



**Payment Policies for Healthcare Services
Provided to Injured Workers and Crime Victims**

Temporary Telehealth Policy When the Worker's Home is the Originating Site

Effective March 9, 2020



Link: Look for possible **updates and corrections** to these payment policies at:

www.Lni.wa.gov/ClaimsIns/Providers/Billing/FeeSched/2019/



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Definitions

- ▶ **Emergency epidemic:** When the Governor declares a state of emergency that directs state agencies to use all resources necessary to prepare for and respond to an outbreak. In this situation, L&I may implement modified policies (such as a temporary telehealth policy) to support providers and workers. The duration of these modified policies will initially last 120 days, after which L&I will assess if a continuation is necessary.
- ▶ **Established patient:** One who has received professional services from the physician, or another physician of the same specialty who belongs to the same group practice, within the past three years.

L&I uses the CPT® definition for established patients. Refer to a CPT® book for complete code descriptions, definitions, and guidelines.

- ▶ **Originating site:** The place where the worker is located when receiving telehealth services. For the purposes of this policy, the originating site is the worker's home. Refer to [Chapter 10: Evaluation and Management \(E/M\) Services](#) for additional information about telehealth services rendered to a worker at an origination site other than home.
- ▶ **Telehealth and Telemedicine:** For the purposes of this policy, the terms telehealth and telemedicine are used interchangeably and refer to face-to-face services delivered by a qualified medical provider through a real-time video connection. These services are not appropriate without a video connection.



Payment policy: Telehealth Services When the Worker's Home is the Originating Site

This temporary policy doesn't replace [Chapter 10: Evaluation and Management \(E/M\) Services](#). This temporary policy does expand services to allow providers and workers to continue treatment and case management during an emergency epidemic and use the worker's home as the originating site. This policy will expire July 3, 2020 unless the department determines an extension is required.



Note: For communication without two-way video, see [Chapter 10: Evaluation and Management \(E/M\) Services](#).

▶ System requirements

Telehealth services and teleconsultations require an interactive telecommunication system, consisting of special audio and video equipment that permits real time consultation between the patient and provider. Providers are responsible for ensuring complete confidentiality and privacy of the worker is protected at all times.



Note: If interpreter services are needed, providers may access a telephonic interpreter using the identified vendor in [Chapter 14: Interpretive Services](#) when the worker's home is the originating site. When the worker's home is the originating site, face-to-face interpretation isn't covered.

▶ Services that can be billed when the worker's home is the originating site

Provider is responsible for ensuring telehealth is the appropriate method of service delivery. Both the worker and the provider need to be comfortable with the decision to provide services via telehealth.

In addition to the telehealth services that are covered in [Chapter 10: Evaluation and Management](#), group psychotherapy is also temporarily covered when the worker's home is the originating site.

▶ Billing requirements

When the worker's home is the originating site, services must be billed using **place of service –02** (which is defined as, "Telehealth").

HCPCS code **Q3014** is only billable by the provider when a medical origination site for services is used. It may not be billed when the worker's origination site is home.

Modifier –GT shouldn't be used.

▶ Duration of temporary policy

This emergency telehealth policy expires July 3rd, 2020. If the insurer deems it necessary to extend this policy, an update and correction will be posted.

▶ Additional documentation requirements

For the purposes of this temporary policy, the following must be included in addition to the documentation requirements noted in MARFS for the service you are billing:

- A note about the emergency situation (limiting exposure to COVID-19, in this case) that prompted the encounter to occur via telehealth, *and*
- A notation that the worker's home is the originating site.



Link: [Chapter 10: Evaluation and Management \(E/M\) Services](#)

▶ What isn't covered

The insurer won't provide reimbursement to any party who acquires equipment for telehealth.

The worker won't be reimbursed for using home as an originating site, or for any other telehealth related services.



Links: Related topics

If you're looking for more information about...	Then go here:
Administrative rules for "Who may treat"	Washington Administrative Code (WAC) 296-20-015: http://apps.leg.wa.gov/wac/default.aspx?cite=296-20-015
Becoming an L&I provider	L&I's website: www.Lni.wa.gov/ClaimsIns/Providers/Becoming/
Billing instructions and forms	Chapter 2: Information for All Providers
Fee schedules for all healthcare facility services	L&I's website: https://lni.wa.gov/patient-care/billing-payments/fee-schedules-and-payment-policies/
E/M Services	Chapter 10: Evaluation and Management (E/M) Services
Mental Health Services	Chapter 17: Mental Health Services
Reports and Forms	Chapter 27: Reports and Forms

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