

Telehealth Billing Guidance

MEDICARE: NON-RHC						
Visit	CPT	Guidance	Form	POS	Mod	
Telemedicine	E&M+	<ul style="list-style-type: none"> • Synchronous audio/video only • Distant Site • Patient at Home • New & Established Patients • Two-way, i.e. Face-time (HIPAA relief) • <i>Dates of service on or after March 6, 2020.</i> 	1500	11 or where it usually takes place	95	
Virtual Service	G2010 G2012	<ul style="list-style-type: none"> • Store & Forward: remote eval. – recorded video and/or image(s) • Virtual Check-in: 5 or more minutes phone only with a practitioner 	1500	11	n/a	
E-visit (online portal / Physician)	99421 99422 99423	<ul style="list-style-type: none"> • 5-10 min. digital eval. up to 7 days cumulative • 11-20 min. digital eval. up to 7 days cumulative • 21+ min. digital eval. up to 7 days cumulative 	1500	11	n/a	
E-visit (online portal / non-Physician)	G2061 G2062 G2063	<ul style="list-style-type: none"> • 5-10 min. digital eval. up to 7 days cumulative • 11-20 min. digital eval. up to 7 days cumulative • 21+ min. digital eval. up to 7 days cumulative 	1500	11	n/a	
Phone	99441 99442 99443	<ul style="list-style-type: none"> • 5-10 min. Synchronous phone only • 11-20 min. Synchronous phone only • 21+ min. Synchronous phone only 	1500	11	n/a	
Place of Service	HCPCS Code	Modifier	Date of Service	Charges		
11	99213	95	4/1/2020	\$\$		

* Telemedicine claim – Sample only. Fee-for-Service pricing applies. Refer to your local Medicare Administrative Contractor.

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MEDICARE: RHC						
Visit	CPT	Guidance	Form	Rev	Mod	
Telemedicine	E&M+	<ul style="list-style-type: none"> • Synchronous audio/video • Distant Site allowable • Patient at Home • New & Established Patients • Two-way, i.e. Face-time • Dates of service beginning January 27-June 30, 2020* 	1450	521	CG,95 **CS	
Virtual, E-Visits and Phone only	G0071	<ul style="list-style-type: none"> • <u>Asynchronous</u> video only; Store & Forward: remote evaluation – recorded video and/or image(s); <u>or</u> • <u>Synchronous Phone only</u>; Virtual Check-in: 5 or more minutes phone only with a practitioner • New & Established Patients • 5 minutes Minimum • Provider delivery required • May only be billed once every 7 days • Captures virtual codes G2010-12, 99421-23 for E-visits online and/or phone only; National average reimbursement during PHE - \$24.76 	1450	521	n/a	
Revenue Code		HCPCS Code	Modifier	Date of Service	Charges	
521		99213	CG,95	4/1/2020	\$\$	
RHC telemedicine claim – Sample only.						

*RHC telehealth services furnished between 1/27/2020 and 6/30/2020, will be paid at their AIR. Claims will be automatically processed in July when the Medicare claims processing system is updated with the new telehealth payment rate of **\$92**. RHCs do not need to resubmit claims for the payment adjustment.

*RHC telehealth services furnished between 7/1/2020 and the end of the public health emergency, will use the specific G Code, G2025, to identify such services as telehealth. A modifier is not added.

CMS will pay all reasonable costs for services related to COVID-19 testing, including telehealth services, for services beginning on March 1, 2020. For services related to COVID-19 testing, RHCs must waive the co-insurance. For services in which the coinsurance is waived, RHCs must put the “CS” modifier on the service line. **RHC claims with the “CS” modifier will be paid with the coinsurance applied, and the Medicare Administrative Contractor (MAC) will automatically reprocess these claims beginning July 1.

Telehealth Billing Guidance

MEDICAID: MISSOURI RHC					
Visit	CPT	Guidance	Form	Rev	Mod
Telemedicine	E&M+	<ul style="list-style-type: none"> • Synchronous audio/video; <u>or</u> • Phone only • Distant Site • Patient at Home • New & Established Patients • Two-way, i.e. Face-time (HIPAA relief) • RHC rate 	1450	521	GT T1015 *on either line
*Check with your State's managed care organizations for additional guidance.					

MEDICAID: MISSOURI NON-RHC					
Visit	CPT	Guidance	Form	POS	Mod
Telemedicine	E&M+	<ul style="list-style-type: none"> • Synchronous audio/video; <u>or</u> • Phone only • Distant Site • Patient at Home • New & Established Patients • Two-way, i.e. Face-time (HIPAA relief) • Hospitals: Facility fee and distant site provided (distant site on 1450 w/ CPT, GT mod & zero charges; facility fee on separate line) 	1500	02	n/a
Anthem Missouri, effective March 17, 2020, will recognize POS 02, but not required, and modifier 95 or GT for codes 99201-99215 for reimbursement as a telemedicine service. Telephone only medical and behavioral services will be covered effective March 19, 2020. Cost sharing waived for in-network providers only.					

MEDICAID: ILLINOIS RHC					
Visit	CPT	Guidance	Form	POS	Mod
Telemedicine	E&M+	<ul style="list-style-type: none"> • Synchronous audio/video; <u>or</u> • Phone only • Distant Site • Patient at Home • New & Established Patients • Two-way, i.e. Face-time (HIPAA relief) 	1500	02	GT *on all service lines T1015
*Check with your State's managed care organizations for additional guidance.					

Telehealth Billing Guidance

MEDICAID: ARKANSAS NON-RHC (RHC guidance not provided or unknown)					
Visit	CPT	Guidance	Form	POS	Mod
Telemedicine	E&M+	<ul style="list-style-type: none"> • Synchronous audio/video; <u>or</u> • Phone only* (any technology deemed appropriate) • Patient at Home • New & Established Patients • Two-way, i.e. Face-time (HIPAA relief) • Effective March 18, 2020 for sixty days 	1500	02	GT
Virtual	G2012	<ul style="list-style-type: none"> • Virtual Check-in: Audio only • Established patient – Chronic, opioid, substance-use 	1500	02	GT
*AR Medicaid Provider Manual, Section II Rural Health, Rule 211.300 – “AR MCD covers RHC encounters as...’telemedicine services.’”					

MEDICAID: TENNESSEE RHC					
Visit	CPT	Guidance	Form	POS	Mod
Telemedicine	E&M+	<ul style="list-style-type: none"> • Synchronous audio/video; <u>or</u> • Phone only* • Distant Site • Patient at Home • New & Established Patients • Two-way, i.e. Face-time (HIPAA relief) • Wrap eligible 	1500	02	n/a
*Check with your State's managed care organizations for additional guidance. Amerigroup, Blucare and UHC telehealth guidance varies.					

MEDICAID: KENTUCKY RHC					
Visit	CPT	Guidance	Form	POS	Mod
Telemedicine	E&M+	<ul style="list-style-type: none"> • Synchronous audio/video <u>or</u> audio only* (Data exchange to support E&M delivery) • Distant Site • Patient at Home • New & Established • Two-way, i.e. Face-time (HIPAA relief) • Wrap eligible payment when billing POS 02 for RHC/FQHC 	1500	02	n/a
Virtual	G2010 G2012	<ul style="list-style-type: none"> • Added during PHE. See description of G codes above. 	1500	02	n/a
*Check with your State's managed care organizations for additional guidance.					

Telehealth Billing Guidance

**Billing guidance described above applies only for the duration of the COVID-19 pandemic in many cases. Durations and guidance may vary and is subject to change without notice. Information provided is as of April 17, 2020.*

Information is changing rapidly. Visit <https://www.mwhc.net/Telehealth%20Toolkit.aspx> for Resources and Links to help answer many of your questions and keep you up to date.

Definitions:

Asynchronous: Events *not* happening at the same time.

Synchronous: Events *occurring* at the same time.

E-Visit: A communication between a patient and their provider through an online *patient portal*. (99221-99223)

Sequestration: A process of *automatic reduction* in physician payments under Medicare. Any claim received by Medicare after April 1, 2013 is subject to a two (2) percent payment cut. The reduction in payment applies to the payment itself and not the “allowed charge” published by Medicare as part of their fee schedule. The Medicare sequestration has been lifted from May 1, 2020 through December 31, 2020 due to the COVID-19 pandemic.

Telemedicine/Telehealth: A *visit* with a provider that uses telecommunication systems between a provider and a patient. Common services include 99201-99215.

Virtual Communication: A brief (5-10 minute) *check in* with your practitioner via telephone or other telecommunications device to decide whether an office visit or other service is needed. (G0071-RHC, G2010, G2012) Also, a remote evaluation of recorded video and/or images submitted by an established patient.