

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Medicare & Medicaid Services



NEW product from the Medicare Learning Network® (MLN)

- ["Vaccine Payments Under Medicare Part D"](#), Fact Sheet, ICN 908764, downloadable

MLN Matters® Number: MM8553 **Revised**

Related Change Request (CR) #: CR8553

Related CR Release Date: December 30, 2013

Effective Date: January 1, 2014

Related CR Transmittal #: R2848CP

Implementation Date: January 6, 2014

Expansion of Medicare Telehealth Services for CY 2014

Note: This article was revised on January 7, 2014, to amend the last paragraph of the Background Section to show this applies to Medicare Part B, as well as Part A. All other information remains the same.

Provider Types Affected

This MLN Matters® Article is intended for physicians, providers, and suppliers submitting claims to Medicare Administrative Contractors (MACs) for services to Medicare beneficiaries.

What You Need to Know



STOP – Impact to You

This article is based on Change Request (CR) 8553, which updates Medicare telehealth services in the "Medicare Benefit Policy Manual" and the "Medicare Claims Processing Manual."

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This article was prepared as a service to the public and is not intended to grant rights or impose obligations. This article may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations and other interpretive materials for a full and accurate statement of their contents. CPT only copyright 2012 American Medical Association.

**CAUTION – What You Need to Know**

In the calendar year 2014 physician fee schedule final rule with comment period, the Centers for Medicare & Medicaid Services (CMS) added 2 codes to the list of Medicare telehealth services. Additionally, CMS modified regulations describing eligible telehealth originating sites to include health professional shortage areas (HPSAs) located in rural census tracts of metropolitan statistical areas effective January 1, 2014. This definition is consistent with the determinations made by the Office of Rural Health Policy (ORHP) in the Health Resources and Services Administration (HRSA). Finally, CMS modified regulations in order to establish geographic eligibility for Medicare telehealth originating sites for each calendar year based upon the status of the area as of December 31st of the prior calendar year.

**GO – What You Need to Do**

Make sure that your billing staffs are aware of these changes.

Background

CMS is adding the following services to the list of Medicare telehealth services for CY 2014:

- CPT code 99495: Transitional Care Management Services with the following required elements: Communication (direct contact, telephone, electronic) with the patient and/or caregiver within 2 business days of discharge Medical decision making of at least moderate complexity during the service period Face-to-face visit, within 14 calendar days of discharge.
- CPT Code 99496: Transitional Care Management Services with the following required elements: Communication (direct contact, telephone, electronic) with the patient and/or caregiver within 2 business days of discharge Medical decision making of high complexity during the service period Face-to-face visit, within 7 calendar days of discharge.

This policy will allow the required face-to-face visit component of both services to be furnished through telehealth.

CMS is finalizing the regulatory definition of “rural HPSA” for purposes of determining eligibility for Medicare telehealth originating sites to include HPSAs located in rural census tracts, consistent with ORHP’s definition of “rural.” HRSA has developed a tool that will help providers determine geographic eligibility for Medicare telehealth services. This tool, the Medicare Telehealth Payment Eligibility Analyzer, is available at

<http://datawarehouse.hrsa.gov/telehealthAdvisor/telehealthEligibility.aspx> on the Internet.

CMS is also finalizing a change in policy so that geographic eligibility for an originating site is established and maintained on an annual basis, consistent with other telehealth payment policies. Absent this proposed change, the status of a geographic area’s eligibility for telehealth originating site payment is effective at the same time as the effective date for changes in designations that are made

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outside of CMS. Accordingly, CMS is revising regulations at 42 Code of Federal Regulations (CFR) section 410.78(b)(4) to conform to both of these policies.

For dates of service on or after January 1, 2014, MACs will accept CPT Codes 99495 and 99496 submitted on professional claims. In addition, for dates of service on or after January 1, 2014, MACs will accept and pay CPT Codes 99495 and 99496 when submitted with a GQ or GT modifier. For Critical Access Hospitals (CAHs), MACs will accept and pay according to the appropriate physician or practitioner fee schedule amount when electing Method II on Type of Bill 85X.

Additional Information

Further information regarding telehealth services is available at <http://www.cms.gov/Medicare/Medicare-General-Information/Telehealth/index.html> on the CMS website.

The official instruction, CR 8553, issued to your MAC regarding this change, may be viewed at <http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/Downloads/R2848CP.pdf> on the CMS website.

If you have any questions, please contact your MAC at their toll-free number, which may be found at <http://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/provider-compliance-interactive-map/index.html> on the CMS website.

News Flash - Generally, Medicare Part B covers one flu vaccination and its administration per flu season for beneficiaries without co-pay or deductible. Now is the perfect time to vaccinate beneficiaries. Health care providers are encouraged to get a flu vaccine to help protect themselves from the flu and to keep from spreading it to their family, co-workers, and patients. Note: The flu vaccine is not a Part D-covered drug. For more information, visit:

- [MLN Matters® Article #MM8433](#), "Influenza Vaccine Payment Allowances - Annual Update for 2013-2014 Season"
- [MLN Matters® Article #SE1336](#), "2013-2014 Influenza (Flu) Resources for Health Care Professionals"
- [HealthMap Vaccine Finder](#) - a free, online service where users can search for locations offering flu and other adult vaccines. While some providers may offer flu vaccines, those that don't can help their patients locate flu vaccines within their local community.
- The CDC website for [Free Resources](#), including [prescription-style tear-pads](#) that allow you to give a customized flu shot reminder to patients at high-risk for complications from the flu.

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