







COVID-19 Medicare Telehealth Coverage Guidelines

A quick reference guide to Medicare telehealth services during the COVID-19 pandemic

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Telehealth Guidelines	Links				
Telemedicine is temporarily defined by CMS as real time services rendered using any interactive audio-only and/or video telecommunications system used by a provider (physician, PA, advanced practitioner, NP, or other health professional) to a patient at home or in other settings. Telecommunication systems include (but are not limited to): Skype Google Hangout FaceTime CGMtelehealth.com doxy.me Webex vsee.com	https://www.cms.gov/newsroom/press-releases/ trump-administration-issues-second-round-sweeping- changes-support-us-healthcare-system-during-covid https://www.cms.gov/newsroom/fact-sheets/ medicare-telemedicine-health-care-provider-fact-sheet				
Telephone-only visits (no video) for evaluation and management are allowed for new or established patients (use CPT codes 99441-99443 or 98966-98968 as warranted). Effective 3/1/20, reimbursement for audio-only telehealth services (CPT codes 99441-99443 only) was temporarily increased to approximately \$46-\$110.	https://www.pyapc.com/insights/expanded- medicare-telehealth-coverage-covid-19/ https://www.cms.gov/newsroom/press-releases/ trump-administration-issues-second-round-sweeping- changes-support-us-healthcare-system-during-covid				
Telehealth services expanded to include ED visits, hospital care and discharge, critical care, initial nursing facility visits, inpatient neonatal, critical pediatric care, and more.	https://www.cms.gov/files/document/covid-19- physicians-and-practitioners.pdf				
A provider can render telemedicine services from his/her home while continuing to bill from his/her enrolled location. Add Modifier –95 to the billing code of your normal place of service to indicate telehealth.	https://www.cms.gov/files/document/covid-19- providers-and-practitioners.pdf https://www.cms.gov/Medicare/Medicare-General- Information/Telehealth/Telehealth-Codes				
Providers are paid at the facility rate for telemedicine services. Providers are paid at the non-facility (professional) rate for services that would otherwise be provided face-to-face during the pandemic. Add the POS 11 code or other POS code as appropriate.	https://www.cms.gov/apps/physician-fee-schedule/ overview.aspx https://edit.cms.gov/files/document/medicare- telehealth-frequently-asked-questions-faqs-31720.pdf				
Health care providers will not be subject to penalties for HIPAA violations that occur in the good-faith provision of telehealth using non-public-facing audio/video remote communication applications.	https://www.cms.gov/files/document/covid-19- physicians-and-practitioners.pdf https://www.aafp.org/journals/fpm/explore/online/ virtual_visits.html				
A written practitioner's order for a COVID-19 test or related lab test(s) for a beneficiary is no longer required for Medicare payment purposes. COVID-19 tests may be covered when ordered by any authorized healthcare professional per state law.	https://www.cms.gov/newsroom/press-releases/ trump-administration-issues-second-round-sweeping- changes-support-us-healthcare-system-during-covid				

COVID-19 Commercial and Medicaid Coverage Guidelines

A quick reference guide to temporary coverage policy updates during the COVID-19 pandemic

Payer	Links/Guidance
⇔aetna ™	https://www.aetna.com/health-care-professionals/provider-education-manuals/covid19-letter.html https://www.aetna.com/health-care-professionals/provider-education-manuals/covid-faq.html
bright M HEALTH	https://brighthealthplan.com/provider/resources/az-acn Bright Health has updated its coverage policies in response to COVID-19. For more information, please visit Bright Health in the Payer Spaces area of Availity.com and click on the "COVID-19 Billing Updates" document.
Cigna	https://static.cigna.com/assets/chcp/resourceLibrary/medicalResourcesList/medicalDoingBusinessWithCigna/medicalDbwcCOVID-19.html https://www.cigna.com/newsroom/news-releases/2020/cigna-makes-it-easier-for-hospitals-to-focus-on-covid-19-by-helping-accelerate-patient-transfers
(intel [®])	Intel covers visits for new and established patients via video (traditional E&M codes) and telephone (98966-98968, 99441-99443) as a percentage of Medicare, per ACN's agreement with Intel. During the Public Health Emergency, patient encounters that would typically be coded as E&M that are conducted by telephone only will be reimbursed as if conducted as a video visit.
mercy care	https://www.mercycareaz.org/providers/completecare-forproviders/news https://azahcccs.gov/AHCCCS/AboutUs/covid19FAQ.html
UnitedHealthcare®	https://www.uhcprovider.com/en/resource-library/news/Novel-Coronavirus -COVID-19.html https://www.uhcprovider.com/en/resource-library/news/provider- telehealth-policies.html

The information above and on each referenced web page is subject to change and should be confirmed periodically for accuracy. Please consult each payer's provider relations representative or your Clinical Performance Consultant at practicetransformation@azcarenetwork.org with any questions. Updated 05/04/2020.









COVID-19 Telehealth Billing Codes

Type of Service	Modality	Description	Billing Code(s)	Patient Type
E-Visit	Online Patient Portal	Online digital evaluation and management service through a patient portal.	99421, 95 (7-10 minutes) 99422, 95 (11-20 minutes) 99423, 95 (21 or more minutes)	Established
Telehealth	Audio/Visual Tools including (but not limited to): Skype FaceTime Zoom WebEx Google Hangout doxy.me vsee.com	Visit that uses audio and/or video telecommunication	99201,95 99202,95 99203,95 99204,95 99212,95 99213, 95 99214, 95 G0438, 95 * G0439, 95 *	New or Established
Telephonic Visit	Telephone Call	Communication via Telephone	99441, 95 (5-10 minutes) 99442, 95 (11-20 minutes) 99443, 95 (21-30 minutes)	New or Established
Virtual Check-in	Telephone Call	5-10 minute communication with physician to avoid unnecessary office visit.	G2012, 95	Established

^{*} Medicare only