Closing Care Gaps with Phone Conversations

In payment transformation, you can close gaps in care and complete performance measures through face-to-face office visits or phone conversations. Please use your judgement to determine if a phone call is appropriate to close a gap.

A phone conversation is acceptable if:

- You or your clinically appropriate staff has the conversation with the patient or the patient’s caregiver. An asterisk (*) notes those measures in which the PCP must take specific actions.
- The encounter is reported through Coreo. You don’t need to upload supporting documents.
- You review the results of the phone call and the screening.
- The phone call is fully documented in the medical record.

Reporting phone conversations via Coreo

To receive credit for work done through a phone call, use supplemental reporting in Coreo. Because it’s subject to audit, the medical record must have enough information to support what’s reported.

Standard claims reporting of phone conversations are challenging. Hawaii’s telemedicine law doesn’t consider standard phone calls “telehealth services” and can’t be reimbursed separately. Also, HMSA plans don’t include benefits for phone conversations. Reporting completion of a care gap using CPT codes for “non-face-to-face evaluation and management services” will be denied and may result in member liability.

Acceptable phone conversations

You may use phone calls for the following payment transformation performance measures:

1. **Tobacco Screening and Cessation Counseling**

   Supplemental reporting in Coreo must include the date of the phone call and tobacco screening and the code that describes the service.

   Fully document the conversation in the medical record and indicate the date of the screening even if the patient isn’t a tobacco user. If the patient is a tobacco user, indicate that you provided cessation counseling.

   *The PCP must provide the cessation counseling or make a referral to such counseling services and follow up with the member to confirm that services were received.

2. **Screening for Depression and Follow-Up Plan**

   Supplemental reporting in Coreo must include the date of the phone conversation and depression screening and the code that describes the service.

   Fully document the encounter in the medical record and identify the screening tool used, date and results of the screening, and any counseling or referral that you provided.

   If a patient screens positive for symptoms of depression, it’s recommended that you arrange for an in-person, follow-up visit.

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Navvis is an independent company that provides Coreo™, an online tool providing a virtual integrated health system for HMSA providers on behalf of HMSA.
*The PCP must document the recommended follow-up in the medical record.

3. **Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents**

The BMI portion of this measurement must be completed at a face-to-face visit. It’s not acceptable to use a patient’s or family’s reported height and weight.

You may use supplemental reporting in Coreo if the phone call provides counseling for nutrition and physical activity. Support the phone call with medical record evidence that includes the date of the encounter and at least one of the following in each category:

**Counseling for nutrition:**
- Discussion of current nutrition behaviors (e.g. eating habits, dieting)
- Checklist indicating that nutrition was addressed
- Counseling or referral for nutrition education
- Patient received educational materials on nutrition at a face-to-face visit
- Anticipatory guidance for nutrition
- Weight or obesity counseling

**Counseling for physical activity:**
- Discussion of current physical activity behaviors (e.g. exercise routine, participation in sports activities, exam for sports participation)
- Checklist indicating that physical activity was addressed
- Counseling or referral for physical activity
- Patient received educational materials on physical activity at a face-to-face visit
- Anticipatory guidance specific to the child’s physical activity
- Weight or obesity counseling

*The PCP must provide the counseling.

4. **Influenza Vaccine**

You may use the phone call to confirm with the patient that the patient received an influenza vaccine during the current calendar year.

Supplemental reporting in Coreo must include the date of the phone conversation.

Fully document the call in the medical record and include the patient’s self-reported information such as the name and title of the person who administered the vaccine. The date it was administered, and the vaccine product and administration route.

5. **Advance Care Planning**

Supplemental reporting in Coreo must include the date of the phone call and the advance care planning service that’s reported.

Fully document the call in the medical record and include an advance care plan (e.g. advance directive, actionable medical orders such as Physician Orders for Life-Sustaining Treatment, living will, designation
of authorized representative) or advance care planning discussion. For details of the requirements, see the Payment Transformation Guide.

*The PCP must have the advance care planning discussion with the patient.

6. **Children with Special Health Care Needs Screener (CSHCN) (Physician Organization performance measure)**

The CSHCN screener is validated for use by phone. Supplemental reporting in Coreo must include the date of the phone call and the results of the screening (e.g. positive or negative findings). The same information must also be documented in the medical record.

*The PCP must document the follow-up for positive findings in the medical record.