



Virtual visits Best Practices

virtual visits Documentation Requirements:

Patient records for all services provided via telehealth must be maintained in a manner consistent with telehealth standards of practice, the standards of the community, and must conform to all applicable laws and regulations including, but not limited to, state licensing, Centers for Medicare and Medicaid Services (CMS) and/or national certification board standards in the states where you are licensed.

The following documentation requirements represent the most common required elements that must be documented in patient charts for all telehealth services provided, and represent Best Practices in the delivery of elemental health services to Optum members:

- ✓ Ensure that the documented date of service matches the date of the claim
- ✓ Need for telemedicine services
- ✓ Mode of transmission
- ✓ Time service started
- ✓ Time the service ended
- ✓ Location of the originating site, or where the patient is located at the time of service
- ✓ Location of the distant site, or where provider is located at the time of service
- ✓ Ensure that the CPT code listed on the claim matches the telemedicine service documented in the medical record (including modifier)
- ✓ Ensure that the CPT code billed is an allowed code per state telehealth policy

This does not represent a comprehensive list of all required documentation elements for telehealth services for every state. Please be aware of the state telehealth policies and regulations for each of the states where you are licensed to practice.

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