Information Bulletin

April 27, 2020

Attention: Home Care Services ProvidersSubject:Billing for Telehealth versus Telephone
Nursing Services

Further to our Bulletins dated February 6 (Addition of Telehealth Nursing Services), March 17 (Program Modifications in Response to COVID-19) and March 30, 2020 (Referral Update), we wish to provide some direction and clarification surrounding the billing for re-assessments via video and telephone.

In response to the current outbreak of COVID-19, and following the direction of BC's Chief Medical Officer, WorkSafeBC strongly encourages Home Care Services Providers to use telehealth electronic communication, or telephone options. Before providing telehealth or telephone services, nurses must use their professional judgment when determining whether these practices are clinically safe and appropriate.

As per the Contract Amendment dated February 6, "Telehealth Delivery" means the Contractor's use of *video technology* for live image transmission in order for the Contractor to deliver Services remotely to the Injured Worker.

As such, in order to accurately capture what is taking place, the Telehealth Nursing Services fee codes shall be restricted to billings only where there was the use of video technology. If a reassessment took place over the phone, it is best billed as Indirect Time.

To summarize:

- Where a re-assessment took place via video technology, it should be billed as:
 - Progress/Discharge Report Fee RN or LPN Without Visit; and
 - Telehealth Nursing Services RN or LPN
 - Note: billed in 15 minute increments
- Where a re-assessment took place via telephone, it should be billed as:
 - Progress/Discharge Report Fee RN or LPN Without Visit; and
 - Indirect Time RN or LPN
 - Note: billed in 5 minute increments

Please note that this is a temporary exception due to COVID-19 as it is standard preference that in-person assessments are conducted in usual circumstances. Nurses who choose to participate in electronic means of practice must continue to meet all the same legal, ethical and professional obligations that apply to in-person practice.

Lastly, if a re-assessment was not completed in-person, please ensure that the RN or LPN includes a comment within the report as to the method used (i.e. telehealth/video or telephone).

We greatly appreciate your continued commitment as we work through these difficult times together.

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The Program Bulletin serves as a communication channel between Health Care Services and the program providers. If you would like to be added to the email list, change your email address or be removed from the list, please send an email to <u>hcsinqu@worksafebc.com</u> requesting the change.