**Telehealth Visit   
Chart Audits**

**PURPOSE**

This job aid provides Title X agencies with a sample chart audit for telehealth visits. Unlike other Title X chart audits that seek to ensure Title X Program Requirements and Quality Family Planning (QFP) Recommendations are adhered to, chart audits for telehealth visits may be more narrowly focused to ensure that visits are properly documented and services provided are reimbursable. Chart audits are helpful to ensure accuracy of documentation into an agency’s electronic health record (EHR). They can also help ensure, or correct as needed, that telehealth visits are appropriately coded.[[1]](#footnote-1) For clients with third-party insurance (private or Medicaid), it is critical that visits are documented correctly and the correct codes and modifiers are applied to ensure services are reimbursable. For example, providers may have a routine for how they maneuver EHR templates, clicks with the EHR, and notes section as they conduct visits with clients. A transition to telehealth visits may disrupt this routine, and Title X staff may find providers inadvertently clicking on certain elements of a visit that may not be applicable to a telehealth visit. There may be some aspects of a Title X visit (or broader primary care visit) that are not possible via telehealth.

**FREQUENCY OF TELEHEALTH CHART AUDITS**

The frequency of chart audits may be determined by the Title X agency and key staff involved. It may be helpful to conduct chart audits more frequently at first and then scale back to conducting them on a quarterly or less frequent basis, as providers and staff become more familiar with conducting visits via telehealth. The frequency and timing of chart audits should be aligned with an agency’s revenue cycle management process and timing, so as a claim is processed (paid or unpaid) by third-party payers, staff review all records for a client’s telehealth visits.

*Below is a sample chart audit tool that Title X agency staff can customize for their settings—adding their agency’s name, logo, and additional tips and steps specific to the agency.*

**SAMPLE CHART AUDIT**

**AGENCY:**

| **CLINICIAN** | **ID #** *(can be patient ID number, medical record)* | **DATE** | **VISIT TYPE** | **Telehealth consent signed?** *(Yes/No)* | **Does E&M code(s) reflect services?** *(Yes/No)* | **Time-based?** *(Yes/No)* | **Opportunities for improvement** *(e.g., missing detail in notes, elements clicked that are not possible via telehealth, etc.).* |
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*Adapted with permission from a Maine Family Planning chart audit tool.*

1. American Medical Association. [13 reasons your practice should have a medical record audit](https://www.ama-assn.org/practice-management/cpt/13-reasons-your-practice-should-have-medical-record-audit). March 12, 2020. [↑](#footnote-ref-1)