

Chapter 33

Telemedicine

NOTE: Please review the following detail for specific processes and expectations with South Country Health Alliance (South Country). South Country may vary from the MHCP Manual and Minnesota Department of Human Services Guidelines. For additional detail on this chapter, please go to the Minnesota Health Care Programs Provider Manual at [MHCP Provider Manual](#)

Billing Information – Please review the [South Country Provider Manual Chapter 4 Provider Billing](#) for general billing processes and procedures.

Telemedicine is defined as the delivery of health care services or consultations while the patient is at an originating site and the licensed health care provider is at a distant site.

To be eligible for reimbursement, providers must self-attest that they meet all of the conditions of the South Country Health Alliance (South Country) telemedicine policy by completing the [Provider Assurance Statement for Telemedicine](#) form, which allows payment for the following services:

- Interactive audio and video telecommunications that permit real-time communication between the distant site physician or practitioner and the member. The services must be of sufficient audio and visual fidelity and clarity as to be functionally equivalent to a face-to-face encounter.
- **"Store and Forward"**: The asynchronous transmission of medical information to be reviewed at a later time by a physician or practitioner at the distant site. Medical information may include, but is not limited to, video clips, still images, x-rays, MRIs, EKGs, laboratory results, audio clips and text. The physician at the distant site reviews the case without the patient being present. Store and forward substitutes for an interactive encounter with the patient present; the patient is not present in real-time.

Originating site

The originating site is the location of an eligible South Country member at the time the service is being furnished via a telecommunication system. Authorized originating sites are listed below:

- Office of physician or practitioner
- Hospital (inpatient or outpatient)
- Critical access hospital (CAH)
- Rural health clinic (RHC) and Federally Qualified Health Center (FQHC)
- Hospital-based or CAH-based renal dialysis center (including satellites)
- Skilled nursing facility (SNF)
- End-stage renal disease (ESRD) facilities
- Community mental health center
- Dental clinic
- Residential settings, such as a group home, assisted living, shelter or temporary lodging

- Home (a licensed or certified health care provider may need to be present to facilitate the delivery of telemedicine services provided in a private home)
- School
- Correctional facility-based office
- Mobile stroke unit

Eligible Providers

The following provider types are eligible to provide telemedicine services:

- Physician
- Nurse practitioner
- Physician assistant
- Nurse midwife
- Clinical nurse specialist
- Registered dietitian or nutrition professional
- Dentist, dental hygienist, dental therapist, advanced dental therapist
- Mental health professional, when following the requirements and service limitations listed in Chapter 22 Mental Health and Substance Use Disorder.
- Pharmacist
- Certified genetic counselor
- Podiatrist
- Speech therapist
- Physical therapist
- Occupational therapist
- Audiologist
- Public health nursing organization

Eligible Members

Telemedicine coverage applies to all South Country members.

List of telemedicine services

The CPT and HCPC codes that describe a telemedicine service are generally the same codes that describe an encounter when the health care provider and patient are at the same site. Examples of telemedicine services include but are not limited to the following:

- Consultations
- Telehealth consults: emergency department or initial inpatient care
- Subsequent hospital care services with the limitation of one telemedicine visit every 30 days per eligible provider
- Subsequent nursing facility care services with the limitation of one telemedicine visit every 30 days

- End-stage renal disease services
- Individual and group medical nutrition therapy
- Individual and group diabetes self-management training with a minimum of one hour of in-person instruction to be furnished in the initial year training period to ensure effective injection training
- Smoking cessation
- Alcohol and substance abuse (other than tobacco) structured assessment and intervention services

General

In addition to other requirements, refer to the following general telemedicine information:

- Member coverage benefits and requirements apply to services provided via telemedicine
- Payment will be made for only one reading or interpretation of diagnostic tests such as x-rays, lab tests and diagnostic assessments
- Payment is not available to providers for sending materials to members, other providers or facilities

Two-Way Interactive Video Consultation in an Emergency Room (ER)

Two-way interactive video consultation may be billed when no physician is in the ER and the nursing staff is caring for the patient at the originating site. The ER physician at the distant site bills the ER CPT codes with Place of Service 02. Nursing services at the originating site would be included in the ER facility code.

If the ER physician requests the opinion or advice of a specialty physician at a "hub" site, the ER physician bills the ER CPT codes and the consulting physician bills the consultation E/M code with Place of Service 02

Coverage Limitations

The following limitations apply:

- Payment for telemedicine services is limited to three per week for a South Country member
- Payment is not available for sending materials to a member, other provider or facility

The following are not covered under telemedicine:

- Electronic connections that are not conducted over a secure encrypted website as specified by the Health Insurance Portability & Accountability Act of 1996 Privacy & Security rules (for example, Skype)
- Prescription renewals
- Scheduling a test or appointment
- Clarification of issues from a previous visit
- Reporting test results
- Non-clinical communication
- Communication via telephone, email or fax
- Day treatment

- Partial hospitalization programs
- Residential treatment services
- Case management face-to-face contact

Billing Telemedicine Services

Submit claims for telemedicine services using the CPT or HCPC code that describes the services rendered. Include the GQ modifier when billing for services provided via asynchronous telecommunication.

All claims for telemedicine services require Place of Service 02. Place of Service 02 certifies that the service meets the telemedicine requirements.

When reporting a service with Place of Service 02, you are certifying that you are rendering services to a patient located in an eligible originating site via an interactive audio and visual telecommunications system.