MyChart and Telephone Encounter Charging for Virtual Care

Guidelines for Charging
A message will not be charged:

- If the message is not initiated by the patient.
- If the message is related to an office visit that took place with the past 7 days or result in a visit 7 days after the message is sent.
- If the message is related to an upcoming scheduled procedure or follow-up care from a recent procedure.
- If the message is related to lab results, referrals, a prescription refill request or other physician/APP-directed follow-up.

Please note: patients should always share important at-home results and/or updates with their physicians/APPs and should not be concerned with being charged for follow-up care directed by their physician/APP

*Phone codes: CPT 99441 (5-10mins); CPT 99442 (11-20 mins); CPT 99443 (21-30mins)

Step by Step: MyChart Messages

1. The patient initiates a message to his/her physician or APP. As seen in the screen shot below, the NM MyChart message page informs patients they may be charged. It also includes a link to an FAQ page.

Send a Message

Send non-urgent messages to members of your care team with who you’ve had a visit with in the past 3 years.

- **Call 911 for emergencies.**
- We will respond to your message within two business days and only during business hours.
- MyChart messages and responses become part of your permanent, secure medical record. Click here to learn more about your MyChart messages and your medical record.
- **New:** By sending your message, you acknowledge and agree that you may be billed if the message addresses new or complex medical issues. Your insurance will always be billed first. For more information, please click here

Messages sent via MyChart will become part of your permanent medical record. Current and future providers who are involved in your care will be able to see your MyChart messages. We protect your medical record as required by state and federal laws governing the security and confidentiality of medical records.

2. The physician/APP receives the patient’s message in the In Basket and determines if a charge should apply. If planning to charge, click **MyCht Enc.**
3. The MyChart encounter opens. In the MyChart Message section, click Reply.

4. Type out the reply to the patient, making sure to include the SmartPhrase .mycmsgcharge. The use of this SmartPhrase is required in order to process the charge.

5. Navigate to the LOS section. In the LOS field, enter the appropriate code.
   a. 99421 for online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 5-10 minutes
   b. 99422 for online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 11-20 minutes
   c. 99423 for online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 21 or more minutes

6. Navigate to the Visit Diagnoses section. Enter the appropriate diagnosis for the patient.
7. Click Sign Encounter. Epic triggers a prompt to enter the time duration. Click the link to enter this information.

8. The Flowsheets activity opens. In the Time Duration field, enter the time spent on this patient’s inquiry.
9. In the side pane, click **Refresh**.

   Note: if the **Refresh** button does not work, click the **MyChart Encounter** activity tab to “close” the **Flowsheets** activity.

10. In the side pane, the **Good to Go!** button displays. Click this button to sign the encounter.

**Step by Step: Telephone Encounter**

1. The patient calls NM seeking medical advice and is routed to his or her physician/APP’s clinic via a telephone encounter. Depending on practice protocols, the patient may immediately speak to a staff member/nurse or may need to wait for a return call.

2. If a physician/APP is going to charge for the advice given, the patient must be informed of the potential charge. Unlike areas that have after hours procedures*, there is no upfront message notifying the patient of a potential charge.

   a. It is up to the clinician and his/her staff to determine how and when the patient consent to be charged is captured, due to the wide variety of practices for handling patient calls. Any staff member can capture and document the consent (see step 5 below).

   b. If the clinician would like to charge, the patient must be informed that he/she may be charged for medical advice for a new or complex issue, and he/she must agree to continue. It is helpful to communicate that this is a way to access care quickly and conveniently, and that an in-office visit is an alternative option.

   *After-hours automated notifications to patients of the potential charge will remain unchanged

3. Document the details of the telephone encounter (including a diagnosis) as you normally would. To charge, enter the appropriate code in the **LOS** section.

   a. **99441** for 5-10 minutes
   b. **99442** for 11-20 minutes
   c. **99443** for 21-30 minutes

4. Navigate to the **Flowsheets** activity by clicking the **Action Menu** > **Flowsheets**.
5. In the Flowsheets activity, type ‘virtual’ into the search field, then press Enter on the keyboard.

6. When finished, click the Sign Encounter button.