

Coding Policy

Temporary Policy Emergency Provisions for: Telemedicine Services During COVID-19 Public Health Emergency for All Plans Except Medicare

CODING POLICY NUMBER: 67.E

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SCOPE: Providence Health Plan, Providence Health Assurance, Providence Plan Partners, and Ayin Health Solutions as applicable (referred to individually as “Company” and collectively as “Companies”). **The full Company portfolio of current coding policies is available online and can be [accessed here](#).**

POLICY APPLICATION

- Providence Health Plan Participating Providers
- Non-Participating Practitioners
- Commercial Medicaid/Oregon Health Plan Medicare

POLICY STATEMENT

Note: There are temporary provisions in place for this policy during the COVID-19 public health emergency. See the [Procedure](#) section below for information regarding these emergency provisions.

- I. This policy (67.0.E) “Telemedicine Services During COVID-19 Public Health Emergency for All Plans Except Medicare” applies to telemedicine service for Commercial and OHP lines of business for services on or after June 1, 2023. **For services prior to June 1, 2023, see Coding Policy 67.0.B for Commercial Plans for Oregon Providers, Coding Policy 67.0.C for OHP, and 67.0.D for Commercial Plans for Washington Providers.** For two-

way video visits prior to March 6, 2020, providers are referred to Providence Health Plan Coding Policy 67.0 (Telehealth Services Requiring an Originating Site), which is available on ProvLink.

- II. **The Office for Civil Rights at the Department of HHS requires all telehealth platforms to be HIPAA-compliant beginning the day after the end of the PHE on May 11, 2023. Smart phone video options such as FaceTime and Skype will no longer be an option for telehealth services beginning May 12, 2023, based on these requirements.**

Telecommunication services are services delivered via an electronic two-way communication system. Company provides coverage for telecommunication services when the service is medically necessary and supported by evidence-based medical criteria. Coverage for telecommunication services includes payment for consultations, office visits, individual psychotherapy, and pharmacologic management. All providers (including chiropractors and naturopaths) who are credentialed with Company and who are performing services within their scope of license may perform telecommunication services listed on this policy.

- III. For services on or before May 11, 2023, see Coding Policy 67.0.B for Commercial Oregon plans, Coding Policy 67.0.C for OHP, and Coding Policy 67.0.D for Commercial Washington plans. For services on or after May 12, 2023, and until further notice, Company will allow payment for medically appropriate services identified on [List A](#) when performed using a HIPAA compliant device. The following conditions must be met for Company to make payments for telecommunication services listed on this policy:
- A. The service must be furnished by a physician or authorized practitioner credentialed with Company;
 - B. Through 12/31/2024 or until further notice, telehealth services may be billed “incident-to” subject to PHP Reimbursement Policy “Incident-To Services,” which is available on ProvLink. The supervising provider for telehealth services billed “incident to” may be available by audio/video technology rather than in person;
 - C. The service must be furnished to an individual who is eligible for telecommunication services with Company;
 - D. All services listed on this policy may be performed either by two-way video connection or audio-only connection. **Either modifier 93 or modifier FQ is required for audio-only services performed on or after January 1, 2022.**
- IV. Inpatient telehealth consultations (HCPCS codes G0425-G0427 and G0406-G0408) are furnished to Company members in hospitals or skilled nursing facilities via telecommunication technology at the request of the physician of record, the attending physician, or other appropriate source. The physician or practitioner who furnishes the inpatient consultation via telecommunication technology may not be the physician or practitioner of record or the attending physician or practitioner, and the inpatient telehealth consultation must be distinct from the care provided by the physician or practitioner of record or the attending physician or practitioner.
- V. Additional telecommunication services not addressed on this policy:

- A. Telephone visits (CPT codes 99441-99443 and 98966-98968) are covered by Company as described on Coding Policy 92.0.
- B. Online digital (e.g., email) services (CPT codes 99421-99423 and CPT codes 98970-98972) are covered by Company as described on Coding Policy 53.0.
- C. Company also pays virtual check-in services (HCPCS code G2012) for both new and established patients.

Professional Charges

- VI. As a condition of Company payment for telecommunication services, the physician or practitioner performing the service **must be licensed to provide the service under State law**. When the physician or practitioner is licensed under State law to provide a covered telecommunication service (i.e., professional consultation, office and other outpatient visits, individual psychotherapy, or pharmacologic management), then he or she may bill for and receive payment for this service when delivered via a telecommunication system.

PROCEDURE

NEED AND DURATION OF EMERGENCY PROVISIONS

- Need for the temporary Provisions: Emergency provisions for Telehealth Services to accommodate COVID-19 Public Health Emergency (PHE).
- Documents or source relied upon: CMS Policy and Regulatory Revisions in Response to the COVID-19 Public Health Emergency (PHE).
- Effective Date: June 1, 2023 (See Coding Policy 67.0.A for Medicare telehealth services during PHE; See Coding Policies 67.0.B, 67.0.C, and 67.0.D for Commercial and OHP plans for telehealth services during PHE prior to June 1, 2023.)
- Termination Date: December 31, 2024
- Reassessment Date determined at Companies' sole discretion: December 31, 2024.

THIS POLICY DOES NOT REQUIRE THE PATIENT TO BE LOCATED IN AN ORIGINATING SITE. THIS IS AN EMERGENCY PROVISION SUBJECT TO CANCELLATION AT THE SOLE DISCRETION OF COMPANY.

GENERAL

The use of a telecommunication system may substitute for a face-to-face, "hands on" encounter for services listed on this policy. The CPT/HCPCS codes covered by this policy are listed on [List A](#) at the end of the policy. **Telemedicine rules do not apply when the beneficiary and the practitioner are in the same location even if audio/video technology assists in furnishing a service.**

Originating Site Facility Fee Payment Methodology

For the duration of the public health emergency, the patient is not required to be in an originating site. These instructions for originating site payment methodology apply only to services that are performed when the patient is located in an originating site, such as outpatient hospital or physician's office.

To receive the originating facility site payment, submit claims with HCPCS code Q3014, "Telehealth originating site facility fee" (short description "telehealth facility fee"). The type of service for telehealth originating site facility fee is "9, other items and services."

The benefit may be billed on bill types 12X, 13X, 22X, 23X, 71X, 72X, 73X, 76X, and 85X. Unless otherwise applicable, report the originating site facility fee under revenue code 078X and include HCPCS code Q3014.

If the originating site is a physician's office, the office location code (or place of service code) "11" is the only payable setting for code Q3014. The provider who bills the originating site facility fee may not be the same provider (or the same provider group or the same tax identification number) as the provider who is billing for services performed.

Modifier G0 (Telehealth services for diagnosis, evaluation, or treatment, of symptoms of an acute stroke) may be added to Q3014 to identify services furnished for treatment of acute stroke. This modifier is not required by Company but will not affect payment if used.

Location Codes and Modifiers for Dates of Service on or After January 1, 2022

Either modifier 93 or modifier FQ is required for all services performed using audio-only communication technology on or after January 1, 2022.

Modifier FQ: The service was furnished using audio-only communication technology

Modifier 93: Synchronous telemedicine service rendered via telephone or other real-time interactive audio-only telecommunications system

For dates of service on or after January 1, 2022, telecommunication services on [List A](#) on this policy must be reported either with location code 02 (Telehealth Provided Other than in Patient's Home) or location code 10 (Telehealth Provided in Patient's Home). Modifiers GT, 95, GQ, and G0 are not required but will not affect payment if used.

- **Location code 02:** Patient is located in hospital or other facility when receiving health services or health related services through telecommunication technology. Services billed with location code 02 will be paid at the facility rate.
 - **Either modifier 93 or modifier FQ is required for services performed using audio-only communication technology.**
 - Modifiers GT, 95, GQ, and G0 are not required but will not affect payment if used.

- **Location code 10:** Patient is located in a private residence (or any location other than a hospital or other facility) when receiving health services or health related services through telecommunication technology. Services billed with location code 10 will be paid at the non-facility rate.
 - **Either modifier 93 or modifier FQ is required for services performed using audio-only communication technology.**
 - Modifiers GT, 95, GQ, and G0 are not required but will not affect payment if used.
- **Preventive medicine services** (CPT codes 99381-99397) are paid by Company when performed using telecommunication technology. Use either location code 02 or location code 10 as appropriate based on the patient’s location and append Modifier 52 to the CPT code.
 - **Modifier 52 is required for preventive medicine codes performed as telehealth services.**
 - **Either modifier 93 or modifier FQ is required for preventive medicine services performed using audio-only communication technology.**

REFERENCES

1. CMS Policy and Regulatory Revisions in Response to the COVID-19 Public Health Emergency
2. Oregon House Bill 2508
3. Reimbursement Policy “Incident To”

POLICY REVISION HISTORY

Date	Revision Summary
6/2023	Combined Coding Policies 67.0.B, 67.0.C, and 67.0.D onto this policy, 67.0.E.
6/2023	Office of Civil Rights requires HIPAA-compliant platforms for telehealth services performed on or after May 12, 2023.
6/2023	Emergency provisions for PHE extended through December 31, 2024.
1/2024	Annual policy review. Added CPT codes 0591T, 0592T, 0593T and HCPCS codes G0136, G2211.
6/2024	Removed wording that said telehealth services may not be billed incident-to. Updated policy to show telehealth services may be billed “incident-to” subject to PHP Reimbursement Policy “Incident-To Services,” which is available on ProvLink. The supervising provider for telehealth services billed “incident to” may be available by audio/video technology rather than in person.

APPENDIX

LIST A

All services on this list may be performed using audio-only communication technology or two-way video. HIPAA-compliant platforms are required. **Either modifier 93 or modifier FQ is required for services performed using audio-only communication technology.**

Code	Communication Technology
0362T	Audio or Two-Way Video
0373T	Audio or Two-Way Video
0591T	Audio or Two-Way Video
0592T	Audio or Two-Way Video
0593T	Audio or Two-Way Video
77427	Audio or Two-Way Video
90785	Audio or Two-Way Video
90791	Audio or Two-Way Video
90792	Audio or Two-Way Video
90832	Audio or Two-Way Video
90833	Audio or Two-Way Video
90834	Audio or Two-Way Video
90836	Audio or Two-Way Video
90837	Audio or Two-Way Video
90838	Audio or Two-Way Video
90839	Audio or Two-Way Video
90840	Audio or Two-Way Video
90845	Audio or Two-Way Video
90846	Audio or Two-Way Video
90847	Audio or Two-Way Video
90849	Audio or Two-Way Video
90853	Audio or Two-Way Video
90875	Audio or Two-Way Video
90901	Audio or Two-Way Video
90951	Audio or Two-Way Video
90952	Audio or Two-Way Video
90953	Audio or Two-Way Video
90954	Audio or Two-Way Video
90955	Audio or Two-Way Video
90956	Audio or Two-Way Video
90957	Audio or Two-Way Video
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90970	Audio or Two-Way Video
92002	Audio or Two-Way Video
92004	Audio or Two-Way Video
92012	Audio or Two-Way Video
92014	Audio or Two-Way Video
92507	Audio or Two-Way Video
92508	Audio or Two-Way Video
92521	Audio or Two-Way Video
92522	Audio or Two-Way Video
92523	Audio or Two-Way Video
92524	Audio or Two-Way Video
92526	Audio or Two-Way Video
92550	Audio or Two-Way Video
92552	Audio or Two-Way Video
92553	Audio or Two-Way Video
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92557	Audio or Two-Way Video
92558	Audio or Two-Way Video
92563	Audio or Two-Way Video
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92567	Audio or Two-Way Video
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92587	Audio or Two-Way Video
92588	Audio or Two-Way Video
92601	Audio or Two-Way Video
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92604	Audio or Two-Way Video
92607	Audio or Two-Way Video
92608	Audio or Two-Way Video
92609	Audio or Two-Way Video
92610	Audio or Two-Way Video
92625	Audio or Two-Way Video
92626	Audio or Two-Way Video
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93750	Audio or Two-Way Video
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94002	Audio or Two-Way Video
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94005	Audio or Two-Way Video
94664	Audio or Two-Way Video
95970	Audio or Two-Way Video
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97755	Audio or Two-Way Video
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99292	Audio or Two-Way Video
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G0446	Audio or Two-Way Video
G0447	Audio or Two-Way Video
G0470	Audio or Two-Way Video
G0459	Audio or Two-Way Video
G0506	Audio or Two-Way Video
G0508	Audio or Two-Way Video
G0509	Audio or Two-Way Video
G0513	Audio or Two-Way Video
G0514	Audio or Two-Way Video
G2086	Audio or Two-Way Video
G2087	Audio or Two-Way Video
G2088	Audio or Two-Way Video
G2211	Audio or Two-Way Video
G2212	Audio or Two-Way Video
G3002	Audio or Two-Way Video
G3003	Audio or Two-Way Video
S0250	(AWV Only) Audio or Two-Way Video
S9152	Audio or Two-Way Video
S9443	Audio or Two-Way Video