

Telehealth DSMT and MNT and Medicare Waivers Per Covid-19 Emergency May 8, 2020 Update



DSMT = Diabetes Self-Management Training

and

MNT = Medical Nutrition Therapy



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Learning Objectives

1. Explain the very latest Medicare COVID-19 waivers as of May 8, 2020 for billing Medicare for telehealth DSMT and MNT

Important Disclaimer

The information in the deck is intended to provide users with information believed to be current and accurate **as of MAY 8, 2020**. CMS has been modifying its telehealth waivers on a **daily basis** in order to further expand the use of telehealth for select services (that includes DSMT and MNT) and to further simplify the billing rules. The information in this deck is not intended as, nor should it be construed as legal, financial, medical or other regulatory advice. Users are to exercise their professional judgment in connection with this information.

Medicare Hot Line at: <https://www.cms.gov/files/document/provider-enrollment-relief-faqs-covid-19.pdf>

P_{RE}-C_{OV}ID: M_{ED}ICARE R_{ULES} ARE C_{ON}STANTLY C_HANGING!

How to be keep abreast of changes?

Sign up for free MLN Newsletter on the CMS website:

The Medicare Learning Network®



Free educational materials for health care professionals on CMS programs, policies, and initiatives.
Get quick access to the information you need.

<https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNGenInfo/Index.html>

COVID-19 WAIVERS ARE CONSTANTLY CHANGING!

Visit often the pages on these websites on COVID-19 and Medicare waivers:

- ADCES website
 - <https://www.diabeteseducator.org/practice/practice-tools/app-resources/covid-19-information>
- Academy of Nutrition and Dietetics website
 - <https://www.eatright.org/coronavirus>
- CMS website
 - <https://www.cms.gov/About-CMS/Agency-Information/Emergency/EPRO/Current-Emergencies/Current-Emergencies-page>

Medicare DSMT and MNT Telehealth: **Telephone Only Allowed (1)**

COVID-19 WAIVERS

- Can now use **AUDIO (TELEPHONE)** only with beneficiary who is at remote location (e.g., beneficiary's home)
 - IF interactive audio and video telehealth technology is available, CMS recommends that it is used



Medicare DSMT and MNT Telehealth: **Telephone Only Allowed (2)**

COVID-19 WAIVERS

- Do **document** in beneficiary's EHR that visit was AUDIO by TELEPHONE

Client: Aceto, John R. DOB: 07/16/1990 Gender: Male ID# 000028 Intake: 01/13/2003 12:00am ReAdmit: 01/12/2003 12:00am

Encounter Information

Type: Counseling
Activity Type: 02 Face to Face
Language Other Than English: ☐
Delivered Off-Site: ☒
Encounter With: 05 Client or Client With Others
Client Involved: ☒

Completed Information

Actual Date/Time: 10/05/2015 Time: 02:52pm CST
Duration (hh:mm): 00:35
End Date/Time (System Generated): 10/05/2015 Time: 03:27pm CST
Completed By: Beckham, Gary
Location: 04 Agency Office
Outcome: 02 Received Services, Follow Up Required

Diagnoses and Medications

Diagnoses on File

Priority	Description	ICD9	Diagnosis	ICD10	Axis	DSMBV	Priority	Date
Primary		799.29	Other signs and symptoms involving emotional state; ICD9: 799.29	R45.4	1		1	10/5/2015
Secondary		295.40	AC SCHIZOPHRENIA UNSPEC; ICD9: 295.40; DSM4: 295.40	F208.1	1	295.40	2	3/11/2013

Medications on File

Medication	Started	Frequency	Route	Duration	Provider	Prescribed by	Address
Haldol	9/1/2015	Twice a Day	Oral	30 days			
Thorazine 200MG Oral Tablet	9/1/2015	Every 12 Hours	Oral	30 days			

Service Related Encounter Information

Program Providing Service: COUNPS Counseling & Psych
Facility Providing Service: 00106 Main Campus (Lic# 00106)
Service Authorization:
Progress Note:
Met with John today to discuss his progress towards achieving his treatment plan goals. John has indicated that he believes medication management has assisted him. John continues to struggle with the psychosis aspect of his diagnosis, but has made significant strides.

Medicare DSMT Telehealth: **Distant Site Practitioners, or Who Are Allowed to Furnish DSMT Telehealth (1)**

COVID-19 WAIVERS

- **RNs** and **pharmacists** are now allowed to ALSO furnish telehealth DSMT telehealth
- Change is effective March 1, 2020 (retroactive) and lasts through duration of COVID-19 PHE



Medicare DSMT and MNT Telehealth: **Hospital Billing on UB-04 Claim Form (1)**

COVID-19 WAIVERS

- Hospitals can now bill on a **UB-4 claim form**

The image shows a sample UB-04 claim form, which is a standard Medicare billing form for hospitals. The form is divided into several sections: 1. Header section (top) for patient information, including name, address, and date of birth. 2. Section 1 (Patient Information) for patient details. 3. Section 2 (Insurance Information) for insurance details. 4. Section 3 (Billing Information) for billing details, including a large table for charges. 5. Section 4 (Summary) for totals and other summary information. The form is filled with red lines and text, indicating it is a sample form.

Medicare DSMT and MNT Telehealth: **Hospital Billing on UB-04 Claim Form (2)**

COVID-19 WAIVERS

- When furnished by **hospital outpatient clinical staff**, hospital:
 - To bill for these services as if they were furnished in the hospital and
 - To be consistent with any specific requirements for billing Medicare during COVID-19 PHE
- Translation: can be furnished in hospital outpatient setting **remotely** (as a distant site) to beneficiary in the **beneficiary's home**

Medicare DSMT and MNT Telehealth: **More on Hospital Billing (3)**

COVID-19 WAIVERS

- **Beneficiary's home** can serve as temporary provider-based dept. of hospital
 - Is part of CMS' "Hospitals Without Walls Initiative"
- If hospital previously billed on **UB-04 claim form**, to continue to bill same way
- Beneficiary must be a **registered outpatient** of hospital

Medicare DSMT and MNT Telehealth: **More on Hospital Billing (4)**

COVID-19 WAIVERS

Actual language from CMS:

Hospital-Only Remote Outpatient Therapy and Education Services¹:

- *“Consistent with the CMS’ “Hospitals without Walls Initiative”, we have announced that hospitals may provide behavioral health and **education services** furnished by hospital-employed counselors or other professionals that **cannot bill Medicare directly** for their professional services. This includes partial hospitalization services.”*

1. Source: Hospitals: CMS Flexibilities to Fight COVID-19, April 29, 2020
<https://www.cms.gov/files/document/covid-hospitals.pdf>

Medicare DSMT and MNT Telehealth: **More on Hospital Billing (5)**

COVID-19 WAIVERS

Actual language from CMS, continued:

Hospital-Only Remote Outpatient Therapy and Education Services¹, continued:

- *“These services may be furnished to a beneficiary **in their home** when the beneficiary is **registered as an outpatient of the hospital** and the hospital considers the beneficiary’s home to be a **provider-based department** of the hospital.”*

Medicare DSMT and MNT Telehealth: **More on Hospital Billing (5)**

COVID-19 WAIVERS

Actual language from CMS, continued:

Hospital-Only Remote Outpatient Therapy and Education Services¹, continued:

- *“During the PHE, a subset of therapy and **educational services** are eligible to be provided **remotely** by the **hospital clinical staff** so long as they are furnished to a patient in the hospital, which may include the **patient’s home** if that home is made **provider-based to the hospital** during the PHE.”*

Medicare DSMT and MNT Telehealth: **Distant Sites**

COVID-19 WAIVERS

- **STILL excluded** as distant sites (same as pre-pandemic):
 - Independent renal dialysis facilities
 - Pharmacies
- But, ADCES is advocating with CMS for inclusion of these sites for Medicare telehealth DSMT and MNT

Medicare DSMT and MNT Telehealth: **Procedure Code Modifiers**

COVID-19 WAIVERS

- CMS has **NOT** issued guidance on use of a **specific modifier** on the approved/required procedure code for the telehealth benefit when it is furnished via **AUDIO only (TELEPHONE)**
- Until such guidance is published, no modifier for TELEPHONE only telehealth DSMT and MNT is required on the claim form

Other Medicare-Payable Billing Codes for Virtual Services For Medicare Part B Providers (1)

COVID-19 WAIVERS

- CMS identified **other codes** that can be used by other qualified health care professionals such as social workers, speech language pathologists, physical and occupational therapists
- **The CMS list does NOT include RNs or pharmacists**
- Per guidance from Academy of Nutrition and Dietetics, RDNs may temporarily utilize these codes during Covid-19 PHE
- **BUT: these codes NOT used for DSMT or MNT (see next slide for codes)**

Other Medicare-Payable Billing Codes for Virtual Services For Medicare Part B Providers (2)

COVID-19 WAIVERS

- **98966:** Telephone assessment and management services provided by a qualified non-physician health care professional to **established*** patient, parent, or guardian **NOT** originating from related assessment and management service provided within **previous 7 days NOR** leading to assessment and management service or procedure within **NEXT 24 hours** or soonest available appointment; **5-10 min.** of medical discussion
- **98967:** 11 – 20 min.
- **98968:** 21 – 30 min.

*CMS stated it will relax
enforcement of this word
in the definition

Other Medicare-Payable Billing Codes for Virtual Services For Medicare Part B Providers (3)

COVID-19 WAIVERS

- Other virtual care codes for Medicare Part B providers...including **RDNs**:
 - G2061: Qualified non-physician healthcare professional **online assessment and management**, for **established** patient, **for up to 7 days**, cumulative time* during the 7 days; **5-10 minutes**
 - G2062: **11-20 minutes**
 - G2063: **21 or more minutes**

The CMS list does

NOT include

RNs or pharmacists

*See next slide for details

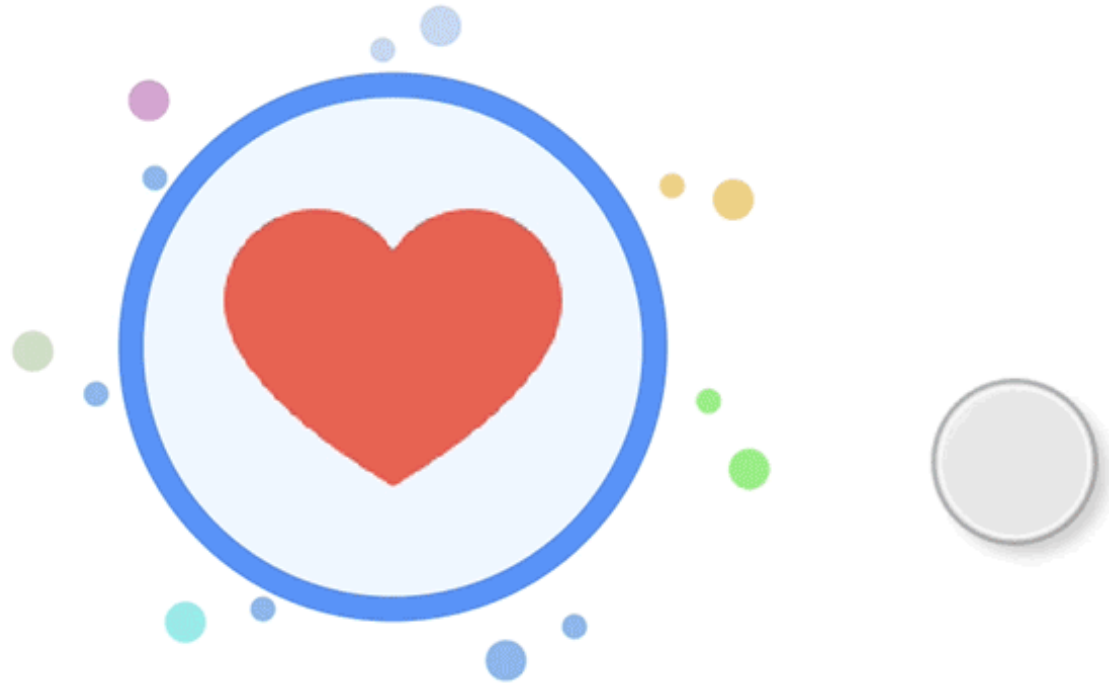
Other Medicare-Payable Billing Codes for Virtual Services For Medicare Part B Providers (4)

COVID-19 WAIVERS

***Cumulative time includes:**

1. Review of initial inquiry
2. Review of patient records pertinent to assessment of patient's problem
3. Personal interaction with clinical staff focused on patient's problem
4. Development of management plans (incl. generation of prescriptions or ordering of tests), and
5. Subsequent communication with patient
 - Communication can occur through: online, telephone, email, or digitally supported communication

My Parting, Warmest Thoughts to You



Be B. E. S. T. ...

Better, Ever Stronger...Together!

***I think this should be our own
new “mantra” during this trying period!***

References (1)

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10. Blanket Waivers for HealthCare Providers Fact Sheet:
<https://www.cms.gov/files/document/summary-covid-19-emergency-declaration-waivers.pdf>
11. Guidance on Remote Hospital Outpatient Services including DSMT:
<https://www.cms.gov/files/zip/covid-ifc-2-list-hospital-outpatient-services.zip>
12. Waivers and flexibilities resources:
<https://www.cms.gov/about-cms/emergency-preparedness-response-operations/current-emergencies/coronavirus-waivers>
13. AND Resources for RDN and MNT: eatrightpro.org/telehealth



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