ULPS – Billing for Nurse and Medical Assistant Telephone Calls

All ULPS Clinical Staff – Nurses and Medical Assistants

There are only three codes allowed when billing this service. Telephone assessment and management service provided by a qualified non-physician health care professional to an established patient, parent, or guardian not originating from a related assessment and management service provided within the previous 7 days nor leading to an assessment and management service or procedure within the next 24 hours or soonest available appointment. There are only three billing codes allowed for a telephone call with a patient.

Process

Creating Appointment for Telephone Encounter Visit

1. The ULPS Clinical Staff will contact the Patient or Guardian
2. The ULPS Clinical Staff will create an appointment in Rev Cycle.
   a. Visit Type will be ULPSTelephone Encounter
3. The ULPS Clinical Staff will document the visit in Powerchart using the appropriate Clinic Nursing Note. *MAs will also use the Nursing Clinical Note to document their encounters*

Clinical Staff Creating Telehealth Telephone Encounter

1. Select the Patient from the AMB Organizer to ensure the correct FIN is selected
   a. From the Menu Bar Select Documentation Add
   b. Select the appropriate note type (Powernote or Dynamic Documentation)
      i. Once the Note Type has been selected
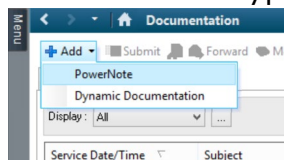
2. Select the Note Type for the User's Specialty (i.e. Nephrology)
   a. Title the Note "Telephone Encounter RN or Telephone Encounter MA"

3. Document the call with the patient. Please be sure to follow the guidelines below.

Documentation of Services

- All telephone calls should be documented in the medical record. The following information, at a minimum, is required for billable telephone notes:
- Date of Service
- Name of person spoken to and their relationship to the patient
- Notation that patient consented to the service being held via telephone
    o It is important that the patients understand that their insurance will be billed for the nurse visit conducted over the telephone. It is fine to explain that you are trying to keep people at home during this pandemic and the office is offering services over the phone that would normally necessitate an office visit.
- For calls made by staff, evidence that patient requested the service
    o It is important to indicate that patient called in regarding (symptom/diagnosis) in the staff note.

- Chief Complaint or Reason for Telephone Call
- Relevant history, background and/or results
- Assessment and Plan
- Total time spent on medical discussion
    o This time can include discussion with the physician/provider. If two phone calls are necessary, add the time together when selecting the code.
    o Signature of staff member or provider

We are aware that some providers have written a protocol to be used by the staff who are rendering advice to patients. There is no problem with this. However, it is important that the staff member state that per Dr. _____'s/NP's advice, the patient is to do _____. The nursing staff is not giving independent medical advice. This is very important because we cannot perform services that are outside of the staff member's scope of practice or training.

Entering CPT Codes for the Telephone Encounter

    a. Select Order
    b. Add
       Search for the appropriate code that matches the length of the phone visit
          i.   98966 – 5-10 Minutes of medical decision
        ii.   98667 – 11-20 Minutes of medical decision
       iii.   98968 – 21- 30 Minutes or medical decision
             4. Type in the Order Physician for that visit

4. Select OK
5. Choose the appropriate diagnosis for that visit and sign the order

Things to Remember

Exclusions (conditions that are NOT billable):

- Calls during the postoperative period of a procedure

- Decision to see the patient at the next available urgent care appointment

- Decision to see the patient within 24 hours of the call

- Calls made to inform the patient that telehealth services are available during the pandemic

- Calls made to monitor INR

- Calls to give routine lab results

- Calls to refill chronic medications

Helpful Hint: One way to determine whether a telephone call is billable, is to ask whether or not you would have asked the patient to come to the office if we were not going through the pandemic emergency. If the answer is yes, it most likely represents a billable service

Please Note:

The staff member calls are not billable if the physician/provider calls the patient on the same date. In that case, the physician/provider would bill for the telephone call using codes 99441-99443. We cannot bill for two telephone calls.

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If you have questions as to whether or not the chief complaint area meets medical necessity, please email regarding billing please contact Mabel Calhoun at mabel.calhoun@lebonheur.org or Robert (Marty) Feasel at robert.feasel@lebonheur.org

If you have any additional, questions please contact your Clinical Informatics

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