

Pinnacle Home Care **is HERE FOR YOU!**



Let us be your **eyes and ears**



**Are you
experiencing:**

- Patients **canceling** their office appointments?
- Patients **concerned** about coming into your office?
- Patients that you are **unable to contact?**

Pinnacle Home Care has the **technology to perform video visits** with a clinician in the home connecting with you and/or up to 6 people as needed!

**Referral Fax:
1-888-344-6115**

PINNACLE
HOME CARE
BEYOND EXPECTATION

Changing lives through the **Art** of the **Experience**

Did you know...?



CMS has changed Home Bound Criteria: A beneficiary is considered homebound when their physician advises them not to leave the home because of a confirmed or suspected COVID-19 diagnosis or if the patient has a condition that makes them more susceptible to contract COVID-19.

Virtual visits allow you to bill for the visit. The technology is **simple to use, HIPAA compliant and free to Patient and Physician** while the patient is receiving home care.



Virtual visits **meet the Face to Face Requirements for qualification for home care** (90-day / 30-day rule)

You can also bill for **certification and Recertification of the Home Health Plan of Care**

Certification Type	Code	Reimbursement
Physician certification	G0180	\$55 (varies slightly based on location)
Physician re-certification	G0179	\$42 (varies slightly based on location)

G0180

Physician certification for Medicare-covered home health services under a home health plan of care (patient not present), including contacts with home health agency and review of reports of patient status required by physicians to affirm the initial implementation of the plan of care that meets patient's needs, per certification period.

G0179

Physician re-certification for Medicare-covered home health services under a home health plan of care (patient not present), including contacts with home health agency and review of reports of patient status required by physicians to affirm the initial implementation of the plan of care that meets patient's needs, per re-certification period.

Note: G0179 and G0180 are not included in the global surgical package and therefore, are billable and separately payable when furnished during a global period

Note: Physician claims for Certification (G0180) and Re-certification (G0179) should be submitted on Form HCFA 1500.

Referral Fax:
1-888-344-6115

HHA299991933 HHA299993727 HHA299992609 HHA299991792 HHA299992336 HHA299994257
HHA299992254 HHA299993892 HHA299994118 HHA299993612 HHA299993944 HHA299991454



CMS is expanding telemedicine benefit on a temporary and emergency basis under the 1135 waiver authority and Coronavirus Preparedness and Response Supplemental Appropriations Act. **Under this new waiver, Medicare can pay for office, hospital, and other visits furnished via telehealth across the country and including in patient's places of residence starting March 6, 2020.**

Medicare Telehealth Visits

A visit with a provider that uses **telecommunication systems between a provider and a patient**

Common telehealth services include:

- 99201-99215 (Office or other outpatient visits)
- G0425-G0427 (Telehealth consultations, emergency department or initial inpatient)
- G0406-G0408 (Follow-up inpatient telehealth consultations furnished to beneficiaries in hospitals or SNFs).

For a complete list:

<https://www.cms.gov/Medicare/Medicare-General-Information/Telehealth/Telehealth-Codes>

For new* or established patients.

*To the extent the 1135 waiver requires an established relationship, HHS will not conduct audits to ensure that such a prior relationship existed for claims submitted during this public health emergency.

Virtual Check-In

A brief (5-10 minutes) check in with your practitioner via telephone or other telecommunications device **to decide whether an office visit or other service is needed.** A remote evaluation of **recorded video and/or images submitted by an established patient.**

- HCPCS code G2012
- HCPCS code G2010

For established patients.

E-Visits

A communication **between a patient and their provider through an online patient portal.**

- 99421
- 99422
- 99423
- G2061
- G2062
- G2063

For established patients.

Virtual Check-Ins

Can be conducted with a broader range of communication methods, unlike Medicare telehealth visits, which require audio and visual capabilities for real-time communication.

- **HCPCS code G2012:** Brief communication technology-based service, e.g. virtual check-in, by a physician or other qualified health care professional who can report evaluation and management services, provided to an established patient, not originating from a related e/m service provided within the previous 7 days nor leading to an e/m service or procedure within the next 24 hours or soonest available appointment; 5-10 minutes of medical discussion. (The practitioner may respond to the patient's concern by telephone, audio/video, secure text messaging, email, or use of a patient portal).
- **HCPCS code G2010:** Remote evaluation of recorded video and/or images submitted by an established patient (e.g., store and forward), including interpretation with follow-up with the patient within 24 business hours, not originating from a related e/m service provided within the previous 7 days nor leading to an e/m service or procedure within the next 24 hours or soonest available appointment.

E-Visits

- **99421:** Online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; **5–10 minutes.**
- **99422:** Online digital evaluation and management service, for an established patient, for up to 7 days cumulative time during the 7 days; **11 – 20 minutes.**
- **99423:** Online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; **21 or more minutes.**
- **G2061:** Qualified non-physician healthcare professional online assessment and management, for an established patient, for up to seven days, cumulative time during the 7 days; **5–10 minutes.**
- **G2062:** Qualified non-physician healthcare professional online assessment and management service, for an established patient, for up to seven days, cumulative time during the 7 days; **11–20 minutes.**
- **G2063:** Qualified non-physician qualified healthcare professional assessment and management service, for an established patient, for up to seven days, cumulative time during the 7 days; **21 or more minutes.**