

CCHP E-Consult Workgroup Webinar

October 3, 2018

12 PM

Webinar <https://zoom.us/j/452285262>
Dial in +14086380986,,452285262#



Agenda

Agenda Topic	Time
Welcome and Introductions	5 minutes
Updates on PRIME and Recent E-Consult Activities	10 minutes
Updates to E-Consult Toolkit	5 minutes
Agenda for Annual E-Consult Workshop November 7, 9am -3pm, Sierra Health Foundation, Sacramento	30 minutes
Wrap-up	5 minutes

Update on PRIME and Recent E-Consult Activities

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Updates to E-Consult Toolkit

<http://econsulttoolkit.com/>

Comments or contributions? Please send to electronic_consult@bluepathhealth.com

The screenshot shows the E-Consult Toolkit website. At the top is a green header with the text "E-Consult Toolkit" and the tagline "Right care, right setting, right time". Below the header is a navigation menu with links for Background, News, Policy, Case Studies, Publications, Contact, and Tools. A blue banner features a quote: "E-consult provides better care and makes our providers happier. We've had great adoption throughout our system." attributed to Michael Mulligan, MD, Chapa De Indian Health. The main content area is titled "E-Consult News & Events" and contains three bullet points: "Next CCHP E-Consult Workgroup Webinar Scheduled for October 3rd", "E-Consult Workgroup Submits Comments on CMS 2019 Physician Fee Schedule (PFS)", and "Community Health Center Network (CHCN) Adopts E-Consult to Repair Speciality Referral Process". At the bottom, there is a blue section titled "Expanding Safety Net Access to Specialty Care With E-Consult: Best Practices, Tools and Templates for Payers, Providers, Policymakers and Patient Advocates" with four sub-sections: Readiness, Planning, Implementing and Scaling, and Evaluation.

E-Consult Toolkit Right care, right setting, right time

Background News Policy Case Studies Publications Contact **Tools**

"E-consult provides better care and makes our providers happier. We've had great adoption throughout our system."

—Michael Mulligan, MD, Chapa De Indian Health

E-Consult News & Events

- **Next CCHP E-Consult Workgroup Webinar Scheduled for October 3rd** The first CCHP E-Consult Workgroup Webinar for Q4 2018 will be held at 12 p.m. PDT on Wednesday, October 3rd. [Contact us](#) to learn about joining the Workgroup and attending the webinar.
- **E-Consult Workgroup Submits Comments on CMS 2019 Physician Fee Schedule (PFS)** [Final comments](#) on CMS's proposed reimbursement for provider-to-provider communications were gathered from E-Consult Workgroup members and submitted to CMS on September 10th. CMS is expected to finalize the 2019 PFS rules in November.
- **Community Health Center Network (CHCN) Adopts E-Consult to Repair Speciality Referral Process** In 2015, only 16% of CHCN's Medi-Cal patients were receiving specialty care. An analysis of its specialty referral process uncovered complexities that, in addition to lack of access and patient no-shows, contributed to this lack of specialty care. **More**

Expanding Safety Net Access to Specialty Care With E-Consult:
Best Practices, Tools and Templates for Payers, Providers, Policymakers and Patient Advocates

Readiness Planning **Implementing and Scaling** Evaluation

Highlights

Home Page:
News and Events

Background:
E-Consult Webinar
Presentations

Publications:
Updated Articles
on E-Consult

Workshop Objectives

Optimization of Existing Programs

What is needed to improve the provider experience?

What is needed to improve patient understanding?

What are best practices in referral process improvement?

Sustainability in Health Systems

What incentive programs exist and how are they supported?

How are systems optimizing incentive program reporting (GPP, PRIME)?

How are cost savings being captured in health systems?

Workgroup Focus in 2019

What regulatory changes are proposed for 2019?

How do we support implementation of CPT code changes?

Is legislation needed to ensure e-consult is reimbursable and sustainable?

High-Level Draft Agenda for November 7 Workshop

Objectives:

- Optimization – How do we improve upon existing e-consult programs?
- Sustainability – What is needed to ensure e-consult programs are financially sustainable?
- Next Steps for E-Consult Workgroup – With regulatory changes in 2019, where should we focus efforts?

Topic	Time Allotted
Coffee and networking	9:00-9:15
Welcome and opening comments	9:15-9:30
New Data on E-Consult and PRIME	9:30-10:00
E-consult efforts in collaboration with CA Department of Managed Health Care	10:00-10:30
Payer incentive programs: encouraging provider utilization	10:30-11:15
Optimizing e-consult programs: How do we make good programs better?	11:15-12:00
How e-consult is working in non-traditional settings	12:00-12:30
Lunch	12:30-1:00
Regulatory changes for e-consult in 2019	1:00-1:30
What's next? Where should we focus in response to changes for 2019?	1:30-2:15
Wrap-up: Summary and next steps for the Workgroup	2:15-3:00

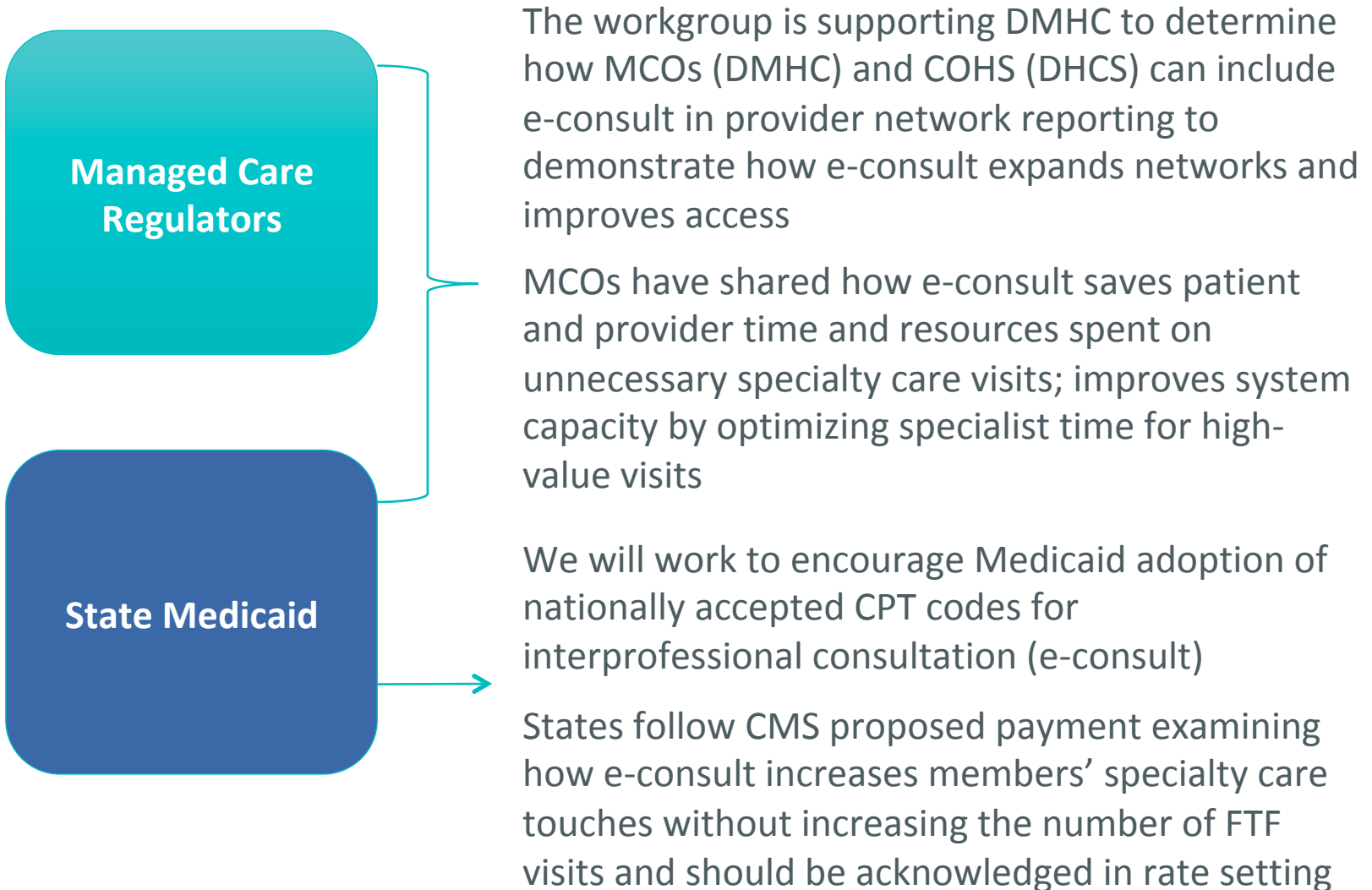
Next Steps

We look forward to seeing you on November 7.

Space is limited. Please respond to the meeting request to note whether you will be joining us or sending a colleague to represent your organization.

Appendix

Framing the options for payer and provider documentation and reporting of e-consult



CMS Proposed Payment for Interprofessional Consultation

If this proposal is finalized, e-consults could be reported using the following two new CPT codes:

- 994X0 - Interprofessional telephone/Internet/electronic health record referral service(s) provided by a treating/requesting physician or qualified health care professional, 30 minutes
- 994X6 - Interprofessional telephone/Internet/electronic health record assessment and management service provided by a consultative physician including a written report to the patient's treating/requesting physician or other qualified health care professional, 5 or more minutes of medical consultative time

PROPOSED CY 2019 PHYSICIAN FEE SCHEDULE

On July 12, 2018, the Center for Medicare and Medicaid Services (CMS) published their CY 2019 proposed revisions related to the Physicians Fee Schedule (PFS). Comments on the proposals are due no later than 5 pm on September 10, 2018. The proposal aims to modernize the healthcare system and help “restore the doctor-patient relationship” by reducing administrative burden. The changes related to telehealth are significant, as it not only expands Medicare telehealth services, but communicates a new interpretation by CMS of the applicability of their statutory requirements for reimbursement of remote communication technology as separate from telehealth, and adds new services based on this interpretation. Additionally, CMS adds new codes to the Medicare telehealth list, as well as new codes for chronic care management and remote patient monitoring and expands telehealth reimbursement for end stage renal disease and acute stroke based on requirements in the Bipartisan Budget Act of 2018. Each of these elements is discussed in detail below.

Public comment is requested by 5 PM ET, September 10, 2018

CCHP Analysis - <http://www.cchpca.org/sites/default/files/resources/PROPOSED%20PFS%20CY%202019%20FINAL.pdf>
<https://www.regulations.gov/document?D=CMS-2018-0076-0001>

Revised Codes for Interprofessional Internet Consultation

In addition to the two new codes, the CPT Editorial Panel also revised four codes that describe interprofessional consults and will allow payment for them in 2019.

CPT Code	Description
99446	Interprofessional telephone/Internet assessment and management service provided by a consultative physician including a verbal and written report to the patient's treating/requesting physician or other qualified health care professional; 5-10 minutes of medical consultative discussion and review
99447	...11-20 minutes of medical consultative discussion and review
99448	...21-30 minutes of medical consultative discussion and review
99449	...31 minutes or more of medical consultative discussion and review

With these codes:

- There is a requirement for a verbal report to the physician
- Only the consulting physician is the one who bills for this service, not the physician who requested the consult