Medicare, Medicaid along with the Maryland Department of Health are strongly recommending the use of Telehealth whenever possible and when medically appropriate.

- Throughout this national public health emergency, Medicare will pay physicians for Telehealth services at the same rate as in-person visits for all diagnoses, not just services related to COVID-19.
- Physicians licensed in one state may provide services to Medicare beneficiaries in another state. State licensure laws still apply.
- Patients may receive telehealth services in all areas of the country and in all settings, including at their home.

CMS clarified that place of service (POS) should be 11 for:
- phone calls
- e-visits
- G-codes, and
- 99201-99215 via virtual telemedicine for Medicare Part B. patients.
- Modifier -95 should be appended to 99201-99215, but not to phone calls, e-visits or G-codes.
- **NEW CMS announced coverage for physician/patient phone calls 99441, 99442, & 99443 will be paid at the same rate as 99212, 99213, & 99214:**
  - 99441 5-10 minutes of medical discussion
  - 99442 11-20 minutes of medical discussion
  - 99443 21-30 minutes of medical discussion
  - Place of service 11 for office (even if you are taking the phone call from Home)
  - No modifier
- PAs and NPs will also be paid for their code family 98966-98968 at the same physician allowable.

CMS also clarified that G2010, G2012, 99441-99443 and 99421-99423 may be reported on **new patients in addition to established patients.**
- **You MAY conduct Medicare Annual Wellness Visits via Telehealth (audio AND video only)**
  - Welcome to Medicare and Initial Annual Wellness Visit cannot be performed via Telehealth
  - Information such as weight and blood pressure may be self-reported by the patient (for example, if the patient has a scale and/or if they have their own blood pressure cuff) You must document that the patient self-reported.
  - If the patient does not have the capability of self-reporting, you may use information from the most recent visit, and again you must document this in their medical record.
- Medicaid will now reimburse providers when using audio (telephone calls) only.
- Providers may reduce or waive cost-sharing for Telehealth visits paid for by federal healthcare programs.
- You must maintain documentation in the same manner as for an in-person visit or consultation, using either electronic or paper medical records.
# Medicare Telehealth Coding/Billing Guidelines

<table>
<thead>
<tr>
<th>Type of Service</th>
<th>What is the Service?</th>
<th>HCPCS/CPT Code</th>
<th>Patient Relationship with Provider</th>
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</thead>
</table>
| **Medicare Telehealth Visits (Audio & Video)** | A visit with a provider that uses telecommunication (Audio & Video) systems between a provider and a patient                                                                                                                                                                                                                                                                                                                                                                                                   | • CPT: 99201-99205 & CPT: 99211-99215  
• Place of Service: 11  
• Modifier: 95 **NEW**  
• Modifier CS for evaluation of COVID-19 services.  
• Medicare will pay at 100%.                                                                                       | For New or Established patients.                                                                         |
| **Virtual Check-in (Audio Only)**      | A brief (5 – 10 minutes) check in with your practitioner via telephone to decide whether an office visit or other service is needed. A remote evaluation of recorded video and/or images submitted by a patient                                                                                                                                                                                                                                                                                                                    | • HCPCS Code G2012                                                                                       | For New or Established Patients  
**NEW** CMS announced Virtual Check-ins will be paid at the same rate as audio/video visits. |
|  |  | • HCPCS Code G2010                                                                                                               |                                                                                                             |
|  |  | • 99441 5-10 minutes  
• 99442 11-20 minutes  
• 99443 21-30 minutes  
• Place of Service: 11  
• Modifier: None  
• G2010 Qualified non-MD HP                                                                                   |                                                                                                             |
| **E-Visits**                            | A communication between a patient and their provider through an on-line patient portal, Secure email, or HIPAA compliant text messages                                                                                                                                                                                                                                                                                                                                                                   | • 99421 - 99423  
• G2061 – G2063                                                                                                    | For established patients                                                                                   |

Below is a list of Medicare covered Telehealth Services for COVID-19:

![Covered Telehealth Services for PHE for th](Covered Telehealth Services for PHE for th)
Medicaid Telehealth Billing/Coding Guidelines

- Any provider type is permitted to render telehealth services as a distant site within their scope of practice.
- Medicaid telehealth regulations to permit the home as an originating site.
- Providers who are not able to meet in-person with a participant should make every effort to use the following technology, in order of priority:
  1. Traditional telehealth technology which meets all formal requirements is strongly preferred. (These services remain unaffected by the measures in this guidance)
  2. If Medicaid participants are unable to access originating sites possessing fully qualified technology (ability to pan/focus camera, multiple views, etc.) this emergency policy will permit the use of notebook computers, smartphones, or audio-only phones.
  3. If Medicaid participants cannot access cell-phone based video technology, audio only telephone calls will be permitted.
- Services provided through telehealth are subject to the same program restrictions, preauthorizations, limitations and coverage that exist for the service when provided in-person.
- This expansion applies to services delivered to a Medicaid participant via fee-for-service or through a HealthChoice Managed Care Organization (“MCO”)

**To bill for Medicaid Telehealth services**

- Providers must bill for the appropriate service code.
- Place of Service Code: 11
- Modifier – GT
- **NEW** Medicaid has issued Guidance on Well-Child Visits and Telehealth
  
- Additional information regarding Telehealth Program requirements and FAQs may be found here: [https://mmcp.health.maryland.gov/Pages/telehealth.aspx](https://mmcp.health.maryland.gov/Pages/telehealth.aspx)

**CareFirst**

- Expanding their telemedicine policy to include additional specialties and have waived cost sharing on video visits for most members.
- Reimburse for provider/patient phone calls for select specialties (99441: Primary care, obstetrics & gynecology, psychiatry, geriatrics | 98966: Psychology, LCSW, LCPC)

**UnitedHealthcare**

Telehealth

- Office visit CPT: 99201-99205 & CPT: 99211-99215
- Place of Service: 11
- Modifier: 95
- New & Established patients

Virtual Check-in:

- CPT: G2010 Qualified non-MD HP
- CPT: G2012 or 99441 (5-10 min) CPT: 98966-98968
- CPT: 99442 (11-20 min)
- CPT: 99443 (21-30 min)
- Place of Service: 11
- Modifier: None
- New & Established patients

**Aetna**
Telehealth
- Office visit CPT: 99201-99205 & CPT: 99211-99215
- Place of Service: 02 (Aetna Medicare may use POS 02 or 11)
- Modifier: 95 or GT
- New & Established patients
Virtual Check-in:
- CPT: G2010 Qualified non-MD HP
- CPT: G2012 or 99441 (5-10 min)
- CPT: 99442 (11-20 min)
- CPT: 99443 (21-30 min)
- Place of Service: 02
- Modifier: None
- Established patients only
E-Visit:
- It will no longer be covered, unless state-mandated
- Copayments waived for telehealth

**Cigna**
Telehealth
- Office visit CPT: 99201-99205 & CPT: 99211-99215
- Place of Service: 11
- Modifier: GQ, GT or 95
- New & Established patients
Virtual Check-in:
- CPT: G2012
- Place of Service: 11
- Modifier: None
- Established patients only
E-Visit:
- N/A

Please contact Colleen George at cgeorge@medchi.org with any questions