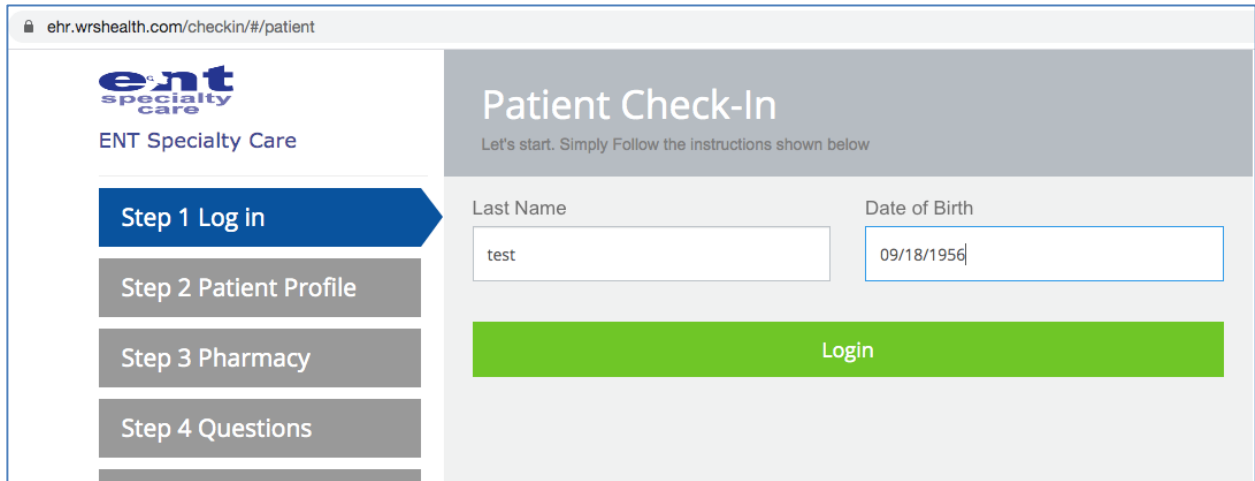
Step 2 - Self CheckIn 30-Min Before Visit

At least 30 minutes before your appointment
Please self check in using [Patient Online Check In Module](#)

<i>Important Note - This link is valid ONLY on the day of your appointment.</i>	Check-In Module Tutorial Video
	Check-In Module Instructions PDF

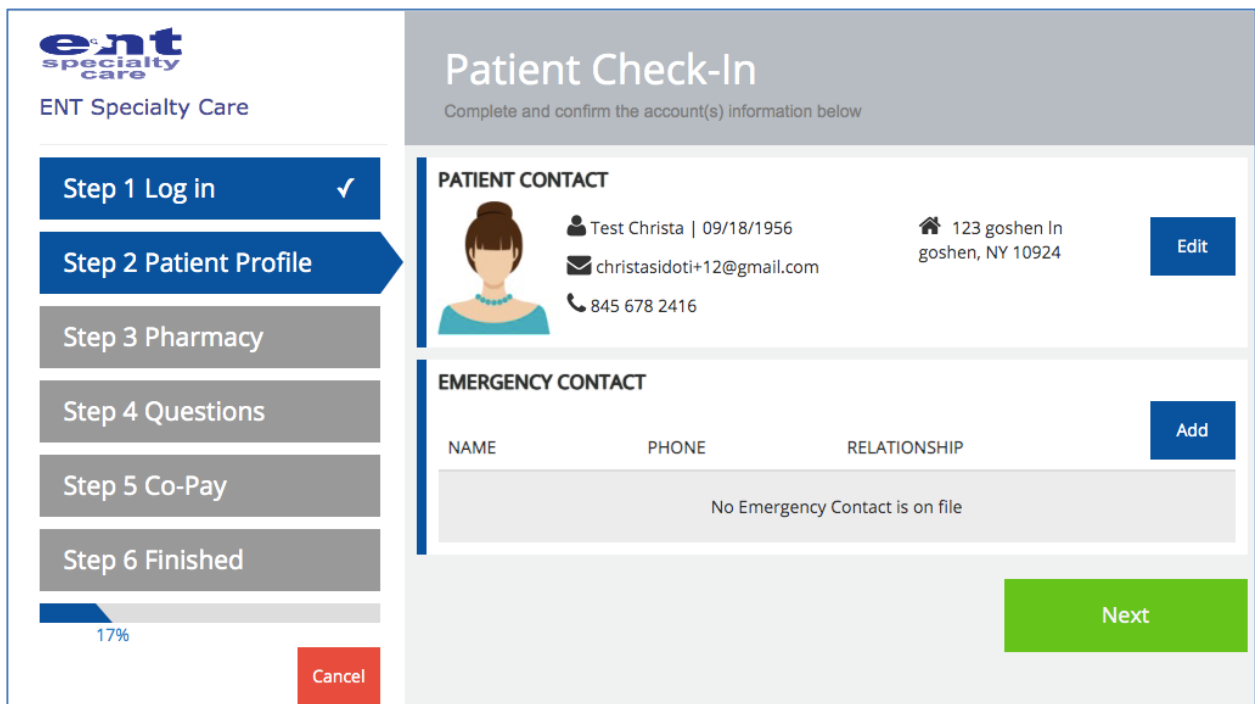
Patient Self Check-In

This emails also contain a link for Patient Self Check-In. When the patient clicks this link they will be prompted to enter their Last Name and DOB. If this information matches patients in today's schedule the patient will be taken to a series of automated Check-In screens. This is called the Patient Check-In Module.



The screenshot shows the 'Patient Check-In' interface. On the left, there is a sidebar with the 'ent specialty care' logo and 'ENT Specialty Care' text. Below the logo are four steps: 'Step 1 Log in' (highlighted with a blue arrow), 'Step 2 Patient Profile', 'Step 3 Pharmacy', and 'Step 4 Questions'. The main content area is titled 'Patient Check-In' with the subtitle 'Let's start. Simply Follow the instructions shown below'. It contains two input fields: 'Last Name' with the value 'test' and 'Date of Birth' with the value '09/18/1956'. Below these fields is a large green 'Login' button.

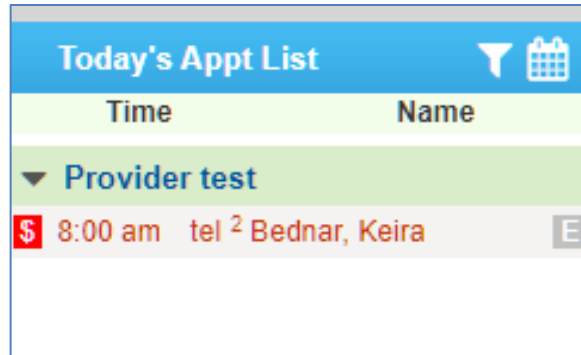
During Self Check-in, patients confirm demographic and contact info, enter a preferred pharmacy, pay a co-pay due and check-in from their desktop PC/Mac. The process includes approximately 6



The screenshot shows the 'Patient Check-In' interface at a later stage. The sidebar now shows six steps: 'Step 1 Log in' (with a checkmark), 'Step 2 Patient Profile' (highlighted with a blue arrow), 'Step 3 Pharmacy', 'Step 4 Questions', 'Step 5 Co-Pay', and 'Step 6 Finished'. A progress bar at the bottom of the sidebar shows '17%' completion. The main content area is titled 'Patient Check-In' with the subtitle 'Complete and confirm the account(s) information below'. It is divided into two sections: 'PATIENT CONTACT' and 'EMERGENCY CONTACT'. The 'PATIENT CONTACT' section shows a profile card for 'Test Christa' with details: '09/18/1956', '123 goshen ln goshen, NY 10924', 'christasidoti+12@gmail.com', and '845 678 2416'. There is an 'Edit' button next to the address. The 'EMERGENCY CONTACT' section has a table with columns 'NAME', 'PHONE', and 'RELATIONSHIP', and an 'Add' button. Below the table, it states 'No Emergency Contact is on file'. At the bottom right, there is a large green 'Next' button and a red 'Cancel' button at the bottom left.

screens and should take them only a few minutes.

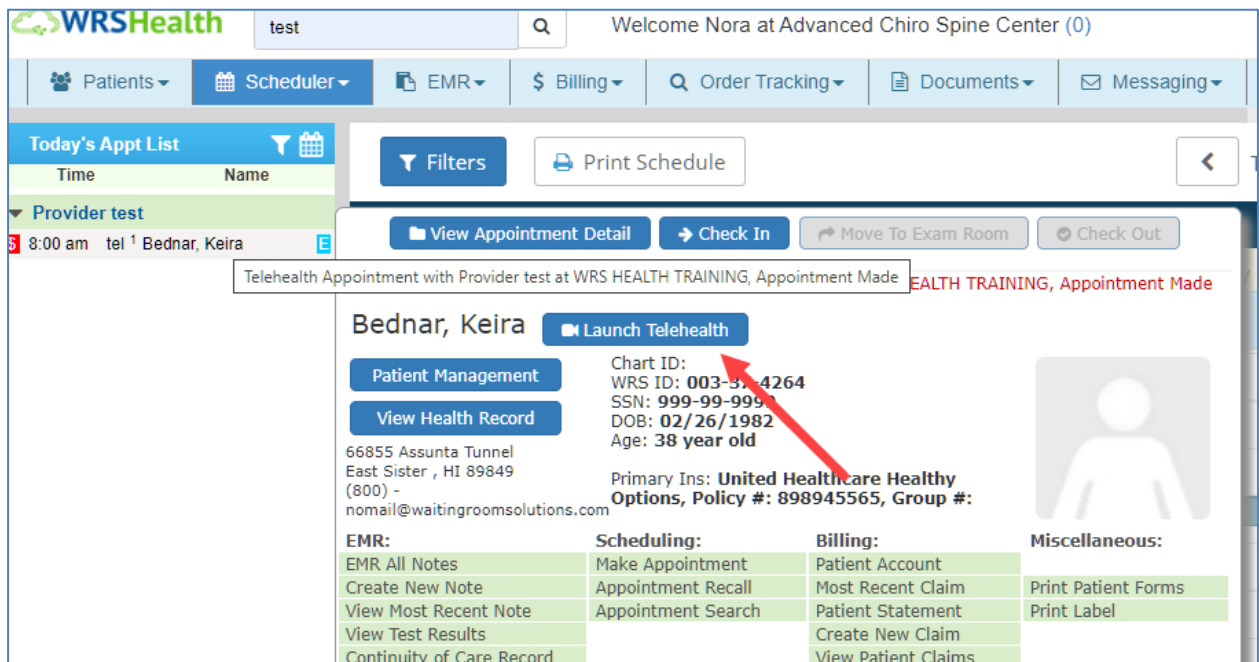
Once the patient has completed Check-In their appointment status in WRS under Today's Appointments will automatically be updated to WRS to Step 2- Check-In.



You can then move them to Step 3 Move to Exam Room and begin the telehealth video portion of the visit by clicking on the telehealth link (below)

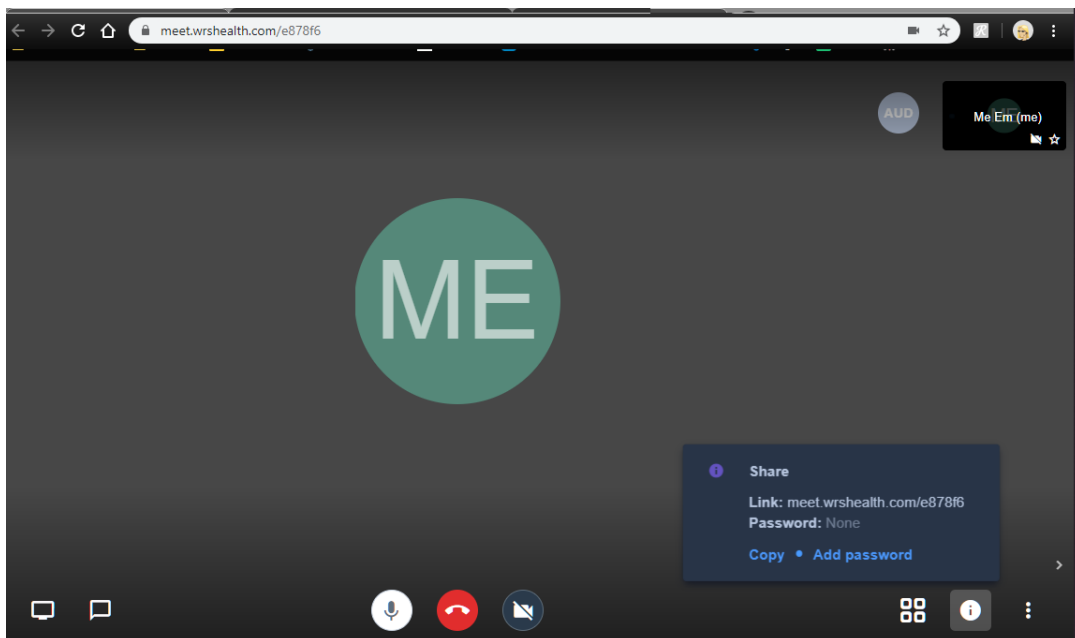
Launching a Telehealth Video Session

Once the patient has been Moved to Exam Room in WRS, simply mouse over the patient name and press the **Launch Telehealth** button on the Patient Information Box. This will take you to the patient's telehealth video room in your browser window.



Note that each patient will have a different video room. The link will consist of meet.wrshealth.com and a unique set of 6 digits for each patient:

meet.wrshealth.com/a23b5c



Revenue Cycle Management for Telehealth Visits

Due to the Coronavirus (COVID-19) Public Health Emergency, doctors and other health care providers can use telehealth services to treat COVID-19 (and for other medically reasonable purposes) from offices, hospitals, and places of residence (like homes, nursing homes, and assisted living facilities) .

Coinsurance and deductibles apply. For Medicare. Patient Responsibility is 20% of the Medicare-approved amount. Part B deductible applies.

If the patient has coverage through a Medicare Advantage Plan, they will not have to pay out-of-pocket costs (called cost-sharing) for COVID-19 tests.

Medicare telehealth services include **office visits, psychotherapy, consultations**, and certain **other medical or health services** that are provided by an eligible provider who isn't at your location using an interactive 2-way telecommunications system (like real-time audio and video).

Documentation Requirements for Telehealth

- Documentation requirements remain the same as an in-person visit.
- Documentation should include patient's name and date of birth; provider's identity and credentials; verbal consent from the patient to receive virtual services (required by CMS); a statement that the service was provided through telehealth; and the locations of the patient and the provider.
- Time-based codes may also have additional requirements to verify the time spent on services. Include the Start time of visit, End time of visit, Total time of visit, and Discussion topic to include the medical necessity (e.g., history, action)

Billing Requirements for Telehealth

Given the variability and frequency of updates in payer policies, we recommend

- (1) billing the set of codes that most accurately characterize the services conducted remotely and
- (2) applying the appropriate place of service code and (3) modifier.

The billing for a **new** patient visit should be based on time since there is no exam.

The billing for an **established** patient visit can be either based on time or the level supported by History and Medical Decision Making.

Level 2- Problem focused history/Straightforward

Level 3- Expanded problem focused history

Level 4- Detailed history

Level 5- Comprehensive history

For time-based E/M levels, more than 50% of the visit needs to be spent counseling/coordinating care:

NEW PATIENT	ESTABLISHED PATIENT
99201 – 10 minutes	99211 – 5 minutes
99202 – 20 minutes	99212 – 10 minutes
99203 – 30 minutes	99213 – 15 minutes
99204 – 45 minutes	99214 – 25 minutes
99205 – 60 minutes	99215 – 40 minutes

The modifier 95 should be added to the codes. Note that the reporting of telemedicine services varies by payer and state regulations. See [CY 2020 Medicare Telemedicine Services](#) to view the Covered Telehealth Services CY 2019 and CY 2020.

Place of service code: 02 – Telehealth. This place of code certifies that the services provided met Telehealth requirements.

Modifier: Medicare stopped the use of modifier GT in 2017 when the place of service code 02 (Telehealth) was introduced. If your payers reject a Telehealth claim and the 95 modifier is not appropriate, ask about modifier GT.

- **GT** modifier: Via **Interactive** Audio and Video Telecommunications Systems. Check payer policies for specific codes. *(See HCPCS Level II Expert® 2020 Edition, p. 473)*
- **GQ** modifier: Via **Asynchronous** Telecommunications Systems. See payer guidelines for specific codes that require or are eligible for the GQ modifier. *(See HCPCS Level II Expert® 2020 Edition, p. 472)*
- **G0** modifier: Telehealth services for diagnosis, evaluation, or treatment, of symptoms of an acute stroke. Check with CMS and payers if uncertain that a code qualifies for this modifier. *(See HCPCS Level II Expert® 2020 Edition, p. 465)*
- **95** modifier: Synchronous telemedicine service rendered via a real-time interactive audio and video telecommunications system. *(See Appendix P in the CPT® 2020 Professional Edition, American Medical Association, p. 896)*

On a daily basis, the rules related to Telehealth, and payment for Telehealth are evolving, and misinformation is abundant. We will keep you updated as information becomes available.