Virtual Care

Scope

This policy applies to:

☑ Kaiser Permanente Health Plan of Washington
☑ Kaiser Permanente Health Plan of Washington Options, Inc.
☑ Commercial
☐ Medicare
☐ Medicaid

Policy

When benefits allow, Kaiser Permanente will reimburse for a medically necessary virtual care visits when all of the following criteria are met:

a) Services are initiated by the member seeking care from a remote location, ex. home or work; a non clinical location.

b) The service replaces the need for the member to travel to a provider’s office or clinic.

c) The service takes place via online technology (including video), telephonic, or secure messaging.

d) Services must be between the member and an in-network provider on the member’s plan.

Billing/Coding Guidelines

All claims must be billed according to Centers for Medicare & Medicaid Services (CMS) guidelines. CPT code ranges 99441-99444 and 98966-98969 should be utilized for billing virtual care visits.

Non-covered and non-reimbursable services include:

- Non-secure e-mail and facsimile transmissions.
- Medical evaluations that occur within 7 days after a face to face evaluation and management service for the same condition or same episode of care performed by the same practitioner.
- Follow up phone calls.
- Communications to provide test results.
- Triage to assess the appropriate place of service and/or appropriate provider type for the member to be seen.
- Requests for medication refills.
Policy Definitions

Virtual Care
A healthcare service through the use of online technology (computer, tablet, or smartphone), telephonic, or secure messaging transmission of member initiated care from a remote location (ex. home); with a provider that is diagnostic and treatment focused; the member is NOT located at a healthcare site.

Prerequisite(s)
Not applicable.

References
Not applicable.

Related Policies
Telemedicine (Commercial)
Telehealth (Medicare)

Frequently Asked Questions

Q1: Is there a difference between Kaiser Permanente’s definition of virtual care, telemedicine, and telehealth?


Virtual care is defined as a healthcare service through the use of online technology, telephonic, or secure messaging transmission of member initiated care from a remote location (ex. home); with a provider that is diagnostic and treatment focused; the member is NOT located at a healthcare site. Services are allowed for commercial members.

Telemedicine is defined as the delivery of health care services through the use of interactive audio and visual technology, permitting real-time communication between the patient at the originating site and the provider, for the purpose of diagnosis, consultation, or treatment. Store-and-forward technology use of an asynchronous transmission of a covered person’s medical information from an originating site to the health care provider at a distant site which results in medical diagnosis and management can also be used for a telemedicine service but there must be an associated office visit between the commercial member and the referring health care provider. There is a qualified originating site (hospital, rural health clinic, providers’ office, mental health center, skilled nursing facility, or hospital based or critical access hospital based renal dialysis center) where the patient is present and there is a qualified distant site practitioner. Telemedicine does not include the use of audio-only telephone, facsimile, email, or secure messaging. Services are allowed for commercial members.

Telehealth is defined as services that are a live, interactive audio and visual transmission of a physician-patient encounter from one site to another, using telecommunications technologies.
They may include transmissions of real-time telecommunications or those transmitted by store-and-forward technology for Medicare members.

Q2: Member has a phone visit that is medically necessary with a practitioner and receives a diagnosis. Will the service be reimbursable?
A2: Yes. Kaiser Permanente will reimburse for a telephone virtual care visit when all criteria is met and billed with the designated CPT code.

Q3: Member sends a secure message to her primary care physician through Kaiser Permanente member website online messaging. The message was medically necessary resulting in a diagnosis and treatment advice. Will the service be reimbursable?
A3: Yes. Kaiser Permanente will reimburse for a secure messaging virtual care visit when all criteria is met and billed with the designated CPT code.

Q4: Member was seen in the office by a primary care physician for cold symptoms. Member has a follow up phone visit with the same physician 5 days later. Will the follow up phone visit be reimbursable?
A4: No. Follow up care is not a reimbursable service. Follow up care within 7 days is considered part of the initial visit.

Q5: Member is at home on the patio and has a medically necessary online video visit with a practitioner. Will the service be reimbursable?
A5: Yes. Kaiser Permanente will reimburse for an online virtual care visit when all criteria is met.

Note: This information is intended to serve only as a general reference resource regarding reimbursement policy for the services described and is not intended to address every aspect of a reimbursement situation. Accordingly, we may use reasonable discretion in interpreting and applying this policy to services being delivered in a particular case. Further, the policy does not cover all issues related to reimbursement for services rendered to our enrollees as legislative mandates, the provider contracts, the enrollee’s benefit coverage documents, and the Provider Manual all may supplement or in some cases supersede this policy. This policy may be modified from time to time by publishing a new version of the policy on Kaiser Permanente provider website; however, the information presented in this policy is believed to be accurate and current as of the date of publication.