



The Rule
Follower's Guide
to Billing &
Telehealth

Erin Hurst, MS, RDN, LD

D i s c l o s u r e s

None

Representing myself and not
serving on behalf of IAND or AND

O b j e c t i v e s

- Differentiate between MNT & coaching
- Identify at least one (1) resource for learning about regulation and policies related to telehealth
- List 3 possible payment strategies

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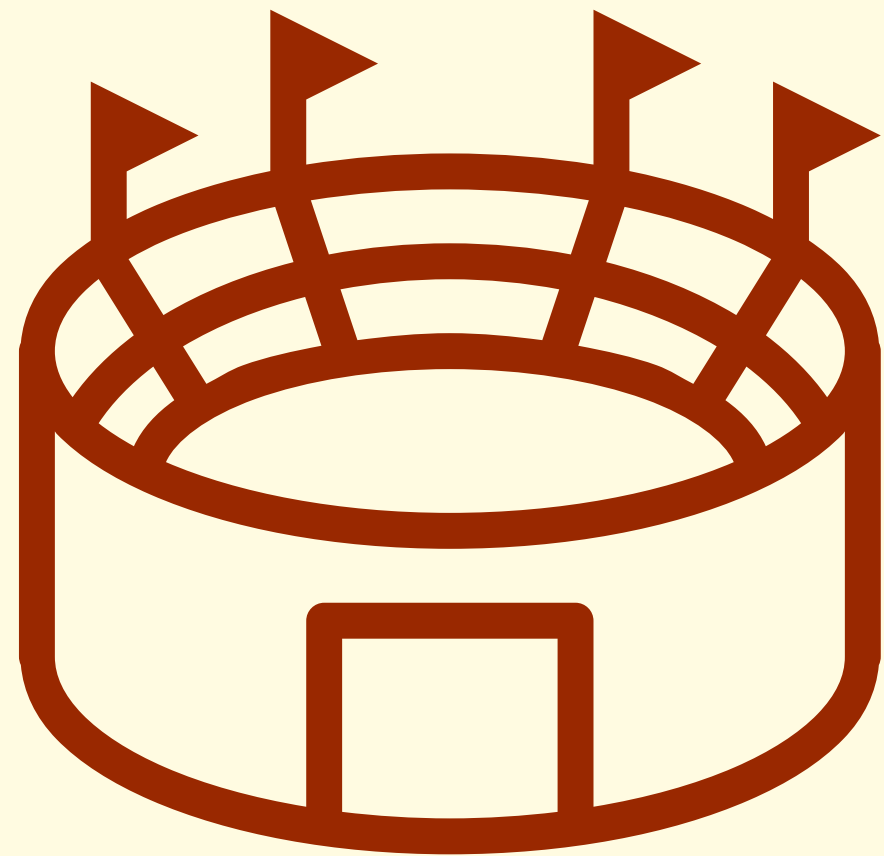


- 2nd career RD since 2013
- 8 years clinical
- 5+ years private practice
- Insurance -based
- IAND Policy Team



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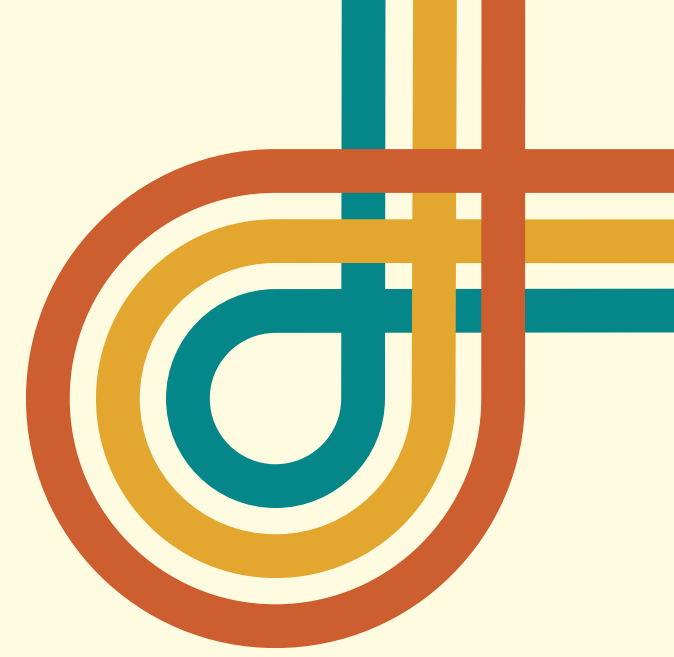
Behind the Scene



- she/her/hers
- curious
- empathetic
- over -thinker
- rule follower at



Rules vs Suggestions



- Federal
- State
- Payers

- Professional organizations
- Employers

- My own researchers



F e d e r a l

- HIPAA
- Cures Act
- No Surprises Act



S t a t e



- Licensed dietitian
- Medical nutrition therapy
- Medically prescribed diets
- Nutrition therapy services
- Use of title
- Maintenance of health records
- Release of health records
- Copying fees
- Telehealth statutes
- Coverage of telehealth



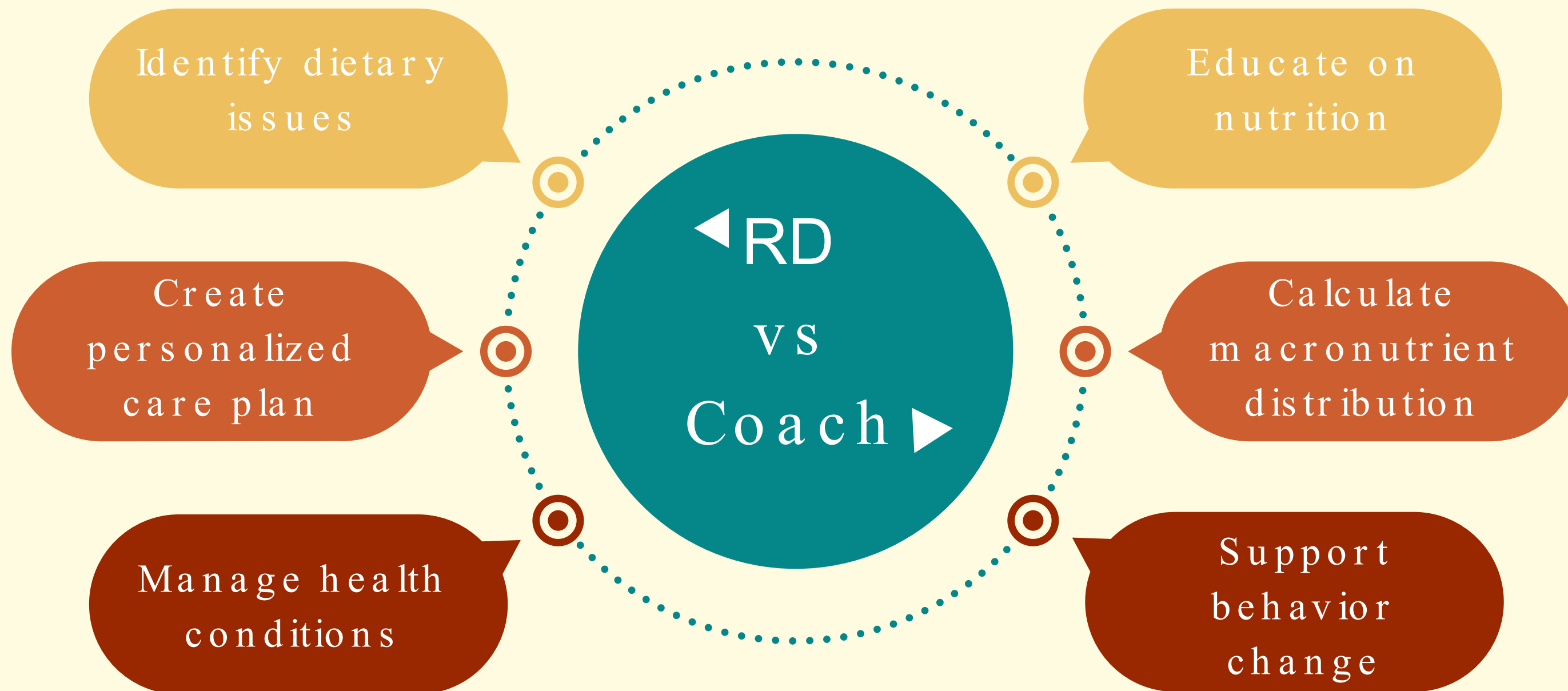
P r o f e s s i o n a l

- Code of Ethics
- Scope of Practice



Regulated

Not
Regulated



Q u i z

F

Only insurance providers need to comply with state licensing and federal regulations

T

Licensure laws are based on where the client is located NOT where the provider is located

F

It is OK to identify as a nutrition coach instead of a RD to avoid practice restrictions in other states

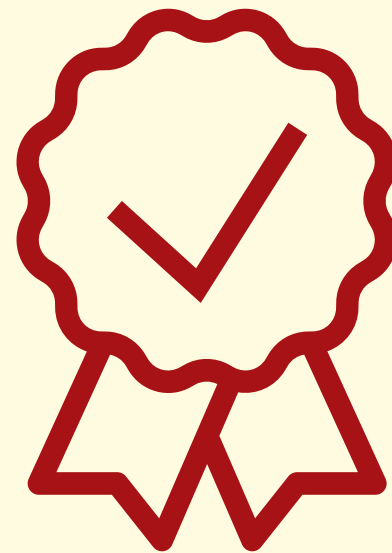
T

Medical practitioners and allied health providers are all subject to state licensing and regulations NOT just RDs

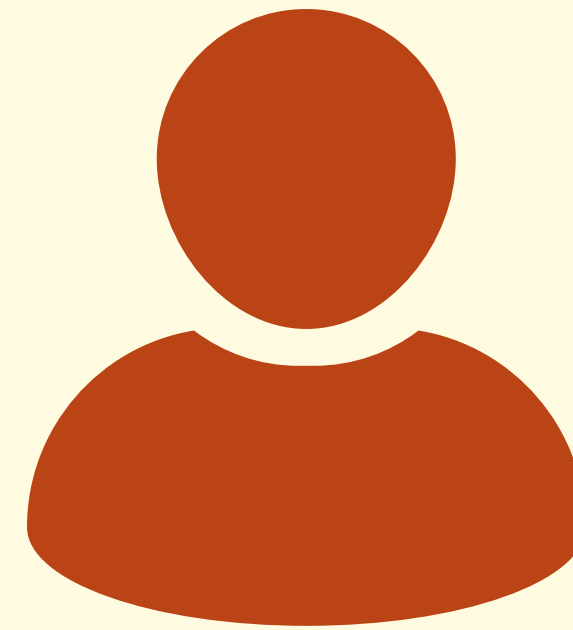
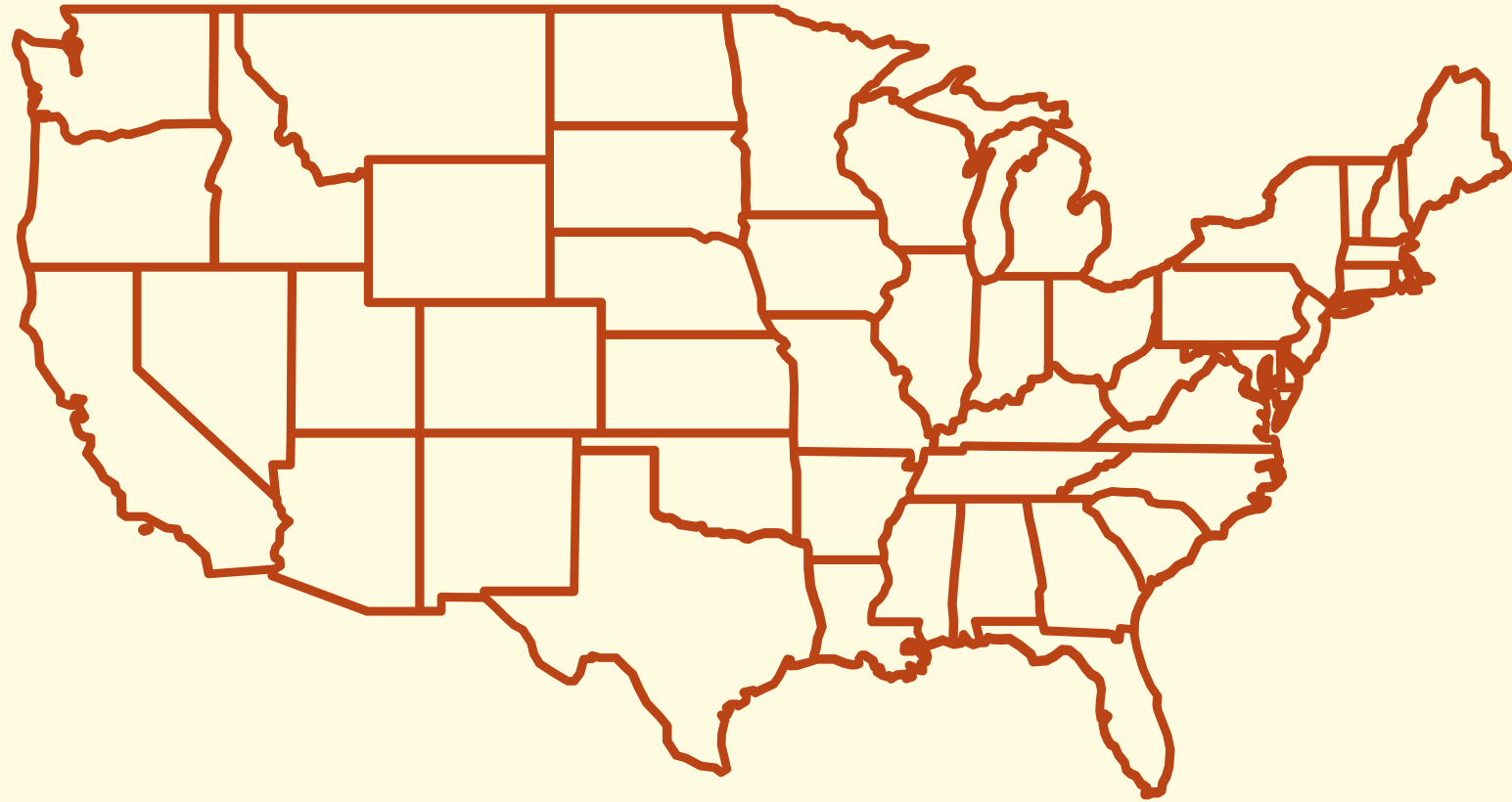


L i c e n s u r e

- Ensures professional competence
- Serves as consumer protection
- Licenses 24+ health care -related occupations in Indiana



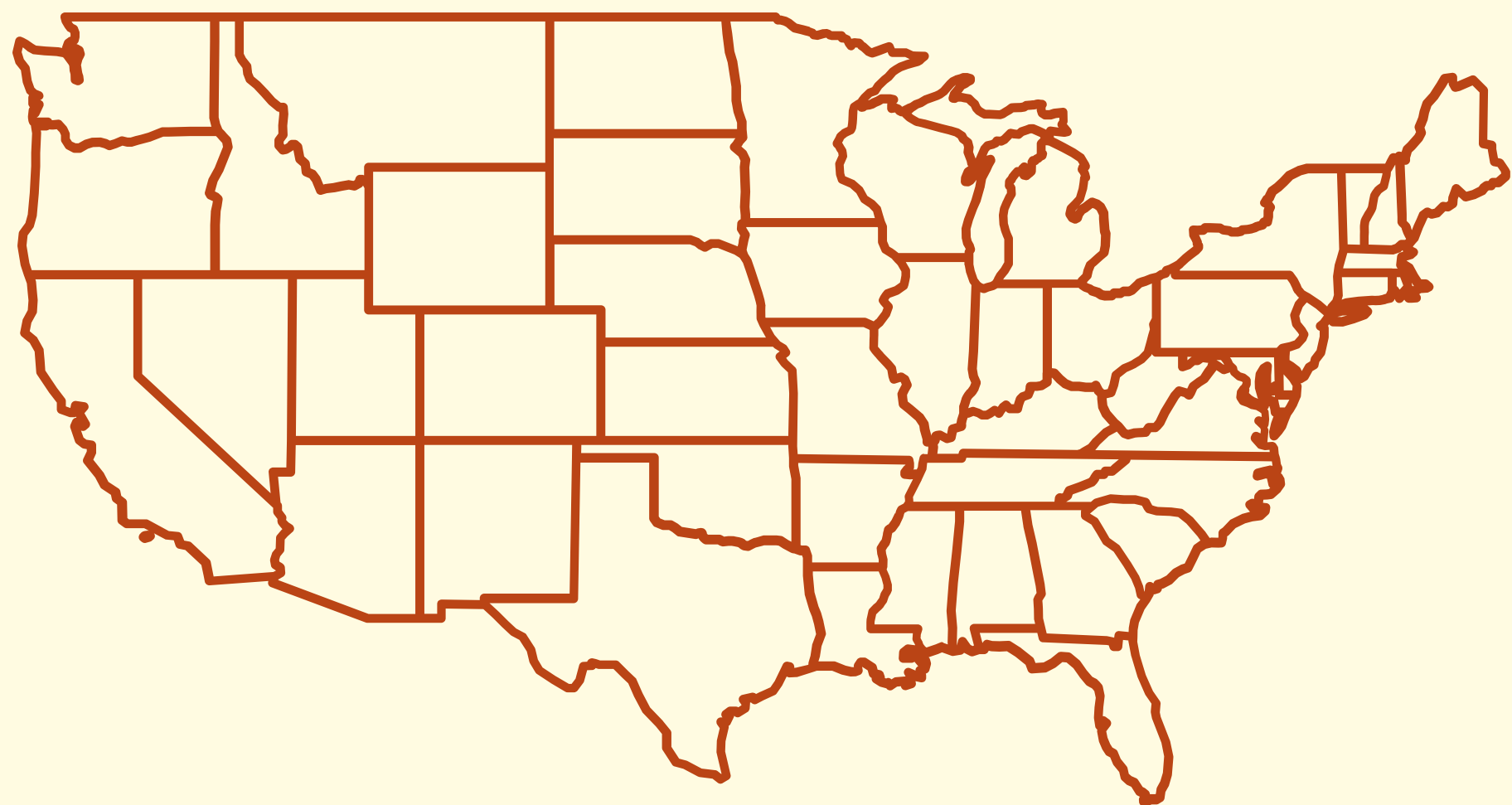
L i c e n s u r e + T e l e h e a l t h



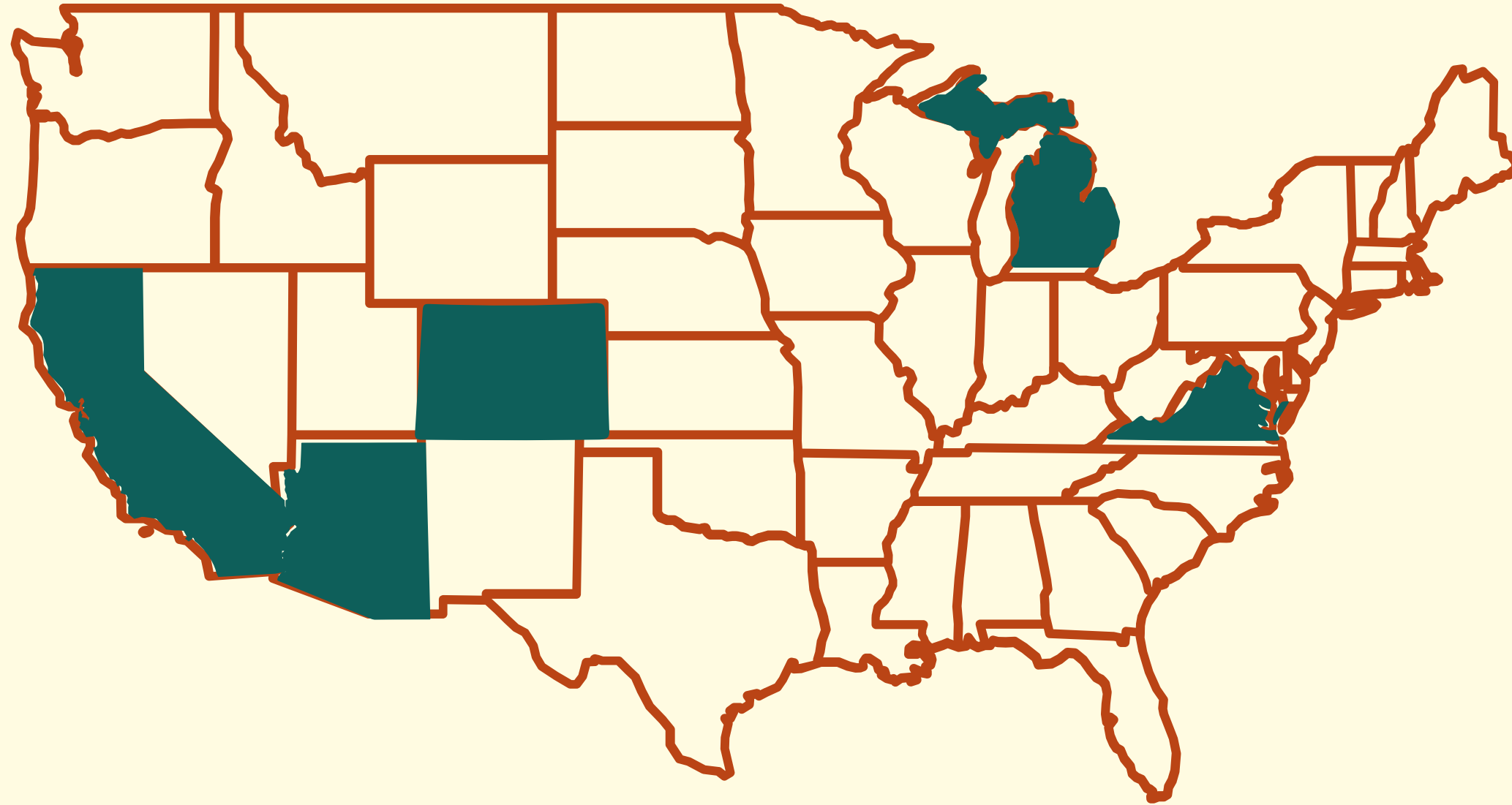
Client
Location



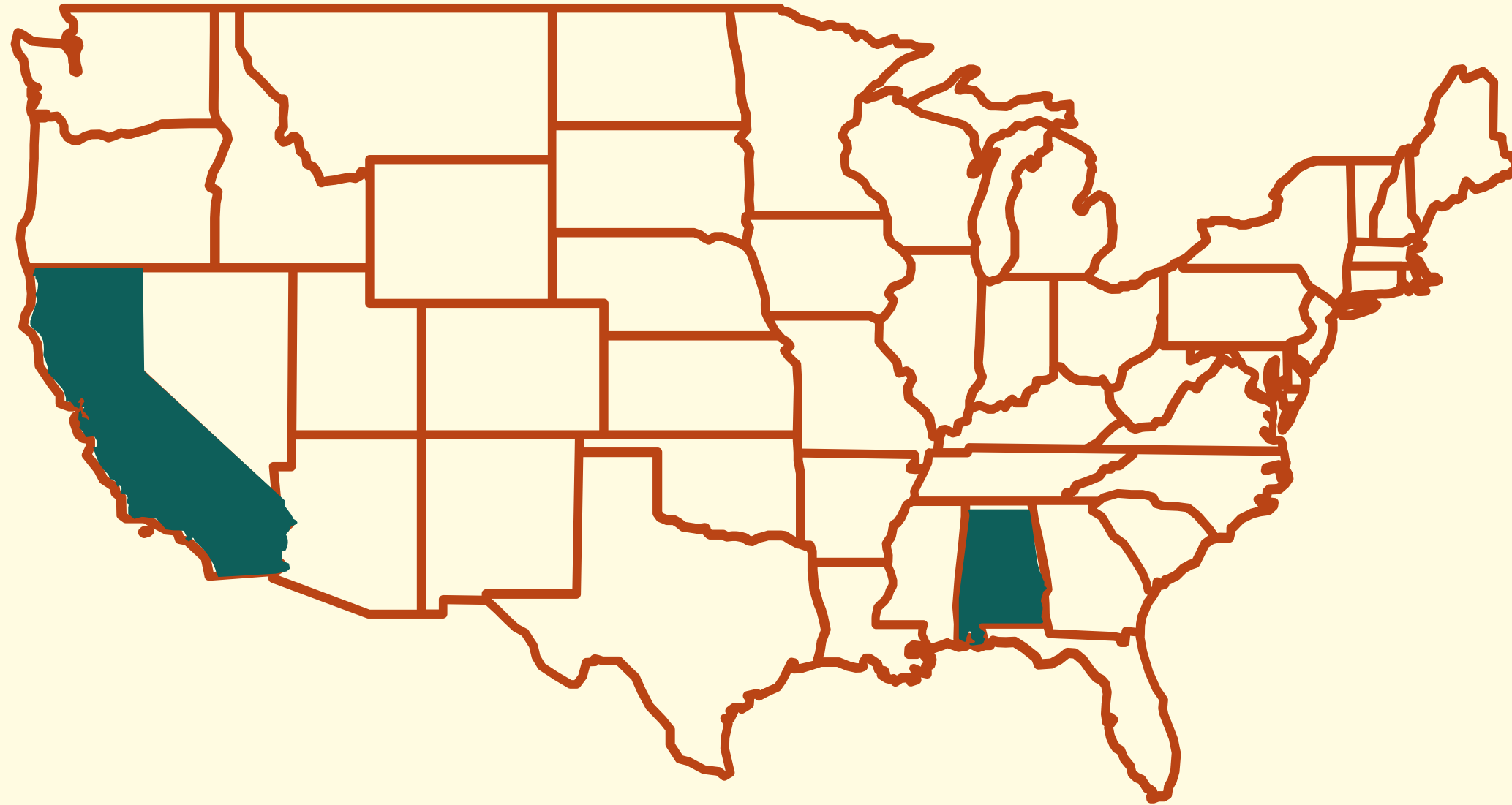
L i c e n s u r e + T e l e h e a l t h



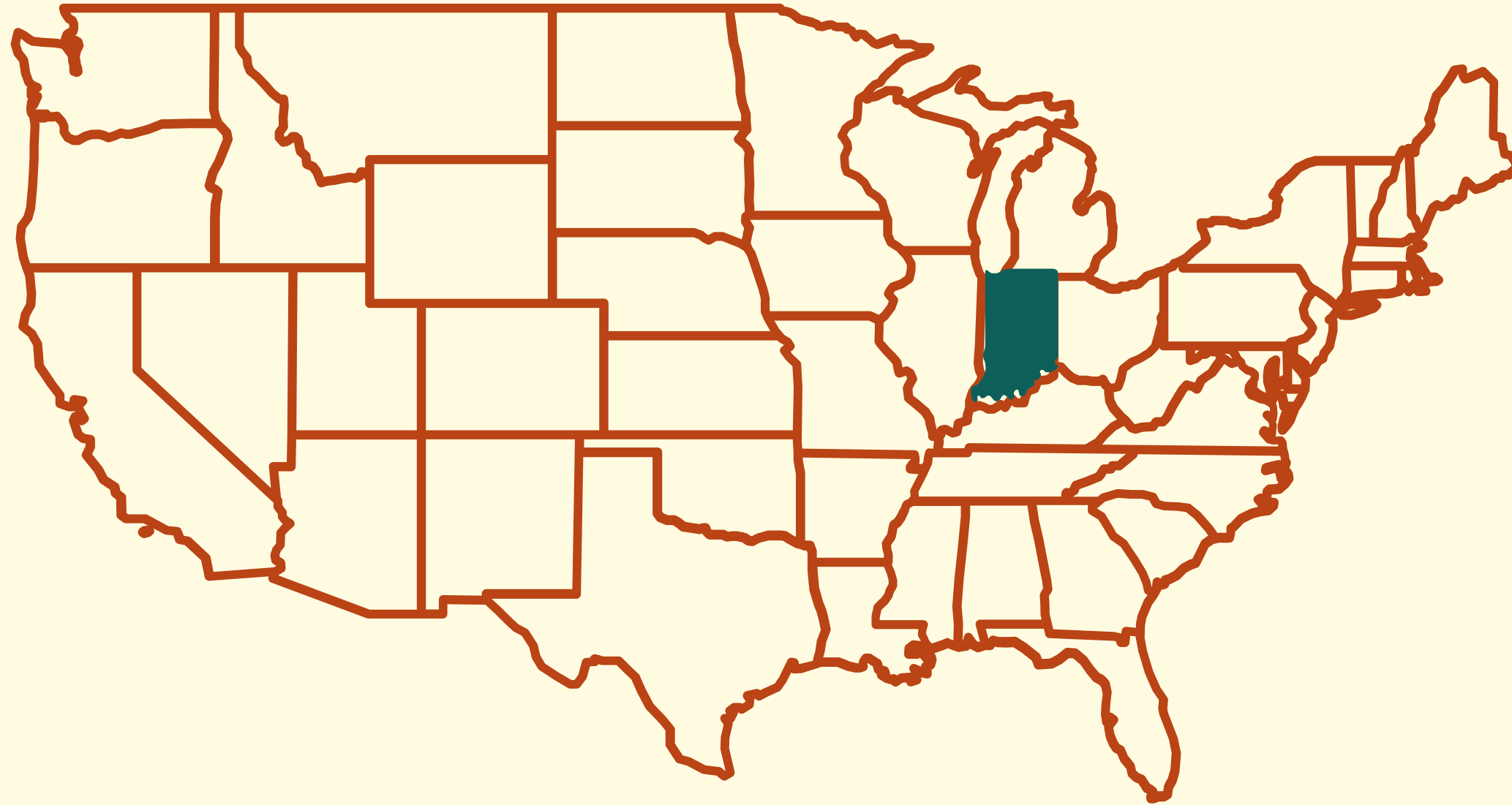
L i c e n s u r e + T e l e h e a l t h



L i c e n s u r e + T e l e h e a l t h



L i c e n s u r e + T e l e h e a l t h



Telehealth

- Increased from 15.4% in 2019 to 86.5% in 2021
- Changed healthcare landscape
- Expected to influence regulations and policy and for next several years
- Protected by Indiana Code



Telehealth Applications

- Audio -visual
- Audio only
- Remote patient monitoring

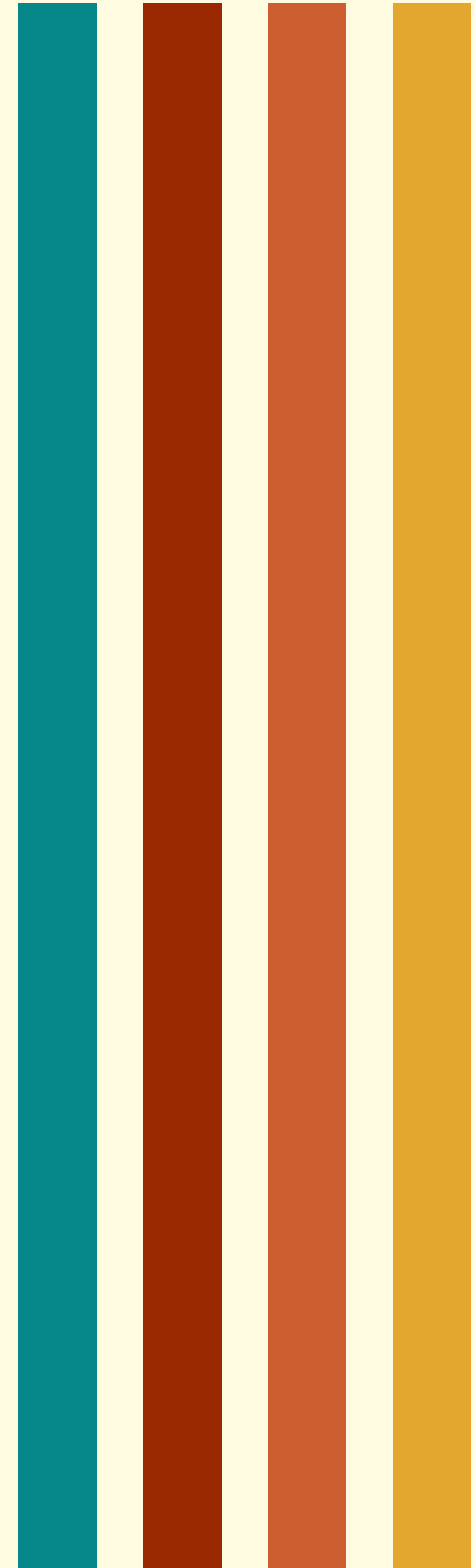


T e l e h e a l t h

P r e p a r a t i o n s



- Ensure professional liability insurance and consider cyber security protection
- Understand state and payer policies
- Choose HIPAA compliant platform
- Set up electronic payment processing
- Write telehealth office policies
- Add telehealth consent to intake forms



Telehealth + Billing

- Medicare (traditional)
- Medicare Advantage (part C)
- Medicaid
- Commercial Payers (3rd party)
- Self-pay



Billing + Codes

	Medicare	Medicaid	3rd Party	Self-Pay (superbill)
CPT	97802-97804 G0270	97802-97804	97802 - 97804 99404??? 98970 - 98972	97802 - 97804 99404??? 98970 - 98972
ICD-10 Dx	<ul style="list-style-type: none"> • Diabetes • Non-DIA kidney disease • 36 mos post kidney transplant 	Uncertain	<ul style="list-style-type: none"> • Plan specific • Check preventive care policy • Verify medical dx 	Z713 vs medical specific code

Billing + Time



8 minute rule

- 1 unit: ≥ 8 minutes through 22 minutes
- 2 units: ≥ 23 minutes through 37 minutes
- 3 units: ≥ 38 minutes through 52 minutes
- 4 units: ≥ 53 minutes through 67 minutes
- 5 units: ≥ 68 minutes through 82 minutes
- 6 units: ≥ 83 minutes through 97 minutes
- 7 units: ≥ 98 minutes through 112 minutes
- 8 units: ≥ 113 minutes through 127 minutes

Billing + Forms

ABN	Created by providers and signed by Medicare beneficiaries that informs them of services that may not be covered by Medicare.
CMS 1500	Used by individual healthcare providers to submit insurance claims
UBO4	Used by institutions/facilities to submit insurance claims
Invoice	Created by provider to document transactions for services provided
Superbill	Created by provider and given to self-pay clients to seek reimbursement from insurance for services rendered by an out-of-network provider
Good Faith Estimate	Created by provider and given to self-pay clients prior initiation of services that outlines expected charges and duration of care.

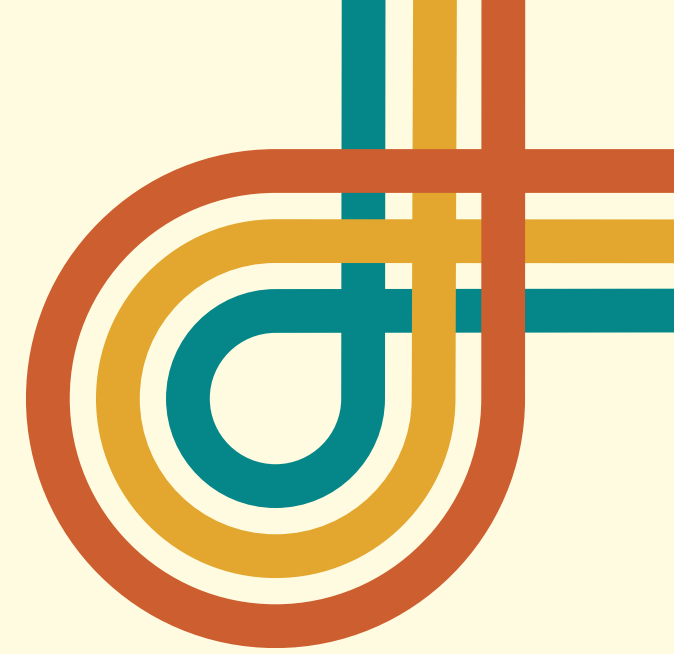
Telehealth + Billing = Documentation

- Date of service
- ICD-10 and CPT codes
- Length of visit / Start and End Times
- Referring practitioner (if applicable)
- Treating provider's full name & signature
- Location of visit (office or telehealth)
- Location of client
- Client full name and DOB (on each page)
- Reason for visit
- Assessment
- Interventions/Goals
- Measurements and/or Monitoring & Evaluation



Resources

1. [HIPAA](#)
2. [Cures Act](#)
3. [No Surprises Act](#)
4. [Indiana Code 25 -4.5 . Dietitians](#)
5. [Indiana Code Maintenance of health records](#)
6. [Indiana Code: Release of records](#)
7. [Indiana Code Maximum Copying Fees](#)
8. [Indiana Code: Telehealth](#)
9. [Indiana Code: Coverage of telehealth services](#)
10. [Myrick, K., et al, Telemedicine Use Among Physicians by Physician Specialty: United States, 2021, National Center for Health Statistics Data Brief No. 493, February 2024](#)
11. [Commission on Dietetics Registration State Licensure](#)
12. [Telehealth Quick Guide, AND \(sign-in required\)](#)
13. [Sample Telehealth Consent Form , AND \(sign-in required\)](#)
14. [The Complete Guide to Billing and Credentialing Essentials for RDNs, AND \(sign-in required\)](#)
15. [ICD 10 codes](#)
16. [ABN form](#)
17. [CMS 1500 form](#)
18. [Good Faith Estimate](#)
19. [Peer Support](#)
 - a. [Dan Feldman, MS, RDN @dietitianmentor](#)
 - b. [Amy Plano, The Reimbursement Dietitian](#)





Thank you!

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