

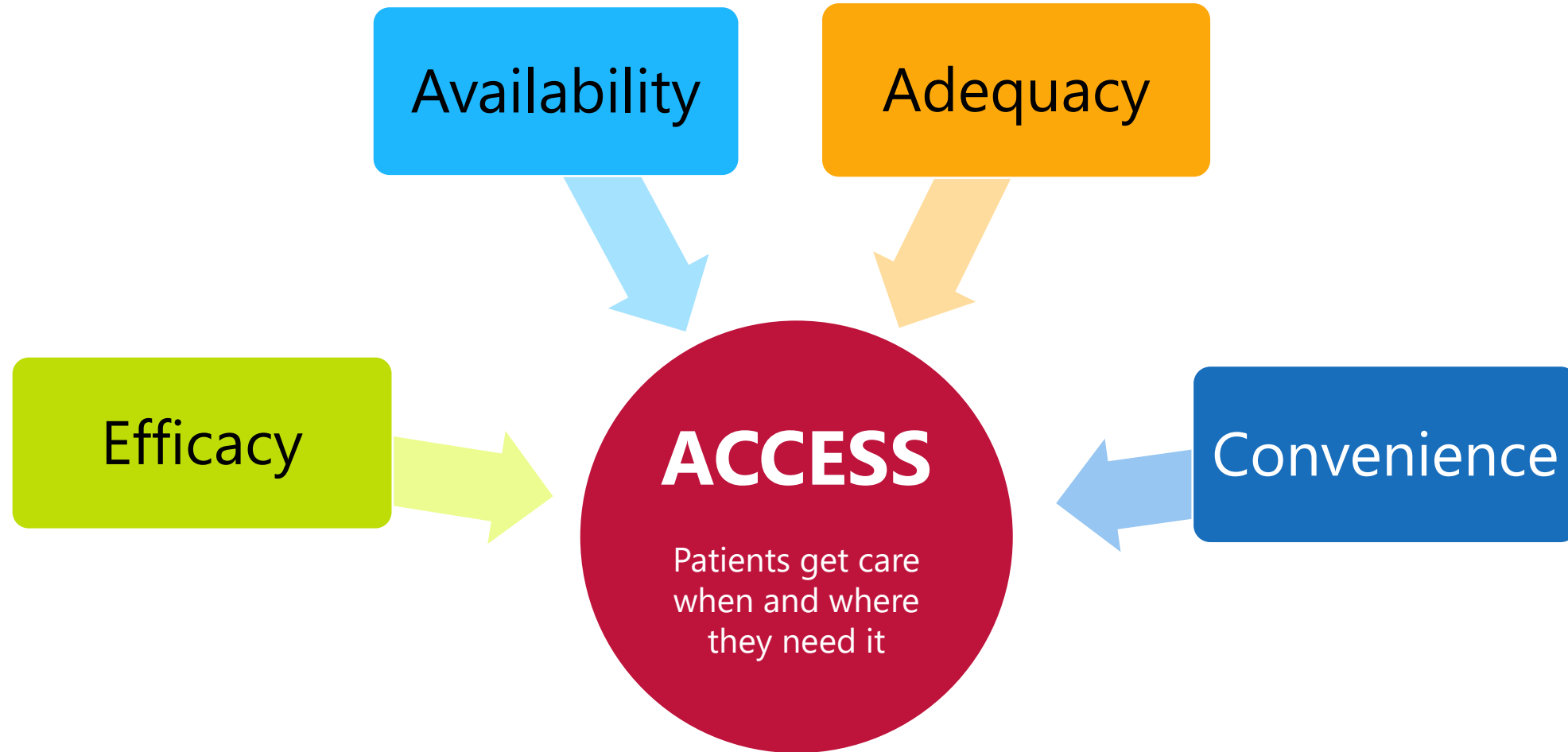
Telehealth Overview

VPQHC Provider Webinar

March 2023



Expanding Access and Equity



Telehealth Standards

Documentation and Coding is Critical

Ensure codes reflect the service and level of complexity, and is appropriate for telehealth

- Codes trigger the member's cost share, as applicable
- Correct coding and billing helps to quantify the provision of, and supports the need for various telehealth modalities

Best Practices

Prepare an optimal environment for delivering virtual care

Utilize competencies of an excellent "web-side manner"

Obtain and document patient's verbal consent

For Providers: telehealth.hhs.gov/providers

Telehealth Coding Guidelines

	Commercial Members	Medicare Members	Payment Policy
<p>Telehealth and Telemental Health Services</p> <p>Real-time interactive synchronous audio and video</p> <ul style="list-style-type: none"> • Must be done through a secure HIPAA compliant platform 	<p>Submit the corresponding CPT or HCPCS code for the service provided</p> <ul style="list-style-type: none"> • Modifier codes 95 or GT • POS 02 or 10 	<p>Submit the corresponding CPT or HCPCS code for the service provided</p> <ul style="list-style-type: none"> • Modifier codes 95 or GT • POS 02 or 10 (eff. 4.1.22) <p>E-Visits</p> <ul style="list-style-type: none"> • Physician/APRN/CNM: 99421-99423 • All other providers: G2061-G2063 	<ul style="list-style-type: none"> • Contracted Rate
<p>Telephone Services</p> <p>Audio Only</p>	<p>Submit the corresponding CPT or HCPCS code for the service provided</p> <ul style="list-style-type: none"> • Modifier code V3 • POS 99 <p>Telephone Visits: 98966 - 98968 Telephone E&Ms: 99441-99443</p> <ul style="list-style-type: none"> • Does not require a telehealth modifier • POS 99 	<p>Submit the corresponding CPT or HCPCS code for the service provided</p> <ul style="list-style-type: none"> • Modifier code V3 • POS 99 <p>Telephone Visits: 98966 - 98968 Telephone E&Ms: 99441-99443</p> <ul style="list-style-type: none"> • Does not require a telehealth modifier • POS 99 	<ul style="list-style-type: none"> • Non-Physician/APRN Mental Health Providers: contracted rate • Medical Providers: 75% of contracted rate
<p>Virtual Check-ins and Interpersonal Telephone/Internet/EHR Consultations</p>	<p>Submit the corresponding CPT or HCPCS code for the service provided</p> <p>Virtual Check-ins: G2010 and G2012 Telephone/Internet/EHR Consultations: 99451, 99452, 99446-99449</p> <ul style="list-style-type: none"> • Does not require a telehealth modifier • POS 02 or 10 	<p>Submit the corresponding CPT or HCPCS code for the service provided</p> <p>Virtual Check-ins: G2010 and G2012 Telephone/Internet/EHR Consultations: 99451, 99452, 99446-99449</p> <ul style="list-style-type: none"> • Does not require a telehealth modifier • POS 02 or 10 	<ul style="list-style-type: none"> • Contracted rate

Telehealth in the Future

Cross-Border/Out of State Members

- MVP is aligned with current waivers that allow providers to see members in other states.
- Extended to June 30, 2023 for Vermont members – Bill H.654 (Act 85)

Vermont Bill H.411

- Would allow DFR to extend certain COVID mandates through March 31, 2024
- Emergency regulations implemented by DFR will be available at [DFR Regulations, Orders, Bulletins and Market Conduct Exams | Department of Financial Regulation \(vermont.gov\)](#)

Quality in Telehealth Care

Supporting Telehealth Quality Measures

- Access to care
- Financial impact/cost
- Experience
- Effectiveness

Evaluate all aspects of services to:

- Align practices with NCQA and HEDIS measures
- Assess patient satisfaction
- Ascertain clinical outcomes



Provider References and Resources

Reference Library

Provider and Payment Policies, EDI Information and Guides, Resources for Coding and Medical Record Documentation, Guides to MVP Benefits & Plans and Using Our Site

– Available mvphealthcare.com/providers/reference-library

Provider Education Resources

View presentations, guides and tutorial videos on how to register for on provider accounts, submit demographic changes, and check eligibility/benefits, authorizations, claim status

– Available at mvphealthcare.com/providers/education

Medical Policies and Benefits Interpretation Manual (BIM)

Sign In to your online Provider Account at mvphealthcare.com/providers then *Resources* to access Medical and Pharmacy Policies, Prior Authorization requirements, medical criteria, and coverage criteria and exclusions



Other Resources and Contacting MVP

Customer Care for
Provider Services

1-800-684-9286

Electronic Data
Interchange (EDI)

1-877-461-4911 or
ediservices@mvphealthcare.com

Online Provider
Account

Register for secure Provider Portal access
[Providers - MVP Health Care](#)

E-Support

1-888-656-5695 or support@mvphealthcare.com

Thank you!

Contact: Lori Bombardier
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1-802-264-6505

