

# Telehealth Updates For COVID-19 State of Emergency and Other PCONN Updates

March 31, 2020

**Substance Abuse Prevention and Control County of Los Angeles Department of Public Health** 





What is Telehealth



Telehealth Policies Related to State of Emergency- COVID-19



**Changes to Provider Connect (PCONN)** 

**Notes** 

**Treatment** 



**Documenting Telehealth Services** 



**Billing for Telehealth Services** 



**Questions** 

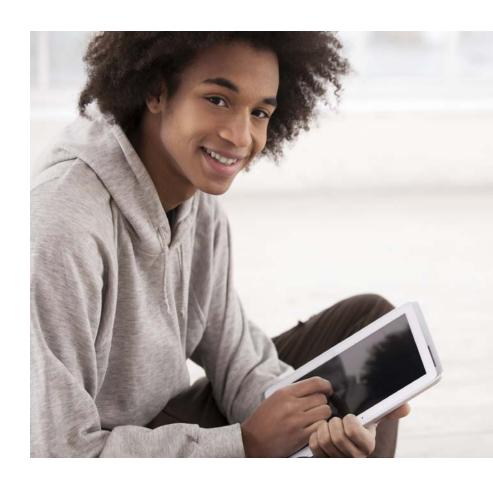
Outline

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#### What is Telehealth?



- The provision of a wide range of services via a two-way audiovisual link between a patient and a care provider.
- Alternative to traditional face to face interaction without disrupting services.



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#### What's the Difference?



#### Telephone

Audio or TTY/TDD

Limited DMC Services
Available

No Additional Consent Required

#### Telehealth

Interactive Audio <u>AND</u> Visual

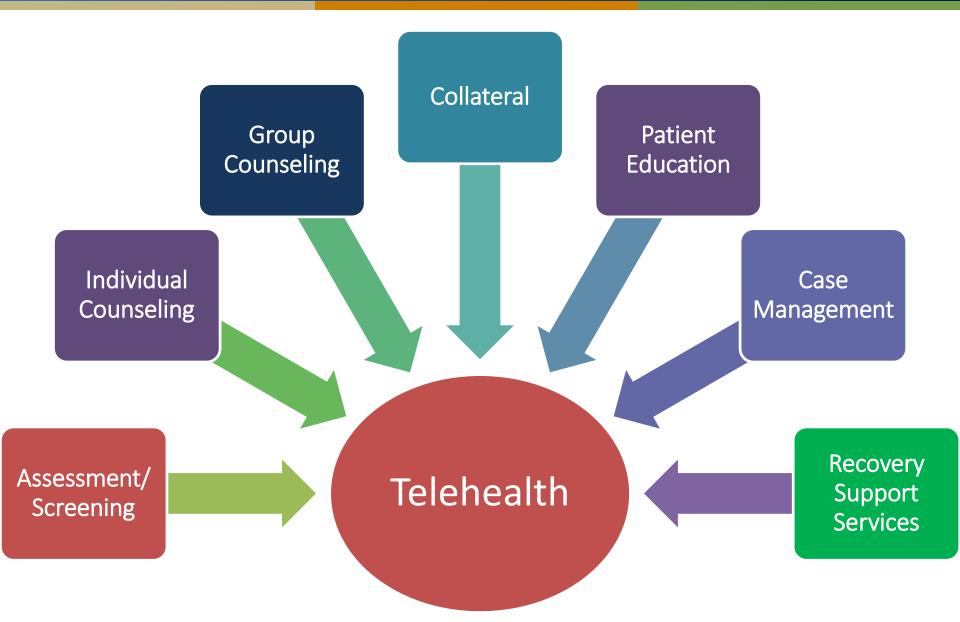
Full Scope of DMC Services

Includes Screening,
Assessment and Groups

Specific Telehealth Consent Required

#### **Telehealth Expands Your Services**







## Telehealth Policies During State of Emergency

#### **SAPC Information Notice 20-03**

 Requires submission of the Telehealth Attestation form to Daniel Deniz within 30 days of offering Telehealth services.

#### **DMC Certified Site waiver**

 During this emergency period telehealth services may be rendered by a provider from any location to a patient at any location.

#### **Telehealth Policies During State of Emergency**



#### **HIPAA Compliant Telehealth Platform**

- Per the Office of Health and Human Services: *During the nationwide public health emergency,* covered health care providers may use non-public facing remote communication products for telehealth services.
  - Providers <u>SHOULD NOT</u> use feeds such as Facebook Live, TikTok, Instagram, Periscope or any other public facing website.
- If a NON-HIPAA compliant telehealth platform is used, <u>patients must be</u> <u>explicitly notified of potential privacy issues.</u>
  - Regardless of HIPAA compliancy, the agency is responsible for ensuring the privacy and confidentiality of their patients utilizing Telehealth.
    - Be aware of surroundings: what is visible in the background? Can someone overhear? What ambient noise might there be (kids, pets)?
       What is the understanding of recording the session?

#### **Privacy Policies for Telework/Telehealth**



Due to the waiving of certain DMC requirements for location of services, it is extremely important that providers ensure staff are maintaining strict privacy and confidentiality protocols.

Ensure Others
Cannot Hear
the Session

Do Not Have Session Outdoors

Separate
Enclosed Area
for Service
Delivery

Privacy

Patient is
Notified if
Counselor is
Off-Site

#### **Telehealth Consent**



**CONSENT:** Telehealth services require specific consent, therefore the consent patients' signed at the beginning of treatment is not sufficient.

- Agencies may use their own consent form for Telehealth Services. If a signature is not immediately obtainable, the patient signature must be obtained at the following in person session.
- Staff should also note consent was obtained on the first telehealth service progress or MISC note.
  - If a non HIPAA compliant platform is used, note the patient was explained potential privacy limitations.

#### **Documenting Telehealth**



**NOTES:** All Progress and/or Miscellaneous Notes for Telehealth Services will note the Method of Service Delivery was Telehealth.

 Primary Users will have the option of selecting Telehealth as a service type, however, they will still need to write in the first narrative box of each note the service is a "Telehealth Service" until the Provider Activity Report is updated to reflect the new selection

options for service type.



### Provider Connect (PCONN) Updates



#### **Provider Connect Progress Note/Miscellaneous Note**



Miscellaneous Note Options			
Date of Service Today	Yesterday 1.	Program Search for: Search	
Service Start Time  Current Time	2.	Service End Time  Current Time	
Method of Service Delivery Face-to-Face Field Based Services Not Applicable Telehealth Telephone	3.		

- 1. Changed from "Date" to "Date of Service" to be more specific
- 2. Changed from "Start Time/End Time" to "Service Start Time/Service End Time"
- 3. Added "Method of Service Delivery" selections
  - **A.** Face-to-Face- In person session only (do not use for Telehealth)
  - **B. Field Based Services-** Used when service was delivered at a contracted Field based site.
  - **C. Not Applicable-** Used when the service did not involve another person or patient, such as Record Review, No Show, Non Billable Services
  - **D. Telehealth** When the service was delivered specifically using a Telehealth platform with interactive Audio *AND* Visual capabilities.
  - **E. Telephone** When the service was delivered over the phone or TTY/TDD audio only

#### **Field Based Services**



Method of Service Delivery  Face-to-Face  Field Based Services  Not Applicable	
○ Telehealth	
Telephone	
Date of Travel 03/01/2020 Today Yesterday	
Time To Destination:	
Start Time	End Time
09:42 AM Current Time	09:57 AM Current Time
Travel From Destination:	
Start Time	End Time
10:30 AM Current Time	10:51 AM Current Time

When Field Based Services radio button is selected, the following fields become active:

- **1. Date of Travel-** Input the date the travel occurred (Should be the same as Date of Service)
- 2. Time To Destination- Enter Start/End Time of travel to the destination
- **3. Travel From Destination-** If returning to office after service, providers would enter the Start/End time from the Field site back to office.

<sup>\*\*\*</sup>Important Note: Providers can only claim up to 30 minutes for travel time each way.

Travel to and from the home is not reimbursable.

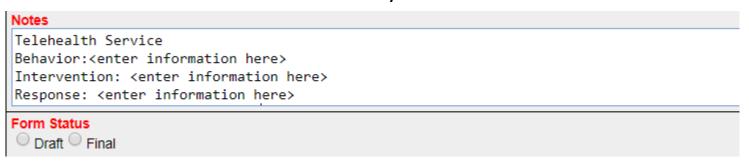
#### **Option 1 to Documenting Telehealth**



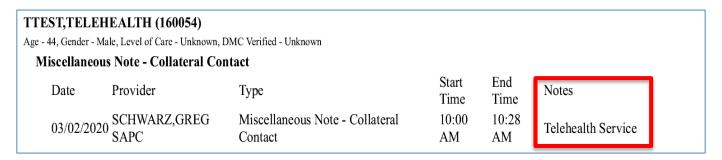
Providers may choose to document ALL Telehealth Services on the Miscellaneous Note during the state of emergency period.

When using the Misc Note for services that would typically be documented on a progress note, the Misc Note MUST take the format of the approved progress note type (BIRP, SIRP, GIRP, SOAP) as noted in the snip below.

The first line of the Note narrative box MUST say 'Telehealth Service'



Writing Telehealth Service first will allow billers using the Provider Activity Report to recognize which services were provided via Telehealth



#### **Option 2 to Document Telehealth**



- Providers will continue using the appropriate Misc and/or Progress notes to document services
- The first line of the first narrative box (Behavior, Subjective, Situation, Goal) needs to indicate 'Telehealth Service.'
- Provider will create an Internal Tracking Log of all Telehealth Services.
  - The Log should include at minimum: Patient Name, Date of Service, Procedure Code, Method of Service Delivery, Rendering Practitioner and Duration.
  - The Log shall be maintained and made available to SAPC and/or DHCS upon request.

#### **Billing Procedures for Telehealth**



## Primary Sage Users

Provider Activity
Report to Identify
Telehealth
Services

Create Treatment and Select
Telehealth as
Place of Service

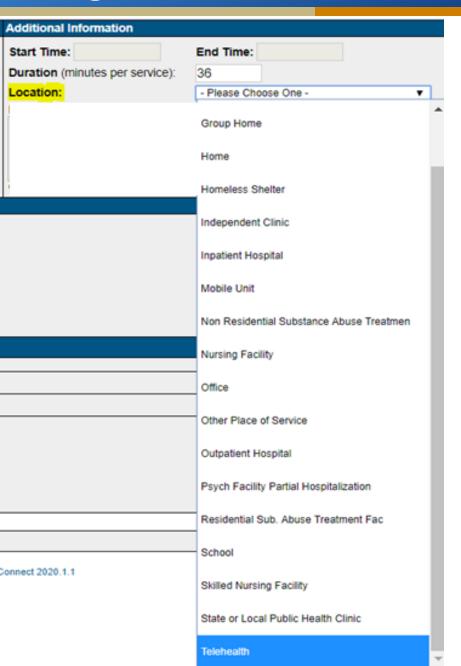
#### Secondary Sage Users

Ensure Telehealth
Services are
Clearly Marked in
EHR

837 File- Place of Service SV105 Segment for is 02

#### **Billing Procedures for Telehealth**





- Per DHCS guidelines a separate location code must be used for Telehealth Services or risk the claim being disallowed.
- Telehealth was added to the 'Location' as an option.
- All Telehealth services must include the "Telehealth" location.
- To verify a service is telehealth, run the Provider Activity Report or review the Telehealth Log
  - If using the Misc Note: The providing practitioner should have entered "Telehealth Service" in the first narrative box which would populate the "Notes" column of the provider activity report, as seen in the snip below.



## Questions?