



Coding for Telehealth Visits

3/23/20

Please note that the policies summarized below are typically available online and may change. This is intended to be use for informational purposes and readers are encouraged to independently research and verify the information contained herein. Colored font below links to the online documentation from which the information was obtained.

[Health and Human Services/Medicare Guidance](#)

Providers can use audio or video communication technology to provide telehealth to patients during the COVID-19 nationwide public health emergency.

- Use non-public facing remote communication products. Examples include Apple FaceTime, Facebook Messenger video chat, Google Hangouts video, or Skype
- “Public facing” applications such as Facebook Live, Twitch, TikTok, and similar video communication applications should not be used.
- Can be used to treat any other medical condition, even if not related to COVID-19, such as a sprained ankle, dental consultation or psychological evaluation, or other conditions.
- Unless otherwise stated, voice-only/audio/telephonic communication may not be covered (see Capital Blue Cross and Independence).
- Other eligibility, benefits, limitations, exclusions, precertification/referral requirements, provider contracts, and policies can apply.

[Aetna](#)

Commercial Plans will pay for two-way real-time audiovisual services between a patient and a provider. This includes services appended with modifier GT or 95.”

Medicare Advantage members may be eligible for telemedicine services in accordance with CMS regulations. “We follow CMS policy.”

[Capital Blue Cross](#)

Reimburses for telehealth services when performed at a distant site where a licensed qualified health care professional is furnishing the remote service to via an interactive audio and/or video telecommunication system:

- Reimbursed at one hundred percent of the professional fee facility rate.
- Service must be submitted with the appropriate CPT and/or HCPCS code on a CMS 1500 claim form.
- When billing telehealth services, providers must bill with place of service code 02



[Geisinger Health Plan](#)

Providers can bill an E&M service (99213, 99214, etc.) along with location code 02 which is for telehealth services.

Virtual check-ins will be billed using HCPCs code G2012.

Online digital E/M codes will be billed using 99421, 99422 or 99423.

Codes G2061, G2062 and G2063 will be billed for online patient assessments provided by qualified non-physician health care professionals.

Modifiers (GT, G0, GQ, 95) are to be appended as applicable.

[Highmark](#)

Highmark will temporarily relax its current telemedicine policy requirements and member cost-sharing (deductibles, coinsurance & copays) for outpatient virtual visits will be waived for 90 days regardless of medical diagnosis – with exceptions for self-insured employer groups.

[Billing info:](#)

When billing professional services (1500/837P), Virtual PCP Visits and Virtual Retail Clinic Visits should be billed with Evaluation & Management (E&M) CPT codes (99201-99205; 99211-99215) applicable to the services provided and with the GT or 95 modifier indicating the use of interactive audio and video telecommunications technology.

- Place of Service “02” (Telehealth) must be used when reporting professional telehealth services (1500 form). OP Facility claims must also use the GT and 95 modifiers as appropriate and applicable.
- Outpatient facility claims (UB-04/837I) should be billed using the appropriate procedure code (99201-99205; 99211-99215 or G0463) with the GT or 95 modifiers and the revenue code 780.

[UPMC](#) – see page 8

Requires Point of Service (POS) to be utilized with CPT/HCPCS codes for all Telehealth encounters

- POS Description 02 Services location provided through telecommunication technology

Modifiers

- 95 Synchronous telemedicine service rendered via a real time interactive audio and video telecommunications system
- GQ Via asynchronous telecommunications system
- GT Via interactive audio and video telecommunication systems



PA Clinical Network

AT THE PENNSYLVANIA MEDICAL SOCIETY

[Independence Blue Cross](#)

Audiovisual and telephonic that are two way and synchronous are eligible for reimbursement.

Eligible providers performing telemedicine services must report the appropriate modifier (modifiers GT or 95) and place-of-service (POS) code 02 (Telehealth) to ensure payment of eligible telemedicine services.

Telephone communication only telemedicine services performed must report the appropriate place of service 02 (Telehealth) to ensure payment. Use of modifiers GT or 95 will not be required