

15th Annual Congress on

Kidney: Nephrology & Therapeutics

August 28-30, 2017 Philadelphia, USA

Medicare telehealth service and nephrology: Policies for eligibility and payment

Stephanie Frilling

Social & Scientific Systems Inc, USA

There are just over 80 professional physician or practitioner services that may be furnished via telehealth, defined by Medicare as interactive audio and video telecommunications systems that permit real-time communication between a beneficiary at the originating site and the provider at the distant site. These services include 16 nephrology billing codes for furnishing end-stage renal disease services for monthly monitoring and assessment, and two billing codes for chronic kidney disease education. In recent years, many mobile health devices and other web based tools have been developed in support of monitoring, observation and collaboration for people living with chronic disease. However, digital health devices often do not meet telehealth conditions for coverage as currently required under Medicare. The criteria for furnishing telehealth nephrology services, as well as, all other Medicare telehealth services are set forth in section 1834(m) of the Social Security Act. Telehealth services are paid under Medicare part b, when furnished via a telecommunications system that substitutes for an in-person encounter. The presentation will review the statutory and program guidance that govern Medicare telehealth services, defines payment policy terms, (such as originating site and distant site) and clarifies payment policies when telehealth services are furnished, discuss innovation and other technological advancements in telehealth and nephrology, and Medicare's program authority and other statutory initiatives for enhancing the telehealth benefit.

Biography

Stephanie Frilling, MBA, MPH, is currently the Program Lead for the skilled nursing facility value-based purchasing program and the monitoring and valuation lead for CMS's value incentives quality reporting programs. As a program lead, she is responsible for overseeing all aspects of regulatory and health policy issues for these programs, which are operated by the centers for quality standards and quality. During her tenure at CMS, she has also served as the Program Lead for the end-stage renal disease quality incentive program, and as a subject matter expert for the physician fee schedule and the end-stage renal disease prospective payment system, and has extensive payment experience with Medicare payment and quality programs. She holds an MBA, MPH and is currently pursuing a Doctorate in Bioethics from Loyola of Chicago.

sfrilling@s-3.com

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