Humana telehealth reference guide for healthcare providers

Humana's priority during the COVID-19 outbreak is to support the safety and well-being of the patients, communities and healthcare providers we serve. Accordingly, during the public health emergency (PHE), Humana is expanding access to telehealth and other virtual services to support providers caring for their Humana patients. To make working with us simpler, we have developed the reference guide below, which lists direct links to helpful information around Humana's coverage, reimbursement rules, requirements and program information for telehealth services provided through remote communication technologies.

	Telehealth reference guide					
What is telehealth?	Telehealth is a means to deliver healthcare services to a patient who is at a different physical location than the					
	health professional, using electronic information or telecommunications technologies consistent with					
	a pplicable state and federal law. Tel ehealth services include telemedicine services and are also known as					
	virtual visits.					
	Claims payment policy – search COVID-19 Telehealth and Other Virtual Services During the COVID-19 PHE					
	Humana.com/provider/medical-resources/claims-payments/claims-payment-policies					
Centers for Medicare	Medicare telemedicine healthcare provider fact sheet					
& Medicaid Services	www.cms.gov/newsroom/fact-sheets/medicare-telemedicine-health-care-provider-fact-sheet					
(CMS) guidance	Medicare Learning Network Booklet on Telehealth Services					
(ente) galdariee	www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/					
	downloads/TelehealthSrvcsfctsht.pdf					
Telehealth channels	Guidance and application options for telehealth services					
	www.hhs.gov/hipaa/for-professionals/special-topics/emergency-preparedness/notification-enforcement-					
	discretion-telehealth/index.html					
	Humana's selected solutions for virtual care					
	https://www.humana.com/provider/telehealth/virtual-care-solutions					
Telehealth and virtual	Resources developed to support your practice with patient adoption of telehealth					
care resources for	https://www.humana.com/provider/telehealth					
healthcare providers						
	Claims now ant policy convet COVID 10 Talebackh and Other Vietual Carries Duving the COVID 10 DUC					
Coverage criteria	Claims payment policy – <i>search</i> COVID-19 Telehealth and Other Virtual Services During the COVID-19 PHE					
Comvise overile bility	Humana.com/provider/medical-resources/claims-payments/claims-payment-policies					
Service availability	Services coverable when provided using real-time, interactive audio-video communications					
D.III.	Humana.com/provider/telehealth-service-ability					
Billing	Services and testing that are billable as telehealth services. <i>Modifier 95</i> is necessary to ensure appropriate					
Billing	cost-sharing determination and should be used to indicate the service was provided virtually, according to					
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For information concerning virtual care consults and available resources through MDLive, please visit MDLIVE.com/Humana Medicare.

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Visit types and line of business can impact the eligibility of risk adjustable services. The grid below summarizes the technology solution and qualification status for commercial risk adjustment (CRA) and/or Medicare risk adjustment (MRA), as well as exemplifies common Current Procedural Terminology (CPT[®]) and Healthcare Common Procedure Coding System (HCPCS) codes for visit types.

COVID-19 telehealth and other virtual services eligible for risk adjustment								
	Medicare- covered services	Qualifies for CRA	Qualifies for MRA	Physician location	Submission place of service (POS)	Common CPT [®] and HCPCS codes		
Telehealth (interactive audio telecommunication simultaneously with video telecommunication)	х	x	х	Home/office/facility	Use CPT telehealth modifier "95" with appropriate POS	99201 – 99215 (office or outpatient visit) G0425 – G0427 (telehealth consultations, emergency department or initial inpatient)		
Telephonic visit (audio only)	х	х		Home/office/facility	Use audio-only modifier '93' with appropriate POS	99441-99443		
Virtual check-in (5 to 20 minute visit)	х	х	Х*	Home/office/facility	Appropriate POS	G2010, G2012, G2252		
E-visit (use of patient portal)	х	х		Home/office/facility	Appropriate POS	99421, 99422, 99423		

*G2010, G2012 and G2252 qualify for risk adjustment encounter data system (EDS) submission and should be used for visits that use interactive audio telecommunication simultaneously with video telecommunication. Humana maintains that any service rendered that is audio only does not meet the face-to-face requirement for risk adjustment. Therefore, if an audio-only visit is conducted, use the telephonic evaluation and management (E/M) codes (e.g. 99441 – 99443), as appropriate.

As with in-person visits, healthcare providers can positively impact their patient's experience by discussing HEDIS and Stars measures during telehealth visits. The chart below highlights how Medicare Advantage (MA) quality measures can be satisfied via telehealth and in-home test kits.

Clinical HEDIS measures	Can be SATISFIED by telehealth (includes audio only)	Can be SATISFIED with an in-home test kit	
Breast Cancer Screening (BCS)	Yes ¹	No	
Care for Older Adults – Medication Review (COA-Med)	Yes	No	
Care for Older Adults – Pain Screening (COA-Pain)	Yes	No	
Colorectal Cancer Screening (COL)	Yes ¹	Yes	
Controlling Blood Pressure (CBP)	Yes	No	
Eye Exam for Patients with Diabetes (EED)	Yes ¹	No	
Hemoglobin A1c Control for Patients with Diabetes (HBD)	Yes ¹	Yes ²	
Kidney Health Evaluation for Patients with Diabetes (KED)	No	No	
Osteoporosis Management in Women who had a Fracture (OMW)	No	No	
Statin Therapy for Patients with Cardiovascular Disease (SPC)	No ³	No ³	
Transitions of Care			
Notification of Inpatient Admission	No	No	
Receipt of Discharge Information	No	No	
Patient Engagement After Inpatient Discharge	Yes	No	
Medication Reconciliation Post-Discharge (MRP)	Yes	No	
'Can be satisfied during a telehealth visit when a patient-reported serv	ice is documented in a submitted medical	record	
² Can be satisfied when a returned hemoglobin A1c (HbA1c) test kit res	ults of 9% or less		
³ Prescription written at the time of care may and will only satisfy the o name), strength/dose, route and date when the medication was disper Humana is present.		· · · · · · · · · · · · · · · · · · ·	
Patient Safety (Part D) measures			
Medication Adherence for Cholesterol (Statins) (MedA-Statin)	No	No	
Medication Adherence for Diabetes Medications (MedA-Diabetes)	No	No	
Medication Adherence for Hypertension (angiotensin-converting enzyme (ACE) or angiotensin-receptor blocker (ARB) (MedA-HTN)	No	No	
Comprehensive Medication Review (CMR)	Yes	No	
Statin Use in Persons with Diabetes (SUPD)	No ³	No ³	
³ Prescription written at the time of care may and will only satisfy the o name), strength/dose, route and date when the medication was disper Humana is present.		-	

Patient experience (Consumer Assessment of Healthcare Providers and Systems [CAHPS[®]] and Health Outcomes Survey [HOS]) measures, including access to care, coordination of care and patient discussion, cannot be satisfied by telehealth (includes audio only) or with an inhome test kit. However, we encourage discussion around these measures during a telehealth visit.