



Wound Care Telehealth during COVID-19

Billing and Compliance FAQ (Updated 4/30/2020)

Since CMS signed the 1135 waiver in response to the public health emergency, Coronavirus, rules and regulations related to telehealth have expanded. This FAQ is designed to provide basic information and resources you can use to help you understand telehealth services. Once you understand the available telehealth services, you can decide if you will use telehealth to continue caring for your patients during this time. The guidelines will expire when the waiver expires, which is still to be determined by CMS.

This FAQ is based on information released 4/30/2020 in the [COVID-19 Emergency Declaration Blanket Waiver](#). Due to the frequency of changes, we recommend you verify the information provided with your billing departments and/or insurance carriers before performing or billing for telemedicine.

Additional information about how Net Health can help during this pandemic can be found on our [Customer Communication Resource Page](#). View the webinars sections of the resource page to learn more about how to build your workflows/ processes around telehealth, hosted by Cathy Hess, Net Health's Vice President of WoundExpert 360 Professional Services and Chief Clinical Officer for Wound Care.

What codes do I bill for telehealth services?

The billing regulations for telehealth services vary based on your type of practice, your state, and the insurance payer; regulations are also changing rapidly. Due to these varying regulations, we recommend you refer to the current emergencies page at [CMS.gov](#), along with your state's Medicaid website, and individual insurance payer websites for guidance. Your professional organizations ([APWCA](#), [APWH](#), [ACCWS](#), [AAWC](#) and [UHMS](#)) may also be able to help guide you.

You can access the appropriate billing codes in WoundExpert for telehealth services and we will continue to update these should there be any changes.

CMS has expanded the waiver to allow Hospital facility charges, but there are preliminary steps that must be taken first. CMS outlines the process in their [Hospitals](#) waiver document and in the interim final rule. Please check with your hospital billing department and carrier policies for clarification and potential updates. Hospitals that employ QHP within the wound care departments and provide professional billing would maintain their same billing practices.



How do I know my outpatient wound care facility can bill for telehealth wound care services?

The April 30th IFC (see link below) detailed requirements for an outpatient wound care facility to be able to bill for services.

To temporarily designate a hospital provider-based department (PBD) to an off-campus site (including a patient's home) you must complete the following steps:

- Be sure your state and local pandemic plans allow for temporary relocation.
- Ensure all non-waived Conditions of Participation can be met by your hospital.
- Notify your regional CMS office with an attestation and all necessary information via email of your temporary off-site expansion within 120 days of March 1, 2020.

There are three service categories for hospital providers who temporarily relocate the PBD as outlined in the [Hospitals](#) waiver information. Please consult with your hospital outpatient billing department to determine which category might best apply to your service type.

What modifiers and place of service codes do I use for telehealth services?

You can apply any telehealth modifiers within the Superbill. Additionally, if currently utilizing the Component of Care feature in WoundExpert, you can also apply the telemedicine Location of Services (POS) within the Superbill. Please utilize the [How-To](#) documentation or contact Client Services at feedback@nethealth.com to update the dropdown choices for Location of Services (POS). Per the Interim Final Rule pages 58-59, for facility billing, temporary off-site provider-based departments who have established a location as a patient's home or alternative location, can use the modifier PO to bill for telemedicine services. This will allow reimbursement under OPPS rather than PFS.

How much will I be reimbursed for telehealth services?

While reimbursement for services varies based on payer, state, and practice setting, you can use the [CMS Physician Fee Search Tool](#) as an estimate.

Under the "extraordinary circumstances relocation" policy, provider-based departments who have attested to establishing an excepted off-site location including a patient's home will be reimbursed under the OPPS rates if the correct modifiers are included on the claims per page 58 of the Interim Final Rule.

Your reimbursement is also going to depend on making informed decisions related to billing codes and modifiers, so be diligent about doing your homework and checking with insurance payers before you start providing telehealth services.



Can I document telehealth services in Wound Expert?

Yes, you can use WoundExpert to document telehealth services. You may want to consider customizing certain areas to streamline your documentation and to clearly identify the visit as a telehealth visit. This might include adding a new visit type, updating your billing codes, and creating a telehealth specific workflow(s).

Please remember to follow documentation guidelines for each payer as we have found the requirements can differ considerably.

Visit our [Resource Page](#) for more information on how to use WoundExpert to document telehealth services, including a sample workflow checklist.

Do I need to use the new ICD-10 code for COVID-19?

ICD-10 codes are alphanumeric codes used by practitioners, insurance companies, and others to represent diagnoses. An emergency ICD-10 code was made available for use in response to this public health emergency: U07.1 (2019-nCoV Acute respiratory disease)

On 4/1/2020, this diagnosis code became available for use in WoundExpert if it applies to your patient and your practice.

Where can I find the CMS rules?

- The April 30 [Interim Final Rule CMS-5531-IFC](#) from CMS is available to review
- The [CMS Current Emergencies Page](#) contains many resources in one place.
- The [COVID-19 FAQ on Medicare Fee-for-Service Billing](#) is updated regularly by CMS.