

# Telehealth Visit Note

A standard visit note plus the five fields that exist only because the visit was virtual.  
Patient location is one of them, and it changes what you get paid.

|                     |                                                                             |
|---------------------|-----------------------------------------------------------------------------|
| Patient / MRN / DOB |                                                                             |
| Date of service     | Date _____ · start _____ : _____ · stop _____ : _____ · total time ____ min |

## A Virtual Encounter Record

These fields do not appear on an in-person note

|                                   |                                                                                                                                                                                                                               |
|-----------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Patient location                  | Home / private residence → POS 10 · other location _____ → POS 02 · address or city and state _____                                                                                                                           |
| Clinician and modality            | Site _____ · state ____ · licensed in patient's state Y / N · real-time <b>audio-video</b> / <b>audio-only</b> · platform _____ · modifier <b>95</b> (commercial and MA) / <b>93</b> (audio-only) / FQ / GT as payer requires |
| Consent, identity, others present | Identity verified Y / N · consent to telehealth documented Y / N · date _____ · others present: patient side _____ · clinician side _____                                                                                     |

## S Subjective

|                                        |                                                                   |
|----------------------------------------|-------------------------------------------------------------------|
| Chief complaint, HPI, interval history | Onset, duration, severity, course, what has been tried, adherence |
|----------------------------------------|-------------------------------------------------------------------|

## O Objective

Say what you could and could not assess remotely

|                                       |                                                                                        |
|---------------------------------------|----------------------------------------------------------------------------------------|
| Observed findings                     | General appearance, respiratory effort, visible findings, patient-performed manoeuvres |
| Patient-reported measurements         | Home BP _____ · weight _____ · glucose _____ · pulse oximetry _____ · device _____     |
| Limitations of the remote examination | What could not be assessed by video or audio, and whether it mattered                  |

## P Assessment, Plan and Coding

|            |                                                                                                       |
|------------|-------------------------------------------------------------------------------------------------------|
| Assessment | Diagnosis with reasoning                                                                              |
| Plan       | Orders, prescriptions, referrals, education, follow-up interval                                       |
| Escalation | In-person or urgent evaluation advised Y / N · reason and timeframe _____                             |
| Codes      | E/M 99202 to 99215 on total time or MDM · <b>POS 02 or 10</b> · modifier as payer requires · dx _____ |

## E Attestation

|             |                                                                                     |
|-------------|-------------------------------------------------------------------------------------|
| Attestation | Clinician signature _____ · name and credentials _____ · date and time signed _____ |
|-------------|-------------------------------------------------------------------------------------|

**Patient location is a payment field.** CMS uses **POS 02** for telehealth provided other than in the patient's home and **POS 10** for telehealth in the patient's home, meaning a private residence rather than a facility. Since 1 January 2024, telehealth furnished to patients **at home is paid at the non-facility rate**, the higher of the two. "Patient at home" is therefore not a pleasantry; it is the difference between two rates, and the note is where it is established. Note also that Medicare identifies telehealth through place of service while most commercial and Medicare Advantage payers still want **modifier 95**.

**A template still means you write the note.** Sully's AI Scribe captures the visit and writes it into your EHR, the AI Coder submits the coded claim, and the AI Receptionist books the follow-up, on one integration across Epic, Cerner, Meditech, and Athenahealth.

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