FRONTIER

DERM PARTNERS

PROVIDER GUIDE TO TELEMEDICINE

INTRODUCTION

OVERVIEW

After timely exploration of options, a physician subcommittee selected Doxy.me as Frontier's telemedicine platform. This platform will allow us to remain compliant with CMS, HIPPA, CDC guidelines and other community safety initiatives, while comfortably allowing us to deliver care to patients if they – or we – cannot come in to the office.

While the implementation was accelerated in response to the spread of COVID-19 and changing CDC guidelines, it's anticipated that telemedicine will continue as an option for patients, even after clinics return to normal operations.

The telemedicine platform is available to all providers to use at their discretion. Providers can conduct telemedicine appointments in-clinic, or from home. An MA will also be involved in telemedicine appointments, and will chart in the appropriate EMR, just as they would in clinic.

GUIDELINES SPECIFIC TO COVID-19

In compliance with current CDC guidelines, offices may remain open for in-office, medically-necessary visits. It is completely at each provider's discretion to determine what is medically-necessary for their patients and should be decided on a case-by-case basis.

For example, a full skin examination could be determined to be medically-necessary or not, depending on the patient:

- A full skin check for a patient with a recent excision of a melanoma, and who has multiple other highly atypical moles requiring a follow-up examination and possible biopsies may be considered medically-necessary;
- A full skin examination for a patient with no history of skin cancers or multiple atypical nevi that require frequent monitoring, would likely be considered "routine" and should be deferred.

The front office/scheduling will continue to schedule patients who want to come in. Providers should review their schedules a few days in advance to determine if any of the visits are not medically-necessary and can have the front office/scheduling convert those visits to telederm visits instead.

WHO TO CALL WITH QUESTIONS

ACCOUNT SET-UP OR SIGN-IN

Domenic DiGirolamo...domenicd@thepersonaltech.com

SCHEDULING

Jessika Morgan (Legacy SFD)...jmorgan@silverfallsderm.net
---- (Legacy Allied) ....

TECHNICAL DIFFICULTIES

Doxy.me Support...
Domenic DiGirolamo...domenicd@thepersonaltech.com

BILLING

Danielle Kasperbauer, Revenue Cycle Director...dkasperbauer@silverfallsderm.net

CODING

Lynn Caruso...lcaruso@silverfallsderm.net

PROVIDER SUPPORT.. LOG ON TO TIGER TEXT FORUM

OVERVIEW OF PRODUCT
https://help.doxy.me/en/articles/661437-welcome-to-doxy-me

HOW TO INVITE A PATIENT TO YOUR VIRTUAL WAITING ROOM
https://help.doxy.me/en/articles/95870-how-to-invite-a-patient-to-your-room

PATIENT QUEUE IN VIRTUAL WAITING ROOM
https://help.doxy.me/en/articles/2426546-patient-queue

HOW TO START VISIT WITH PATIENT
https://help.doxy.me/en/articles/668463-how-to-start-a-call-with-your-patient

WHAT THIS PROCESS IS LIKE FOR YOUR PATIENT
https://help.doxy.me/en/articles/2321493-patient-experience-overview

PROVIDER FAQS

WHEN SHOULD I USE TELEMEDICINE?

How (or if) you use telemedicine is entirely up to you. Telemedicine schedules will be coordinated by your management team and will be dependent on staffing and need at each clinic. A few probable telemed schedule scenarios:

- Provider & MA in clinic, patient at home
- Provider at home, MA at home, patient at home
- Provider in clinic seeing patients in-person, MA assisting, with telemedicine visits fit in between in-person visits

Offices will remain open to in-person medically necessary visits unless we are told otherwise. Please speak to your management team about how you will use telemedicine, in the short and long-term.

HOW LONG ARE TELEMEDICINE APPOINTMENTS?

Telemedicine slots are 15 minutes per appointment.

WHAT ARE MY DEVICE REQUIREMENTS?

must have a smart phone or computer/tablet with a camera and microphone for video capability. If they do not feel comfortable using these devices, please ask them which family member we can reach out to get this set up for them.

This is very similar to using FaceTime, but is conducted via a HIPAA compliant platform.

WHAT TYPES OF APPOINTMENTS ARE BEST SUITED FOR TELEMEDICINE?
Appropriate visits include conditions such as acne, rashes, lesions, toenail fungus, accutane follow up, rx refills Skin cancer screenings/FBSE, procedures and cosmetics are not appropriate for telemedicine.

DO YOU HAVE ANY TECH TIPS?
Legacy SFD providers have had success by pulling up the Cloud for access to the chart, then minimizing it to use the computer desktop and internet to access Doxy.me. You could also do this by having the Doxy.me visit on your phone, and then chart pulled open on your computer. Either way works. Bring chargers for all devices and wear earbuds, which DRASTICALLY reduces feedback and improves the quality of the call.

HOW DO PATIENTS FIND OUT ABOUT TELEMEDICINE?
All practice websites have launched a coordinated communication plan on their websites and social media accounts.

CAN THE PROVIDER, MA AND PATIENT ALL BE IN DIFFERENT LOCATIONS?
Yes. While the provider has a doxy.me account, the MA can join into the appointment just like a patient does. You will send them an invite via a link – the link never expires so they just continually click back into the waiting room. Unfortunately, at the end of each visit, it kicks out the MA so they must rejoin each time.

WHO CAN I GO TO FOR HELP?
There is a list of contacts in this document for specific issues however providers are encouraged to use TigerConnect for questions and issues as much as possible.

WORKFLOW (LEGACY SFD)

SCHEDULING THE APPOINTMENT

Telemedicine appointments are 15 minutes per appointment. The patient must have a smart phone or computer/tablet with a camera and microphone for video capability. If they do not feel comfortable using these devices, scheduling should ask them which family member we can reach out to get this set up for them.

Patient should be informed that is very similar to using FaceTime, but is conducted via a HIPAA compliant platform.

- Please put the patient's preferred smartphone number if they prefer text in the reason for visit. If they are only using email, put their email in the reason for visit.
- Task the Telemed OR/WA Scheduling task group to send the patient email.

    Script for scheduling:

    In response to escalating concerns regarding the containment of COVID-19 we are expanding our services to include telehealth patient appointments. These are virtual dermatology appointments via live video which can be done from most smart phones. The platform is called doxy.me and is HIPAA Compliant.

    This is a safe alternative to coming into the clinic that will allow your skin concerns to be evaluated. Is there a date and time that works best to get your telehealth appointment scheduled with one of our providers?

Appropriate visits include acne, rashes, lesions, toenail fungus, accutane follow up, rx refills. Inappropriate visits include skin cancer screenings/FBSE, procedures and cosmetic treatments.

Scheduling must acquire the patient's email and the best number to text them for the televisit, and put this in the reason for visit.

ONE DAY PRIOR TO APPOINTMENT

At least one day prior to the visit, the Telemed Scheduling OR/WA task group will send an email to the patients booked the following day explaining this process. Scheduling should document that this email was sent in the reason for visit.

The message must be customized for each provider:

    Dear XXX,

    You have verbally consented to receive this email with instructions on your upcoming Telemedicine visit with your provider at Silver Falls Dermatology.

    Doxy.me is a HIPAA compliant, secure telemedicine website. The audiovisual visit uses a camera on your device to record your visit; you must have access to high-speed internet and a compatible browser (Chrome, Firefox, or Safari). Acceptable devices include a desktop or laptop computer with a camera and microphone, a smart phone, or a tablet. The doctor will also have a live camera during the visit. Additionally, there is a chat room where you can type if the audio is malfunctioning.

    For more information and an instructional video you can visit: https://doxy.me/patients or print a copy of this easy step by step flyer: https://help.doxy.me/en/articles/95857-check-in-flyer-for-patients
    Prior to your appointment, please try to take representative photos of your skin concern and send the via the patient portal. Well-lit photos are very helpful for the providers to properly evaluate your condition. Additionally, you may provide a brief written summary of the problem for evaluation during your visit. If you did not receive an invitation to the patient portal, please reach out to our scheduling department.

    To access your upcoming appointment, please click the following link on your smart phone or computer.

You may enter the chat room 15-30 min before your scheduled appointment time to make sure your device and browser are compatible. We also ask that you have a flashlight available if needed for better visibility.

https://frontierderm.doxy.me/xxx

There may possibly be a small wait, so remain in the waiting room until your visit is accepted by your provider. If you experience technical difficulties during your visit, please be patient; we will do our best to get this corrected as soon as possible. We will reach out to contact you if your visit gets interrupted. If you have any questions or concerns, please contact us at 866-599-3376 and one of our team-members will help you.

Financial Policy:

Thank you for choosing us as your health care provider. We are committed to providing quality medical care. Please understand that payment of your bill is considered part of your care plan.

We will verify your insurance coverage and take any related copayments prior to your telemedicine visit. It is the patient's responsibility to supply all current insurance cards and identification.

As a courtesy to our patients, we will submit all claims to your primary and secondary insurance carriers in a timely manner. Insurance plans vary considerably, and we cannot predict or guarantee what part of our services will or will not be covered by your plan. Patients are responsible for knowing the details/rules of their health plan(s), as we cannot change our coding to obtain payment.

If you have any questions about our financial policies, please contact our billing department.

DAY OF APPOINTMENT

The front desk calls patient on the day of the appointment and checks them in after copay is collected. They should ask the patient to be in a well-lit area and have a flashlight available if possible. Double check that they have the link for the visit; if not, we can resend the email.

The patient should be instructed to click the link to the virtual visit, 10-15 min prior to starting and wait in the waiting room until the provider is ready to accept their visit.

MA and the provider are to check the schedule at 8 AM each day. The provider will need to text a link to the waiting room for the MA. MAs should label themselves with name and credentials. (Jane Doe, CMA) 15 minutes prior to the first scheduled visit.

Note, the MA will need to log back into the waiting room after each visit, since the call will be ended. Please make sure you put in your full name and credentials with each visit.

STARTING A VISIT - HPI/PMHX:

The provider will need to start the visit, by clicking on the patient first, then add the MA. The provider will introduce all three parties and let the patient know this visit is conducted in a secure, private area. It is important to remember family members, children, etc cannot be around you during your visit.

MA will log the time the visit begins and document this in the chart note.

Then, the provider may close their camera and mute themselves while the MA confirms DOB and name, updates medication, allergies, PMHx, FHx, and ROS. For ROS, please also ask and document – cough, shortness of breath, congestion, fever. Once, complete the provider will be prompted by the MA to join the call.

PERFORMING THE EXAM

The exam will begin with a front facing camera so that the patient's face will be visualized.

Provider instructs patient to switch to rear facing phone camera using the settings wheel at the bottom of their screen; the rear facing camera is higher quality on most devices and will allow for mobility during the exam.

Photo capture works by going back to the menu on the left side, selecting more, then photo capture. If you have a group call, it will capture a photo of the FIRST person you joined to the group. That is why you need to add the patient first and then the MA.

MA documents locations examined, as provider lists off physical findings for documentation.

ASSESSMENT AND PLAN

Patient is then instructed to turn camera to forward facing again.

The provider goes through assessment and plan, as the MA documents. You may also use the text feature to communicate and if necessary, send word docs or patient handouts through the file share on the app. This is all secure.

Patients will also be encouraged to register for the patient portal. This will be the easiest way to get documents to the patient if needed. Providers may task the Telemed OR/WA task group (not Telemed Scheduling) to upload documents and photos from the visit with the patient if necessary. The Telemed task groups will be able to send encrypted emails if needed as well.

If a lab order is needed, the medical assistant can make a lab order in Intergy and use the providers electronic signature and date stamp. The MA should also call the lab to ensure that is acceptable with their laboratory and verbally confirm the lab orders for that day.

CLOSING THE VISIT

All photos taken during the visit will need to be sent to the Telemed OR/WA task group. A task will also be sent to scheduling (Scheduling task group, not Telemed group), to make the follow up appt. Email follow up questions to the provider and consider doing a quick phone call after the conclusion of the visits to answer any questions.

The MA may then finish documentation in Intergy if time allows or move on to the next visit with the provider.

At the end of the chart note in the A/P, add the following statement:

> ***A two-way, live interactive virtual Telehealth assessment was conducted between the provider and the patient. The patient verified their identity with their date of birth and verbally consented to evaluation and management of their condition through telemedicine. This visit was performed through Telemedicine during the COVID-19 Health Crisis during a state of National Emergency. The patient is aware that we will bill their insurance for this visit following Medicare guidelines, but they may be responsible for some or all of the visit charges if their insurance deems this "non-covered."

WORKFLOW (LEGACY ALLIED)

SCHEDULING APPOINTMENTS

When scheduling a telemedicine appointment, the front desk will speak with the patient directly.

> Hi, this is [name] from [practice].
>
> I'm calling regarding your appointment with Dr. [name] on [date]
>
> OR
>
> I'm calling to schedule your follow up appointment with Dr. [name].
>
> In response to escalating concerns regarding your safety and the containment of COVID-19 we are encouraging our patients to move to telehealth patient appointments if they are comfortable doing so. These are virtual dermatology appointments via live video which can be done from most smart phones. The platform is called doxy.me and is HIPAA Compliant.
>
> This is a safe alternative to coming into the clinic that will allow your dermatological needs to be met. Is there a date and time that works best to get your telehealth appointment scheduled with one of our providers?

Video/Tech Requirements

Patient must have a smartphone or computer/tablet with a camera and microphone for video capability. If you do not have a smartphone or computer/tablet with a camera and microphone, please share with us the contact information of a family member who has a smartphone or computer who will be able to help you with this appointment. This is very similar to using facetime but is conducted via a HIPAA compliant platform. Please put the patient's preferred smartphone number if they prefer text in the reason for visit. If they are only using email, put their email in the reason for visit.

The patient will also need a desktop/laptop to access the link provided via email & the EMA patient portal.

Visit Length

Most visits should be 10, 15 or 20 minutes in length according each providers current schedule allocation. If using 10 or 15 min appts please block every other slot to start. These can be released as we work through issues and increase speed.

Event Types
Telederm – New Patient (an additional email with documents will need to be signed – see below)
Telederm – Established Patient
Telederm – Virtual check in (email/text/photo only)

Appropriate visits include acne, rashes, lesions, toenail fungus, accutane follow up, rx refills. Inappropriate visits include skin cancer screenings/FBSE, procedures and cosmetic treatments.

Scheduling in NextGen

Place on the providers telemedicine template or in their in-person template using one of the new telemed appointment types "Telemedicine - New" or "Telemedicine - Established" or "Telemedicine – Virtual check in" Add the cell or email address in the reason for visit.

*Remind the patient that we will need to check them in on the morning of their appointment and will be calling them.

Email the patient confirmation and instructions

Must be customized for each provider - save an email template of each of your telemed providers

Dear [patient name],

You have verbally consented to receive this email with instructions on your upcoming Telemedicine visit with Dr. [name] on [date] at [time].

Doxy.me is a HIPAA compliant, secure telemedicine website. The audiovisual visit uses a camera on your device to record your visit; you must have access to high-speed internet and a compatible browser (Chrome, Firefox, or Safari). Acceptable devices include a desktop or laptop computer with a camera and microphone, a smart phone, or a tablet. The doctor will also have a live camera during the visit. Additionally, there is a chat room where you can type if the audio is malfunctioning.

For more information and an instructional video you can visit: https://doxy.me/patients or print a copy of this easy step by step flyer: https://help.doxy.me/en/articles/95857-check-in-flyer-for-patients
Instructions on day of visit:

Patient Check List: Preparing for your visit
- Please update your health history via our patient portal: https://northsoundderm.ema.md/ema/PatientLogin prior to your visit. Please click on each tab on the left hand side then press "complete" and "save". If you are struggling to get in, please reply to this email requesting help.
- Please send high quality images for your provider to review prior to your visit to: _____(MA email or customer service inbox). In the email please include first name, last name, and date of birth. These will be added to your medical record.
- Instructions on day of visit:
- Be prepared for your virtual check-in the morning of your appointment. Our front desk will call you to verify insurance, collect copay, etc.
- To access your upcoming appointment, please click the following link on your smartphone or computer. You may enter the chat room 15-30 min before your scheduled appointment time to make sure your device and browser are compatible. We also ask that you have a flashlight available if needed for better visibility. https://frontierderm.doxy.me/xxx (enter unique link)
- There may possibly be a small wait, so remain in the waiting room until your visit is accepted by your provider. If you experience technical difficulties during your visit, please be patient; we will do our best to get this corrected as soon as possible. Please contact _____ for technical assistance.

To access your upcoming appointment, please click the following link on your smartphone or computer. You may enter the chat room 15-30 min before your scheduled appointment time to make sure your device and browser are compatible. We also ask that you have a flashlight available if needed for better visibility. https://frontierderm.doxy.me/xxx (enter unique link)

There may possibly be a small wait, so remain in the waiting room until your visit is accepted by your provider. If you experience technical difficulties during your visit, please be patient; we will do our best to get this corrected as soon as possible. Please contact _____ for technical assistance.

Financial Policy:
Thank you for choosing us as your health care provider. We are committed to providing quality medical care. Please understand that payment of your bill is considered part of your care plan.

We will verify your insurance coverage and take any related copayments prior to your telemedicine visit. It is the patient's responsibility to supply all current insurance cards and identification.

As a courtesy to our patients, we will submit all claims to your primary and secondary insurance carriers in a timely manner. Insurance plans vary considerably, and we cannot predict or guarantee what part of our services will or will not be covered by your plan. Patients are responsible for knowing the details/rules of their

health plan(s), as we cannot change our coding to obtain payment. Telemed visits are subject to copays, coinsurance and deductibles.

I look forward to seeing you at your visit.

Thank you,
Dr. [name]

Send New Patient Paperwork via Docusign

Please alert new patients they will be receiving their new patient forms from DocuSign and to watch for the email. DocuSign Instructions:

https://account.docusign.com/#/username (usernames will be sent in a separate email)

- Username and password: this will be emailed to you separately
- Top tool bar select 'templates'
- On the left side select 'all Templates'
- Select your clinics New Patient Forms
- Click 'use'
- Type in First and Last name of the Patient
- Add Patients email and press send

ONE DAY BEFORE THE APPOINTMENT

24 hours prior to telemed appointment review for new patient paperwork. Managers will assign front desk to check in specific clinics.

- Download New Patient Paperwork via Docusign

Check your schedule for new patients and login to docusign to download their PDF. Attach their signed agreements to EMA attachments. If you are missing new patient paperwork please call the patient and collect.

DAY OF THE APPOINTMENT

Front Desk Check-In Guidelines

On the day of the appointment, call the patient to complete virtual check-in.
- If you are checking in an in-person visit make sure to ask COVID19 screening questions and document in the appointment notes!
- If you are checking in a telederm appointment proceed as follows: Take patient through the current auto-flow to collect copay, etc.
- Create Encounter - MUST select TeleDerm as the Patient Type. This is so the Chart will identify a TeleDerm visit.

Chart Detail in Nextgen > Patient Type easily seen

- If you need to leave a voicemail:

    Hi, this is ____ calling from ____. I'm calling regarding your telederm appointment with ____ today at _____. Please call me back at _____ so we can get you checked in for your appointment and ensure you have everything you need.

Provider/MAs – Performing a Virtual Visit

- Check your schedule
- Log into NG to see your schedule. MAs can send to providers via EMA intramail but the goal is to have providers trained to log into Nextgen directly.
- MA enters Doxy.me prior to visit
- Click on the link and enter your providers unique waiting room
- Please label yourself with name and credentials. (Jane Doe, CMA) 15 minutes prior to the first scheduled visit.

CONDUCTING THE TELEMEDICINE APPOINTMENT

Provider Introductions
The provider will need to start the visit, by clicking on the patient first, and then add the MA. The provider will introduce all three parties and let the patient know this visit is conducted in a secure, private area. Please remember (both providers/MAs) you cannot have family members, children, etc. around you during your visit.

MA/Scribe
The MA will "room" the patient and complete ROS. MA will start the chart note in EMA, Select Appointed place of service as if in-office and Select Established or New.

Please log the time the visit begins and ends, free text this in the chart note under TeleHealth Assessment.

Then, the provider may close their camera and mute themselves while the MA confirms patient identifiers (name, DOB, etc.), updates medication, pharmacy, allergies, PMHx, FHx, and ROS (Patient Clipboard).
Once, complete the provider will join the call.

Conducting the Exam
The provider listens in but can do other things while this is happening. Then the MA says, "Okay Dr. _____, we're ready to start" and he/she will then unmute and put their camera on and say, "I've been listening and it sounds like you have an issue with your acne"

The exam will begin with a front facing camera so that the patient's face will be visualized.
The Provider will instruct the patient to switch to the rear facing phone camera using the settings wheel at the bottom of their screen; the rear facing camera is higher quality on most devices and will allow for mobility during the exam.

To optimize lighting, it may be helpful for the patient to go outside (out of direct sunlight) or use a flashlight and toggle in and out.

Photo capture works by going back to the menu on the left side, selecting more, then photo capture. If you have a group call, it will capture a photo of the FIRST person you joined to the group. That is why you need to add the patient first and then the MA.

MA documents locations examined, as provider lists off physical findings for documentation.

- Confirm insurance ID (ask patient to reply to the email or bring their card to their next in-person visit)
- Collect the copay (emailing or printing are both receipt options)
- charge will show as Reichel Dermatology Associates
- Give patient time/provider and confirm they have their link. Resend email if necessary. Remind patient to be in a well lit area with flash light. They can click the link to the virtual visit, 10-15 min prior to starting and wait in the waiting room.

PROVIDER - ASSESSMENT AND PLAN
Patient is then instructed to turn the camera to forward facing again.

The provider goes through assessment and plan, as the MA documents. You may also use the text feature to communicate and if necessary, send word docs or patient handouts through the file share on the app. This is all secure.

Lab orders can be sent to the patients portal in EMA (please discuss with MA Leads if training is needed).

If patient needs to be sent a handout follow the below instructions on sending through the patient portal:
- In the patient's chart, and select PDF Manager in the Action bar.
- Search for your PDF with the available filters and select Apply Filters and choose the PDF you want to send to the patient then select Finalize.
- In the patient's attachments you will see the handout. Select the attachment that you want to send to the patient and Attach to IntraMail. This will go to the patients portal in their messages.

COMPLETING THE VISIT
If the provider hangs up with the MA between each visit so they can get the patient on first (for purposes of photo capture), they will have to click the link and put in their credentials each visit. EMA intramail will be used for the provider and the MA to communicate in the visit.

The MA will make the follow up appointment in NextGen, specifying in the appointment if it will be telederm or in-person appointment.
If you need to finish something later please send yourself or the front desk an intramail or task (whichever process you typically use for reminders/follow up).

Visit is closed, MA and provider make a note of the time the visit concludes. Provider hangs up with MA and Patient.

The MA may then finish documentation in EMA or Intergy if time allows or move on to the next visit with the provider.

At the end of the chart note in the "telehealth assessment", MA adds the following statement (This can be added as an EMA sticky note):

"A two-way, live interactive virtual Telehealth assessment was conducted between myself and the patient. The patient verified their identity with their date of birth and verbally consented to evaluation and management of their condition through telemedicine. This visit was performed through Telemedicine during the COVID-19 Health Crisis during a state of National Emergency. The patient is aware that we will bill their insurance for this visit, but they may be responsible for some or all of the visit charges if their insurance deems this service "non-covered".

PROVIDERS - CODING THE VISIT

TeleDerm visits are standard E&M visits 99201-99215 for New or Established patients, subject to deductible, copay, coinsurance as if patient was seen in the office but they require a modifier.

Manually adding modifiers to the CPT codes as a suffix only

EMA does not recognize how and when to use TeleHealth modifiers, you will need to manually add the modifier SUFFIX ONLY according to the insurance to be billed:

From the EMA Billing section, click Override Bill and add the suffix (GT) to the CPT code, no space.

EMA OVERRIDE BILL CODE SUFFIX 95/GT FINALIZE › NG

Department	NG Service Item (SIM)	NG Service Item (SIM) Desc	CPT4	Mod1	CPT4 Desc	Place Of Serv
TeleDerm	99201GT	TELEDERM MEDICAL VISIT NEW	99201	GT	OFFICE/OUTPATIENT VISIT NEW	Telehealth
TeleDerm	99202GT	TELEDERM MEDICAL VISIT NEW	99202	GT	OFFICE/OUTPATIENT VISIT NEW	Telehealth
TeleDerm	99203GT	TELEDERM MEDICAL VISIT NEW	99203	GT	OFFICE/OUTPATIENT VISIT NEW	Telehealth
TeleDerm	99204GT	TELEDERM MEDICAL VISIT NEW	99204	GT	OFFICE/OUTPATIENT VISIT NEW	Telehealth
TeleDerm	99205GT	TELEDERM MEDICAL VISIT NEW	99205	GT	OFFICE/OUTPATIENT VISIT NEW	Telehealth
TeleDerm	99211GT	TELEDERM MEDICAL VISIT NEW	99211	GT	OFFICE/OUTPATIENT VISIT EST	Telehealth
TeleDerm	99212GT	TELEDERM MEDICAL VISIT NEW	99212	GT	OFFICE/OUTPATIENT VISIT EST	Telehealth
TeleDerm	99213GT	TELEDERM MEDICAL VISIT NEW	99213	GT	OFFICE/OUTPATIENT VISIT EST	Telehealth
TeleDerm	99214GT	TELEDERM MEDICAL VISIT NEW	99214	GT	OFFICE/OUTPATIENT VISIT EST	Telehealth
TeleDerm	99215GT	TELEDERM MEDICAL VISIT NEW	99215	GT	OFFICE/OUTPATIENT VISIT EST	Telehealth
TeleDerm	99421	TELEDERM OL DIG E/M SVC 5-10 MIN	99421		OL DIG E/M SVC 5-10 MIN	Telehealth
TeleDerm	99422	TELEDERM OL DIG E/M SVC 11-20 MIN	99422		OL DIG E/M SVC 11-20 MIN	Telehealth
TeleDerm	99423	TELEDERM OL DIG E/M SVC 21+ MIN	99423		OL DIG E/M SVC 21+ MIN	Telehealth
TeleDerm	G2010	TELEDERM Remot image submit by pt	G2010		Remot image submit by pt	Telehealth
TeleDerm	G2012	TELEDERM Brief check in by md/qhp	G2012		Brief check in by md/qhp	Telehealth

Click Override Code.

- The Visit note is now updated to interface Telehealth modifier to NG for billing.
- Finalize visit note once Billing section confirms suffix is attached, no modifier needed in EMA, NG will autofill the modifier when appropriate suffix is attached.

Override Bill

#	* ICD-10	
A	Rash and other nonspecific skin eruption (R21)	Clear
B	🔍 ICD10 Search	Clear
C	🔍 ICD10 Search	Clear
D	🔍 ICD10 Search	Clear

Add another ICD row

#	CPT® Code *	Modifiers		
1	9921295			
2	99212GT			

Billing

Edit Charges ›

Override Suggested E/M Code   Bill by Time   **Override Bill**

Billing E/M Code:

No E/M Visit

Overridden Bill:

Position	ICD
A	R21

CPT/HCPCS	Modifiers	Pointers	Units	Insurance
9921295		A	1	- Use Primary -
99212GT		A	1	- Use Primary -

PROVIDER BILLING FAQ

Why do I have to Override Bill in EMA?

An internal configuration in NG called a Service Item (SIM) is put in place to alternate coding and descriptions in NG for a code that already exists in NG... Ie: CPT 99212 is a standard E&M code which is now being used in two different departments/place of service. In EMA, the provider Override Bill code to add a suffix bridges that SIM back to NG means there is minimal manual editing required in NG to bill the Payer.

How do the Plan: TeleHealth and Override Bill selections translate? #1 is the only way to minimize manual edits in billing!

Here are four scenarios:

> If you chart in EMA WITH Plan: TeleHealth Assessment, and you DO override bill code to 992xxGT
> - This creates a TeleDerm visit in EMA and NG with enhanced modifier/place of service automated to expedite Payer submission. YES!!

> If you chart in EMA WITH Plan: TeleHealth Assessment, and DO NOT override the code to 992xxGT:
> - An in-office E&M in EMA and NG is created when finalized with or without a modifier. Requires additional manual edit in NG for place of service Payer submission.

> If you chart in EMA WITHOUT Plan: Telehealth Assessment, but you DO override the code:
> - This does not document that a TeleHealth service was performed to the Payer/Patient, however, the coding is accurate.
> - Visit note amendment recommended

> If you chart in EMA WITHOUT Plan: TeleHealth Assessment, and DO NOT override the code to 992xxGT:
> - An in-office E&M in EMA and NG is created creating a discrepancy to resolve with provider when NG Appt is scheduled/checked-in as TeleDerm
> - Visit note amendment recommended

BILLING TEAM – SENDING CHARGES

Upon Charge Approval the billing team will use the Appt report to identify TeleDerm Appt Types to be audited for coding
- Include Patient Type: TeleDerm as a column criteria to ensure the encounter can be reported as TeleDerm
- At Chart level, Rt click Encounter to Charges
-

Patient Information		Financial

Encounters

Enc Nbr	Enc Date
389508	03/18/2020
387160	03/12/2020
387122	03/12/2020
283456	08/22/2019
273391	08/01/2019
273356	07/31/2019
272888	07/30/2019
272887	07/30/2019

Encounter Information
Encounter Nbr: 389508
Encounter Date: 03/18/2020
Encounter Status: Unbilled
First Bill Date:
Last Bill Date:
Patient Type: TeleDerm
Occurrence Code: Illness
Onset Date:
Admit Date:
Discharge Date:
Facility:
Print Stmt Ind: Yes
Last Stmt Date:
Stmt Counter: 0
Pat Resp Date:
Pending Approval: No
Recalc Failed: No
Arrival Time
Paperwork Posted

Pre-Listed: No

Providers
Rendering:Bassett, Katrina
Refering:Bassett, Katrina
Admitting:
1st Consulting:
2nd Consulting:
Supervisor:
Location: North Sound Dermatology Monroe

ICD-CM ⦿ Diagnoses ○ Procedures ○ COB1 Alt Dx ○ COB2 Alt Dx

Code	Description
L40.0	Psoriasis vulgaris

Guarantor
TEST, DEAN   Relation: Self
20712 Locust Way   Employer:
Lynnwood, WA 98036   Day Phone: (231) 243-1234
USA   Home Phone:

- The assigned SIM with suffix selected by the Provider in EMA will bridge appropriate insurance modifier and Place of Service
- Bill the encounter

- CMS1500 form to see POS 02 with appropriate modifier attached based on payer.

If payer correction or edit is needed, the modifier will also require edit to follow:
- -GT Medicare, MedAdvantage, Medicaid
- -95 Private Payer (commercial employer paid/marketplace plans)

BILLING TEAM – COLLECTIONS
We do not anticipate any issues with payment but please inform management immediately if you have receive any denials. Please keep organized notes re: issues so we can resolve them quickly. Please reach out to your leads.

PATIENT FAQ

DOES MY INSURANCE COVER TELEMEDICINE?

Commercial payers, Medicare and Medicaid now cover telemedicine. VA does not yet, but may soon.

WILL THIS VISIT COUNT TOWARDS MY DEDUCTIBLE?

Yes.

DO I NEED TO PAY A COPAY?

Yes, just the same as an office visit. Some insurance companies may waive co-pays for telemedicine visits. You should contact your insurance carrier for more information.

HOW DO I PAY MY COPAY?

Our front desk will call on the morning of the appointment to collect your copay and check you in prior to your visit.

WHAT IF I NEED A BIOPSY OR OTHER PROCEDURE?

We still have providers working in our office. If you and your provider decide you need a procedure, we will schedule you for this in the physical office.

IF I COME INTO THE PHYSICAL OFFICE FOR A PROCEDURE, AFTER MY TELEDERM VISIT, WILL I GET BILLED TWICE?

No, the provider will bill for your telederm visit like they would an in-person visit. If you need a biopsy or procedure the provider will not bill for another visit, they will only bill for the additional procedure. The provider may ask you to follow up in a few weeks or months either via telederm or in-person and that follow up visit can be billed separately.

HOW WILL I GET MY PRESCRIPTION?

It will be faxed to your pharmacy.

Legacy Allied patients can still use Prescriber's Choice meds, but they will need to call ahead so we can have it ready for them to pick up in office. They can pay over the phone to decrease contact. If they don't want to come in at all and their meds are not covered, we may be able to use a compounding pharmacy.

WHY DO I NEED TO LOG INTO MY PATIENT PORTAL?

We need to make sure your medications, past history, etc... are correct before we start the visit. We will also use the portal to send you your visit summary. You can access any handouts pertaining to your appointment there