Dear Institute Leadership,

We have been asked to help expedite the conversion of ambulatory outpatient visits to Distance Health offerings. This playbook is designed to be informational and actionable in order to assist your Institute in making the changes.

**What you need to know:**

- The focus of this document is on Cleveland Clinic Employed Physicians; Accommodations may have to be made for Cleveland Clinic Akron General and Cleveland Clinic Florida (Weston, Martin, and Indian River).

- All Distance Health patient fees and copays will be waived during the COVID-19 pandemic. Patients will not be financially responsible for virtual care that is not reimbursed by either CMS or commercial payors, including both telephonic and virtual visits.

- We will be converting scheduled in-person visits to distance health visits. The format of the visit will be up to the discretion of the provider.
  - In-Person Visits to Telephone (Audio Only)
    - Telephone calls are an acceptable alternative, particularly when providers are unable to connect via video chat.
  - Telephone to Virtual Visits (Audio + Video)
    - Virtual visit options have been temporarily expanded from American Well, to include private video chat applications on any device. Approved applications include Apple FaceTime, WhatsApp, Google Duo, Zoom, and Skype. (Please note for the Skype option, it can be the publicly available version, not just Skype for Business.)
      - The preferred platform is either FaceTime (iPhone only) or Google Duo (iPhone and Android). The patient will need to download the Google Duo app on their phone.
      - More information on how to work Google Duo: [https://support.google.com/duo/answer/6386089](https://support.google.com/duo/answer/6386089)
      - Additional platforms are being explored and vetted; more information, including how-to guides, will be forthcoming
      - **American Well will be used primarily to support OnDemand workflows used by Primary Care Providers and those who have already scheduled visits during a period of near-term technology stabilization due to volume surges online.**
        - While the definition of New, Established, and Consult patients remain the same whether Virtual or Traditional, Consults and New categories are now combined into “New Virtual Visit” codes.

- Non-Scheduled (‘On Demand”) Visits
  - On Demand visits via Express Care Online will be prioritized for primary care providers in NEO Ohio (including Akron) and Florida Weston Campus, as well as providers in the labor pool in the short term
  - Asynchronous options are currently available and may be used if they have already been set up for your department. These include but are not limited to: eVisits (initiated by patient), eConsults (provider to provider), etc. If there is additional interest, please contact McKinley Crisp.
What you need to do:

1. We will work with the physician documentation champion and digital health champion in your Institute to help you implement distance health strategies. You may recommend an alternative physician champion; Please send their name to McKinley Crisp (crispem@ccf.org)

2. Review scheduled visits through the next 4 weeks and appointment requests for the next 4 weeks.
   - Ask your clinicians to confirm that appointments and appointment types are appropriate for a “Phone / Facetime Visit” type
   - Address those that cannot per your department protocol
   - Have your PSR’s reach out to patients to notify them of change to visit, absence of co-pay fee, and switch the visit type to “Phone / Facetime Visit [59252]” (If not already scheduled as an Express Care Online virtual visit)

3. Create a process flow for clinicians who are new to distance health AND have them download the “Google Duo” application to their CC phone
   - If unable to connect with patient via virtual visit platform, call the patient on the phone (to block your number, dial *67)
   - Once connected with the patient by phone
     - If video IS NOT needed, continue as a telephone visit
     - If video IS needed and...
       - Patient has an iPhone, switch to Face Time or Google Duo
       - Patient does NOT have an iPhone, use Google Duo

4. Provide guidance on how to appropriately document:
   - EPIC or Haiku App
   - If unable to document in EPIC / Haiku App, talk to your administrator about a backup plan.

5. Send any questions regarding implementation to Dr. Steven Shook, Chris Piel, or McKinley Crisp and coding and billing to askacoder@ccf.org

Overview of Options Available

<table>
<thead>
<tr>
<th>Program (Type)</th>
<th>Purpose</th>
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<tbody>
<tr>
<td>Phone appointment calls (audio only)</td>
<td>Telephone evaluation and management service by a physician or other qualified health care professional who may report evaluation and management services provided to an established patient, parent, or guardian 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.</td>
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</tbody>
</table>
| Distance Health Visits (audio + video) | • Interactive audio and video telecommunications system in real time  
• Includes Express Care Online and FaceTime or Google Duo (Temporarily permitted during COVID-19 pandemic) |
**eVisit (store and forward initiated by the patient)**

*ONLY for areas that are already using this program*

- Online patient portal for an online digital E/M service, for a new or established patient, for up to 7 days, cumulative time during the 7 days; Initiated by message from patient in MyChart

### How to Bill

<table>
<thead>
<tr>
<th>Program (Type)</th>
<th>Billing Codes</th>
<th>Dot Phrases</th>
<th>Documentation Requirements</th>
</tr>
</thead>
</table>
| **Phone appointment calls (audio only)** | Codes to be used by Physicians and LIPs:  
  - 99441 Telephone E&M: 5-10 minutes  
  - 99442 Telephone E&M: 11-20 minutes  
  - 99443 Telephone E&M: 21-30 minutes  
  *see screenshot below*  
  
  Codes to be used PT / ST / OT / SW / RD:  
  - 98966 Telephone E&M: 5-10 minutes  
  - 98967 Telephone E&M: 11-20 minutes  
  - 98968 Telephone E&M: 21-30 minutes | TELEPHONEVISITPN |  
  - These are time based and must be documented (Time Based 3 Levels - (1-10 / 11 – 20 / 21 – 30)  
  - Standard documentation for E&M's  
  - Document that visit was done by telephone  
  - Document that consent from patient was received |

**Distance Health Visits (audio + video)**

*Express Care Online, FaceTime or Google Duo*

- Codes to be used by Physicians and LIPs:  
  - New online E&M level 1-5: 99201-99205  
  - Established online E&M Level 1-5: 99211-99215  
  *See screenshot below*  
  
  Codes to be used PT / ST / OT / SW / RD:  
  - 98966 Telephone E&M: 5-10 minutes  
  - 98967 Telephone E&M: 11-20 minutes  
  - 98968 Telephone E&M: 21-30 minutes | VIRTUALVISITPN |  
  - Document through standard templates or time-based billing  
  - Document that visit was done virtually  
  - Document that consent from patient was received |

*All codes available in “virtual” preference list*  
** Billing indicator and logic available to adjust any patient responsibility to Charity transaction code  
***Your revenue cycle partners and physician documentation champions will have additional details if needed*
### How to Operationalize

<table>
<thead>
<tr>
<th>Program (Type)</th>
<th>Action by PSRs</th>
<th>Actions By Gatekeepers</th>
<th>Actions by Revenue Cycle</th>
<th>Actions by IT</th>
</tr>
</thead>
</table>
| **Phone appointment calls (audio only)** | • If calling patients, use script below for reference. Remind patients that there are NO co-pays required  
• Convert visit to “Phone / Facetime Visit [59252]”  
• Ensure all patients are checked in at the end of the day | 1. Create codes on preference cards  
2. Develop education and audit activity | | Enroll primary care providers at Florida, Akron, and NE Ohio in addition to non-primary care providers that will support OnDemand such as Endocrinology |
| **Distance Health Visits (audio + video)** |  
**Express Care Online, FaceTime or Google Duo** |  
• Take the MyLearning training for schedulers first, link below  
• If calling patients, use script below for reference. Remind patients that there are NO co-pays required  
• Convert visit to “Phone / Facetime Visit [59252]”  
• For those already using Express Care Online, continue to use the department Virtual Visit types in place  
• Ensure all patients are checked in at the end of the day | 1. Create codes on preference cards  
2. Develop education and audit activity | | |

### Scripting

#### Phone Call to Patient:
- We want to minimize the risk of exposing you to illness. Your provider has reviewed your chart and made the recommendation that the safest option for your upcoming appointment on *** is to:
  - To change your office appointment to a telephone call or virtual visit
  - If utilizing a virtual visit and you are an Android user, please download the Google Duo app before your appointment
  - Your provider will initiate the call or virtual visit

#### My Chart Message

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• You have an established patient office visit on XXXX at XXXX. Your provider would like you to know that they can complete your future office visit virtually. It is easy to use and will help you avoid traveling into the office. Please send a MyChart message to your physician today or call the Access to Care Center in order to change your appointment to a virtual one.

Training
• Providers receiving patients online in an OnDemand / Walk In Model: https://mylearning.ccf.org/course/view.php?id=5254
• Providers receiving scheduled patients online: https://mylearning.ccf.org/course/view.php?id=5255
• Schedulers appropriately scheduling virtual visits: https://mylearning.ccf.org/mod/page/view.php?id=41027

Other Things in Progress (More Information to Come)
• How to schedule new patients into distance health types
• Roll out eVisits, Virtual Check Ins, and Prolonged E/M
• eConsult for inpatient setting
• Assisting screening with distance health tools
• Enrolling additional providers into the American Well platform
• Use of Doximity Dialer
• Clarification on new state law changes