

OIG Reviews Find Improper Documentation for Telemedicine Services

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Key Points:

- **The OIG is auditing state compliance with federal and state telemedicine requirements.**
- **An audit of South Carolina’s telemedicine payments found that virtually all Medicaid fee-for-service payments were insufficiently documented or otherwise unallowable.**
- **Suggestions for compliance officers to manage telemedicine compliance risks are included below.**

The Medicare and Medicaid programs are seeing a significant increase in payments for telemedicine services. These services are delivered via telecommunication systems which permit patients to communicate with health care professionals located at consulting sites. In response to the COVID-19 pandemic, [CMS implemented several waivers and flexibilities](#) to facilitate beneficiary access to a wider range of telehealth services.

Congress has considered expanding access to telehealth services as a result of the experience providers and patients have had during the pandemic. Most have viewed the expansion of telehealth services positively due to the associated opportunities to increase access, decrease burdens, and enable better care. However, the Department of Health and Human Services Office of the Inspector General (OIG) has expressed concern about the potential for these goals to be compromised by fraud, abuse, or misuse. The OIG is conducting audits and investigations to uncover any improper activity related to the use of telemedicine services during the public health emergency. This oversight work includes audits to determine whether Medicaid payments for telemedicine services were made in accordance with federal and state requirements.

One of the first [audits](#) the OIG completed focused on payments made by South Carolina for telemedicine services. The OIG found that only three percent of the sampled telemedicine payments met federal and state requirements. A key finding was that in 95 percent of the cases

reviewed, the providers failed to document the start and stop times and the consulting site location of the medical service. The OIG determined that this noncompliance occurred because South Carolina did not give providers formal training on telemedicine documentation requirements or adequately monitor compliance. As a result, the OIG recommends that South Carolina refund the federal government, provide formal training on telemedicine documentation requirements, and enhance the monitoring of provider compliance. Compliance officers whose organizations provide telemedicine services should consider implementing audits focused on: (a) Patient consent to telehealth services; (b) Patient consent to electronic communications (e.g., email); (c) Documentation and claim information related to duration of service; and (d) Documentation related to coding.