Telehealth Provider Requirements

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Telehealth is an essential component of health care delivery. Telehealth solutions can be leveraged to perform health assessments and provide diagnoses, interventions and supervision, resulting in improved access to integrated care. It can also successfully address access to care challenges including geographic and logistical barriers to care, such as remote locations, inadequate technology infrastructure, limited awareness and education, and cultural and linguistic barriers.

TRICARE Prime Demo® by CareSource Military & Veterans™ (CSMV) recognizes that our telehealth success is directly tied to ensuring that providers have the tools and resources they need to meet our telehealth requirements. We offer tailored provider telehealth training through multiple channels including provider orientations, custom on-demand courses through our Provider Learning Management System (LMS), provider manuals, our telehealth policy, network notifications and our provider website. This companion guide to our Telehealth Standards and Requirements training is intended to be a collateral resource. It provides an overview of what you learned in that training and is not meant to replace that education.

Provider Training Requirements

All providers offering telehealth services are assigned telehealth requirements training and must provide attestation to completing training. This training can be found on **HealthPlanResources.com**. Once training is completed, providers are required to attest to understanding and meeting all telehealth requirements.

- ✓ Sign on to **HealthPlanResources.com** or single sign on to the platform through our Provider Portal.
- ✓ If not already enrolled in training, search for Telehealth Standards and Requirements.
- ✓ Complete the Telehealth Standards and Requirements training.
- ✓ Attest to completion by completing the form provided.

Platform Requirements

Platforms used for telehealth services must:

- Have the appropriate verification, confidentiality and security parameters necessary to be properly utilized for telehealth purposes.
- Meet the requirements of the Health Insurance Portability and Accountability Act (HIPAA) Privacy and Security Rules (collectively “the HIPAA Rules”).
- Interface with personal computers or mobile devices that use internet-based videoconferencing software programs and must provide services at a bandwidth and with sufficient resolutions to ensure the quality of the image or audio received is sufficient for the type of telehealth services being delivered and do not impose technical requirements upon the beneficiary beyond consumer accessible broadband and commercially available consumer audio and video devices.
- Ensure application(s) (mobile or desktop) enable the treating provider to view information shared by patients regarding symptoms, medical history, allergies, patient medications, problem history, primary care team contact information, patient location and personal emergency contact information for means of contacting local emergency services.
- Have technical support 24 hours a day, seven days a week 365 days a year, or for the duration of posted service hours for both the providers and beneficiaries.
- Include mobile access to care, clearly displayed contact phone numbers for assistance and secure messaging.

Service Provider Requirements

Telehealth service providers and presenters must:

- Be licensed or certified in accordance with appropriate state laws, federal regulations and nationally recognized organizations governing provision of care via telemedicine.
- Follow telehealth-specific regulatory, licensing, credentialing and privileging, malpractice and insurance laws and rules for their profession in both the jurisdiction (site) in which they are practicing as well as the jurisdiction (site) where the patient is receiving care.
- Ensure compliance as required by appropriate regulatory and accrediting agencies.
- Follow professional discipline and national practice guidelines when practicing via telehealth and any modifications to applicable clinical practice guidelines for the telehealth setting to ensure that clinical requirements specific to the discipline are maintained.
- Ensure that any provision of telecritical care is governed by a Telehealth Continuity of Care Plan and agree to participate in the TRICARE Prime Demo continuity of care plan which addresses triage of the telehealth service during a national emergency and includes the transition of care from telehealth to in-person care if the national emergency requires it.

Delivery of Service Requirements

The telehealth visit must include:

- Patients provided with real-time information regarding estimated telephone wait time and/or number of callers ahead of them in the queue.
- A means for verification of provider and patient identity for synchronous telehealth services. For telehealth services where the originating site is an authorized institutional provider, verification of both professional and patient identity must occur at the host facility. For telehealth services where the originating site does not have an immediately available health professional (i.e., the patient's home), the telehealth provider shall provide the patient (or legal representative) with the provider's qualifications, licensure information and, when applicable, registration number (i.e., National Provider Identification (NPI)). The patient will provide two-factor authentication.
- In addition to validating current contact number(s) at the time of request for care, providers must establish an alternate plan for communicating with their telehealth patients in the event of a technological breakdown/failure and develop the alternate plan at the outset of treatment. Providers will only resume telehealth services if all the technological requirements are restored.
- Providers must arrange for handling emergency situations at the outset of treatment to ensure consistency with established local procedures. For mental health services, this procedure must include processes for hospitalization or civil commitment within the jurisdiction where the patient is located, if necessary.
- Must not, in delivery of health programs/activities through telehealth services, discriminate on the basis of race, color, national origin, sex, age or disability (collectively "protected classes").

Privacy and Security Requirements

Telehealth service providers will use the following guidelines to ensure the privacy and security of their services including:

- Ensuring audio and video transmissions are secured using point-to-point encryption that meets recognized standards.
- Using videoconference software that does not allow multiple concurrent sessions to be opened by a single user. While only one session may be open at a time, a provider may include more than two sites/patients as participants in that session with the consent of all participants (i.e., group psychotherapy).
- Ensuring Protected Health Information (PHI) and other confidential data is only backed up to or stored on secure data storage locations that have been approved for this purpose. Cloud services unable to achieve compliance shall not be used for PHI or confidential data.
- Transmitting and storing data associated with asynchronous telehealth services over a secure network and comply with HIPAA requirements.
- The Office of Civil Rights (OCR) will enforce the HIPAA rules.

Telehealth Billing

Asynchronous telehealth, also known as “store-and-forward” telehealth, involves the non-real-time exchange of information between patients and providers. Common examples of asynchronous telehealth include remote patient monitoring, mobile health, digital intake forms and patient report sharing. Network specialists may perform and bill for covered teleconsultation services if they have asynchronous teleconsultation capabilities with other specialists.

The payment for asynchronous telehealth services at the distant site will also be the lower of the CHAMPUS Maximum Allowable Charge (CMAC), billed charge or negotiated rate. This payment structure is consistent with office visits, consultations, individual psychotherapy or pharmacologic management services provided without telecommunication.

- Bill with CPT or HCPCS codes with a GQ modifier.
- Use place of service (POS) code 02.

Synchronous telehealth is provided in real time (i.e., video consultations) where bi-directional interactions occur at a given point in time. Examples of synchronous telehealth services include video consultations, virtual provider visits, mental health counseling and post-operative check-ins.

TRICARE covers synchronous telehealth services delivered through an interactive telecommunications system. The payment for the originating site facility fee (Q3014) will be the lesser of the negotiated rate, billed charge or the Medicare fee set for Q3014. Annual updates to this fee will be incorporated into the CMAC file and implemented by contractors accordingly.

- Bill with CPT/HCPCS codes with GT or 95 modifiers for distant site.
- Use Q3014 for originating site.

Telephonic telehealth is allowable for otherwise covered, medically necessary and appropriate care which does not require face-to-face, hands-on treatment or visual evaluation.

- Bill CPT codes 98966-98968, 99441-99443 or HCPCS G2012.

Additional billing guidance related to telehealth services.

- Providers may order or prescribe pharmaceuticals and ancillary services (i.e., laboratory tests, Durable Medical Equipment (DME)) in conjunction with a telehealth visit to the same extent as during an in-person visit. All ancillary orders or prescriptions must be medically or psychologically necessary and appropriate and prescribed by a licensed clinician who is directly involved in the patient’s current telehealth episode of care.
- Network specialists may perform and bill for covered teleconsultation services if they have asynchronous teleconsultation capabilities with other specialists.
- Our model of care supports remote health monitoring and chronic care remote physiologic monitoring for beneficiaries and will reimburse providers for covered remote health monitoring services when authorized.
- Patients should be charged for any applicable copay or cost-sharing at the same copayment amount as if the service was provided without the use of an interactive telecommunications system.

Additional Resource Information

We understand the importance of access to care. To better support our beneficiaries, we work to integrate telehealth into areas and populations that would benefit from this kind of improved access to care via synchronous and asynchronous telehealth services.

Language Services

- To ensure the effectiveness of virtual and telehealth services, it is important that both parties clearly understand each other. In cases where a provider and a beneficiary experience language differences, interpreters can be used to convert spoken or signed words from one language to another. To facilitate real-time communication between speakers of different languages, we support 24/7 on-demand phone interpretive services through the Propio One platform. TRICARE Prime Demo will cover the cost of telehealth visit interpretive services provided to beneficiaries when the Propio platform is used. To sign up with Propio, visit www.propio.com.
- If you are not contracted with Propio, TRICARE Prime Demo can still provide interpretive service with most telehealth platforms. To request an interpreter for a telehealth appointment, visit **CareSourceMilitary.com** and select "Providers." Under the Tools & Resources tab, select "Request Patient Services." Under Interpreter Services you will find the Interpreter Service Request Form. You can use this form to request interpretation services for an upcoming appointment (three to five business days advance notice required). Once approved, you will receive confirmation and information on your interpreter. You will be required to provide a link to the scheduled telehealth visit.

Teladoc Telehealth Vendor

- We provide beneficiaries with access to telehealth services for urgent care and behavioral health services 24 hours a day, seven days a week and 365 days a year via our NCQA accredited and HITRUST Certified telehealth vendor, Teladoc. Beneficiaries can also receive services from any network provider that has a physical office location but also offers telehealth capabilities.
- If you do not currently provide telehealth services, you can obtain access to a telehealth platform through various vendors such as Teladoc if you do not already have access to one. The Teladoc telehealth platform supports on-demand video and scheduling capability, and expands access to acute, chronic, preventive and behavioral health services.

24-Hour Nurse Advice Line

- In addition, we offer a 24-Hour Nurse Advice Line (NAL), which serves as a valuable resource for beneficiaries by triaging symptoms and directing to the most appropriate care setting. Staffed with licensed professionals trained in trauma-informed care and mental health first aid, the NAL offers support to beneficiaries in crisis. Beneficiaries will be able to locate our NAL phone number in their Beneficiary Handbook, on our website, as well as in the secure beneficiary CareSource MyLife app.

NOMI NPs for Pregnancy and Postpartum

- For pregnant and postpartum beneficiaries, a team of Nurse Practitioners (NPs) supports telehealth visits and engages in proactive outreach to beneficiaries to close gaps in care and support the beneficiary during their pregnancy and immediate postpartum period. This enhances access to care and the overall beneficiary experience.

Remote Patient Monitoring

- Remote patient monitoring uses digital devices to collect and transmit patient health data to health care providers. It's particularly useful for managing chronic conditions and postoperative care, enabling proactive monitoring and interventions. TRICARE Prime Demo supports remote health monitoring and chronic care remote physiologic monitoring and will reimburse providers for covered remote health monitoring services when authorized.

TRICARE Prime Demo Provider Directory with Identified Telehealth Providers

- Our provider directory includes a comprehensive list of health care providers who are part of the network, covering a wide range of specialties, locations and types of services. Providers offering telehealth services are clearly identified within their directory profile. Our online network provider directory is accessible through our website 24 hours a day/seven days a week.
- With "telehealth" defined as a provider profile data element, the directory has filters or tags specifically for telehealth services. Each provider profile in the directory contains details about the services they offer, including whether telehealth options are available.

To ensure beneficiaries receive safe and effective care, we require providers offering telehealth services to attest to meeting all platform, program and service requirements. Telehealth providers must complete the Telehealth Standards and Requirements training, attest to understanding and meeting all telehealth requirements and identify the telehealth platform they are using. Go to **HealthPlanResources.com** to complete your attestation.

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