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Use of Telemedicine and Telehealth During the Coronavirus Pandemic

Personal Injury Protection

We understand that due to the coronavirus (COVID-19) pandemic, injured claimants may be concerned about seeking in-person medical attention. Following recommendations provided by the Centers for Disease Control and Prevention (CDC), and pursuant to Executive Order No. 103 and Bulletin 20-19 issued by the Department of Banking and Insurance (DOBI), NJM encourages and supports the utilization of telehealth or telemedicine services where appropriate to diagnose and treat PIP injuries during the ongoing public health emergency. During the current COVID-19 pandemic, telemedicine and telehealth services represent a powerful and critical component for care delivery and continuity.

- Telemedicine services may be requested by physicians, nurse practitioners, physician assistants, therapists, and any authorized and appropriately licensed provider across the entire spectrum of services necessary for our insured.
- Telemedicine includes, but is not limited to, regular follow-up visits and/or new consultations for illnesses, symptoms, and treatments covered by NJM insurance policies. They include, but are not limited to, mental and behavioral health, physical therapy, occupational therapy, and speech therapy.
- NJM encourages providers to utilize telemedicine or telehealth services wherever possible and clinically appropriate, in order to limit the spread of COVID-19 and minimize the risk to providers and their staff, health care workers, and other patients.
- Pursuant to DOBI Bulletin 20-19, and for the duration of the COVID-19 emergency, NJM recognizes and will reimburse telephone-only services as a form of telehealth.
- Required documentation for telemedicine and telehealth services will be similar to conventional inperson encounters.
- Payment rates to providers for telemedicine and telehealth will not be lower than the rates for traditional (in-person) methods, as long as the services are performed to the same standard of care as if the services were rendered in-person.
- During the state of emergency and public health emergency declared by Executive Order 103, telemedicine and telehealth may be provided without any specific technological requirements.
- Medical Providers may bill with modifier 95. This service code is used to denote a telehealth system that provides two-way, real time audiovisual conferencing between patient and provider, in which the provider at a distant site provides healthcare services including an examination for a patient at a different location. Modifier 95 does not impact payment, it is for reporting purposes only.
- Providers treating patients remotely should use the appropriate code for services rendered and utilize the place of service code 02.