EISNER AMPER'S HEALTH CARE CONSULTING GROUP

Telehealth: Business Growth and Profitability

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Many practices quickly deployed telehealth during COVID-19, but they still need strong planning. Some practices have not rolled out substantial telehealth. Now that telehealth has gained traction with patients and providers, practices need to ensure their existing telehealth program meets stakeholders' long-term needs.

Practices need to prepare for regulatory and reimbursement barriers that may return, along with payor changes to allowed services and reimbursement levels. Payor concerns about fraud drive the need for rigorous coding and documentation review. Workflows need to balance the delivery of services in the clinic and through telemedicine.

EisnerAmper's Health Care Consulting Group offers revenue cycle management (RCM), coding/documentation and operations expertise to ensure your success — now and into the future as the telehealth market evolves

Read our telehealth white paper at: https://www.eisneramper.com/telehealth-covid-19-0420/.



1. Secure the Revenue Stream

- a. Know with specificity which services are covered, from routine consults to online portals to new services such as physical and occupational therapy. There will be variations on coverage, authorizations and copay/deductibles by payor. Also, master the national and local regulatory environment.
- b. Define target services and participating providers, model financial implications, and coordinate operational readiness (see step 4, below).
- c. Create a clear marketing and communications strategy.
- d. Train providers and staff on capturing and coding (CPT, ICD-10 and HCPCS) for the three core telehealth services: interactive audio-visual, audio only, and online only.
- e. Schedule (selected) providers based on coverage, not just patient preference, and organize patient flow appropriately (see step 4, below).
- f. Obtain demographic data and copays at time of booking, before delivering services.
- g. Closely monitor payor payment compliance with promises.

2. Prepare for Increased Fraud Audits/Reviews

- a. Consider federal, state and commercial payors anticipate fraud and will closely scrutinize claims.
- b. Review coding and documentation performance.
- c. Train staff to recognize appropriate coding and documentation.

3. Implement the Right Technology

- a. Ensure HIPAA compliance, along with easy patient access from a variety of platforms, and robust security.
- b. Procure the functionality you need, addressing synchronous and asynchronous services and information flows.
- c. Evaluate providers and keep price considerations front and center due to anticipated changes in the near term.





d. Ensure effective interfacing with EMR, practice management and billing systems.

4. Re-engineer Operations

- a. Redesign scheduling for patients (because there isn't a waiting room) and providers in telehealth blocks, as well as related patient flows using staff and electronic tools.
- b. Train staff and educate patients on telehealth and related patient flows.
- c. Organize remote revenue cycle for eligibility, copays and chart queuing.
- d. Redouble confirmations (timing and technology) to avoid lost appointments, as well as outreach to maintain relationships and secure feedback on services (e.g., online surveys).
- e. Step back and determine optimal administrative staffing to support telehealth as a distinct and permanent part of your business.



