

Telemedicine Coding Cheat Sheet – Medicaid

Type	Code	POS	Modifier	Begin Date	End Date	Requirements
Audio Only Consultation Codes	99441 (5-10m) 99442 (11-20m) 99443 (21-30m)	02 – Point of Service	No Modifier	March 19, 2020	April 30, 2020	1) Telephone E&M service by a physician or other qualified healthcare professional who may report E&M Services provided
Virtual Check Ins, including by telephone	G2012			March 19, 2020		1) Brief communication technology-based service; 2) By a physician or other qualified healthcare professional who can report evaluation and management services; 3) Established patient; Not originating from a related E/M services provided within the previous 7 days nor leading to an E/M service
Virtual Check Ins, including captured video or image	G2010	02 – Point of Service for professional services	No Modifier	March 19, 2020		1) Remove Evaluation; 2) Recorded Video or Pictures Submitted by Established Patient; 3) Interpretation with follow up within 24 hours; 4) Not from a related E/M service provided within the previous 7 days nor leading to an E/M service or procedure WI
Telehealth Distant Site Provider	Bill appropriate code as if rendered in person via FFS	02 – Point of Service for professional services	GT - All professional claims for services rendered via audio/visual telehealth use this modifier	Mach 19, 2020, plus 72 hours for codes to show up on billing system		

Telemedicine Coding Cheat Sheet – BCBS

Telemedicine is appropriate for visits for either low complexity, routine, or ongoing evaluation and management for established patients, as well as addressing new and established patient needs related to COVID-19 symptoms.

Member Cost-sharing (copays, deductibles, etc) and benefit levels will apply according to the benefit plan. BSBSMS will waive the copay for all network provider covered telemedicine visits for fully-insured members.

All services must be medically necessary and documented as part of the patient’s medical record to include the amount of time spent with the patient. Patient must give consent to be treated virtually and/or telephonically and appropriately documented in the medical record prior to the initiation of telemedicine.

This policy ONLY applies to medically necessary visits that are patient-initiated or are replacing a previously scheduled visit.

Type	Code	POS	Modifier	Begin Date	End Date	Requirements
Established Patients – Regardless of Telemedicine Method	99211 99212 99213	02 – Point of Service	No Modifier	March 16, 2020	April 30, 2020	1) Routine evaluation and management of established patients; 2) Only bill for telephonic visits when the provider speaks directly to the patient, do not bill if the patient speaks to office staff or nurses even when the provider is consulted
New Patients – COVID-19 symptoms only	99201 99202	02 – Point of Service	Mo Modifier	March 16, 2020	April 30, 2020	1) Only bill for telephonic visits when the provider speaks directly to the patient, do not bill if the patient speaks to office staff or nurses even when the provider is consulted