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<b>Subject</b> Telehealth/Telemedicine Services Temporary Policy in Response to COVID-19 Public Emergency	<b>Attachments</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Key words</b> Telemedicine, Telehealth, two-way interactive video, e-visits, Scheduled Telephone Visits	<b>Number</b> <b>AT 004</b>
<b>Category</b> Business Practices (BP)	<b>Effective Date</b> <b>March 17, 2020</b>
<b>Manual</b> HealthPartners Administrative Manual	<b>Last Review Date</b> <b>October 12, 2020</b>
<b>Issued By</b> Provider Relations and Network Management	<b>Next Review Date</b> <b>1/1/2021</b>
<b>Applicable</b> <ul style="list-style-type: none"> <li>• All Primary Care Medical Groups and Providers</li> <li>• All Specialty Care Medical Groups and Providers</li> <li>• All Facilities and Providers</li> </ul>	<b>Origination Date</b> <b>November 1, 2012</b>
	<b>Retired Date</b>

**Products**

- Fully Insured
- Self-Insured
- Medicare Cost
- Medicare Advantage
- Medicaid
- MSHO
- SNBC
- WI Marketplace

This policy will remain in effect until 12/31/2020, unless extended, regardless of whether the current National Public Emergency for the COVID-19 pandemic expires in October 2020. This policy will be reviewed at the end of 2020 for possible extension depending on the status of the COVID-19 pandemic.

Coverage of Telehealth/Telemedicine services for certain products may not be available for all self-insured plans.

Plans where Medicare is primary, such as Medicare Supplement and Retiree National Choice, should follow CMS guidance on billing for Telemedicine, E-visits, Scheduled Telephone Visits and Virtual Therapy visits. CMS guidance can be found here: <https://www.cms.gov/newsroom/fact-sheets/medicare-telemedicine-health-care-provider-fact-sheet> and here: <https://edit.cms.gov/files/document/medicare-telehealth-frequently-asked-questions-faqs-31720.pdf>

FQHC and RHC designated providers should follow DHS guideline for telemedicine claims submission when submitting telemedicine claims for Medicaid members. Claims for these providers are passed through to DHS for payment.

**I. PURPOSE**

To define Telehealth/Telemedicine services and communicate the requirements and conditions providers must follow when conducting such services for HealthPartners members.

HealthPartners supports the use of Telehealth/Telemedicine as an alternative to an office visit. **In**



response to the COVID-19 pandemic, HealthPartners is supporting access to Telehealth/Telemedicine through accepting claims for expanded services under this Policy. In addition, the physician or medical practitioner may be located at home while providing the Telehealth/Telemedicine services described in this policy. Access to these services is limited to eligible providers that are able to meet the conditions of this policy.

## II. **POLICY**

HealthPartners recommends application used for Telehealth/Telemedicine have back-up and disaster recovery plans that are documented and available to HealthPartners and all applications be Health Insurance Portability and Accountability Act (HIPAA) compliant and follow all applicable state and federal rules. **In response to the COVID-19 pandemic, HealthPartners is aligning our policy with CMS and allowing the use of non HIPAA compliant audio/video applications such as Skype and Facetime for Telemedicine services.**

### **Telemedicine Services:**

1. **Description:** A visit between a patient and a physician or medical practitioner via a two-way interactive audiovisual connection. The patient initiates the visit from an originating site and the physician or medical practitioner communicates from a distant site. **In response to the COVID-19 pandemic, the definition of a Telemedicine Visit is expanded to cover audio only visits. These audio only visits may occur through a telephone call. In addition, in response to the COVID-19 pandemic, Telemedicine Services may be used for both *new* and *established* patients. HealthPartners is also aligning our policy with CMS and allowing the use of non HIPAA compliant audio/video applications such as Skype and Facetime for Telemedicine services.**
2. **CPT/HCPC Codes Eligible for Telemedicine Reimbursement:** See Attachment I to this policy for a list of CPT and HCPC codes eligible for Telemedicine reimbursement (*code list updated 4-9-2020*).
3. **Place of Service:** Place of Service Code (POS) 02 should be billed for Telemedicine. POS 02 description: *The location where health services and health related services are provided or received, through a telecommunication system.* **In response to the COVID-19 pandemic, claims billed with a POS 02 will reimburse using the Non-Facility Fee Schedule.** HealthPartners will also accept claims billed with the POS code that would have been used if the visit had occurred face-to-face (for example: POS 11 if the visit would have occurred in a clinic) and the modifier 95 indicating the visit occurred via telecommunications. **In response to the COVID-19 pandemic, claims billed with modifier 95 will be reimbursed using the same fee schedule as if the visit occurred face-to-face.** This approach aligns with CMS guidance for submitting Medicare claims.
4. **Originating Site Billing:** An originating site does not need to be billed for a Telemedicine Service. An originating site fee may be billed if the patient is at a clinic or similar location and initiates the visit through secure equipment owned and located at that site. Reimbursable originating sites include, but are not limited to, a practitioner's office/clinic, hospital, skilled nursing facility, rural health clinic, and federally qualified health center. Patient visits initiated at home or through their own phone or computer do not qualify for reimbursement of an originating site fee. The following code is used to bill for the origination, when appropriate: Q3014 – *Originating Site Facility Fee.*
5. **Modifiers:** The following modifiers are related to Telemedicine services. With the exception of modifier 95 with a POS other than 02, as indicated under section 3 above, none of these modifiers are required for payment: GT, GQ, G0, 95. Claims billed with POS 02 should not have GT, GQ, G0 or 95 modifier attached since the POS 02 already indicates the visit occurred via telecommunications.
6. **Eligible Physicians and Medical Practitioners:** Physician, Nurse Practitioner, Physician Assistant, Nurse Midwife, Clinical Nurse Specialist, Pharmacist, Registered Dietician or nutrition professional, Certified Genetic Counselor, Podiatrist, Audiologists, Licensed Mental Health Therapist, Licensed Chiropractor. *For physical, occupational and speech therapy codes refer to the Virtual Physical Therapy, Occupational Therapy, and Speech Therapy section below.*



7. **Telemedicine Services Billed by a Facility:** Those services listed in section 2 above that are billable by a facility on a 1450 claims form should include modifier “95” to indicate the service was provided via telemedicine since there isn’t a POS code for 1450 claims. Facility room charges are not reimbursable for telemedicine services.

**Scheduled Telephone Visits:**

1. **Description:** A telephone encounter between a physician or medical practitioner and an established patient.
2. **CPT/HCPC Codes Eligible for Scheduled Telephone Visit Reimbursement:**

Code	Description
98966	HC PRO PHONE CALL 5-10 MIN
98967	HC PRO PHONE CALL 11-20 MIN
98968	HC PRO PHONE CALL 21-30 MIN
99441	PHONE E/M PHYS/QHP 5-10 MIN
99442	PHONE E/M PHYS/QHP 11-20 MIN
99443	PHONE E/M PHYS/QHP 21-30 MIN
99446	INTERPROF PHONE/ONLINE 5-10
99447	INTERPROF PHONE/ONLINE 11-20
99448	INTERPROF PHONE/ONLINE 21-30
99449	INTERPROF PHONE/ONLINE 31/>
G2012	BRIEF CHECK IN BY MD/QHP

3. **Eligible Physicians and Medical Practitioners:** Physician, Nurse Practitioner, Physician Assistant, Nurse Midwife, Clinical Nurse Specialist, Pharmacist, Registered Dietician or nutrition professional, Certified Genetic Counselor, Podiatrist, Speech Therapist, Physical Therapist, Occupational Therapist.

**Electronic Visit (e-visit) Services:**

1. **Description:** Electronic Visit (E-visit) is a web-based exchange of non-urgent clinical information between a physician or medical practitioner and an established patient conducted on a secure encrypted web site.
2. **CPT/HCPC Codes Eligible for Electronic Visits (E-visits):**

Code	Description
98969	ONLINE SERVICE BY HC PRO
98970	ONLINE SERVICE BY HC PRO 5-10 MINS
98971	ONLINE SERVICE BY HC PRO 11-20 MINS
98972	ONLINE SERVICE BY HC PRO 21+ MINS
99421	ONLINE E/M BY PHYS/QHP 5-10 MIN
99422	ONLINE E/M BY PHYS/QHP 11-20 MIN
99423	ONLINE E/M BY PHYS/QHP 21+ MIN
G2061	QUAL NONMD EST PT 5-10M
G2062	QUAL NONMD EST PT 11-20M

### Virtual Physical Therapy, Occupational Therapy, Speech Therapy:

1. **Description:** Virtual Therapy for physical, occupational, and speech therapy is a therapy visit between a patient and therapist via a secure two-way interactive audiovisual connection. **In response to the COVID-19 pandemic, Virtual Therapy is eligible for reimbursement when the Virtual Therapy visit occurs via two-way interactive audio and visual connection.**
2. **CPT/HCPC Codes Eligible for Virtual Therapy Reimbursement:** **In response to the COVID-19 pandemic, therapists should bill using physical therapy CPT codes (97010-97763) or speech therapy codes (92521-92524, 92507, 92526) with the Place of Service (POS) Code 02.** HealthPartners will also accept claims billed with the POS code that would be have been used if the visit had occurred face-to-face (for example: POS 11 if the visit would have occurred in a clinic) and the modifier 95 indicating the visit occurred via telecommunications. **Claims billed on a 1450 form should include the modifier “95” to indicate the therapy service was provided via telemedicine since there isn’t a POS Code for 1450 claims. In addition, in response to the COVID-19 pandemic, HealthPartners is allowing the use of non HIPAA compliant audio/video applications such as Skype and Facetime for Virtual Therapy Visits.**
3. **Eligible Physicians and Medical Practitioners:** Physical Therapist, Occupational Therapist, Speech Therapist

### Virtual Chiropractic Therapeutic Visit:

1. **Description:** Virtual therapeutic exercises visit provided by a licensed Chiropractor via a secure two-way interactive audiovisual connection. **In response to the COVID-19 pandemic, Virtual Chiropractic Therapeutic Visits are eligible for reimbursement when the visit occurs via two-way interactive audio and visual connection for established patients, one visit per month.**
2. **CPT/HCPC Codes Eligible for Virtual Chiropractic Therapeutic Visit:** 97110 (therapeutic exercise) **In response to the COVID-19 pandemic, these visits should be billed using CPT code 97110 (therapeutic exercise) with the Place of Service (POS) Code 02.** HealthPartners will also accept claims billed with the POS code that would be have been used if the visit had occurred face-to-face (for example: POS 11 if the visit would have occurred in a clinic) and the modifier 95 indicating the visit occurred via telecommunications.
3. **Eligible Physicians and Medical Practitioners:** Licensed Chiropractors

### Virtual Home Health Care Visit:

1. **Description:** Virtual home health care visit provided by a licensed home health nurse via a secure two-way interactive audiovisual connection. **In response to the COVID-19 pandemic, Virtual Home Health Visits are eligible for reimbursement when the visit occurs via two-way interactive audio and visual connection for established patients and the care delivered during the visit does not require direct patient contact.**
2. **CPT/HCPC Codes Eligible for Virtual Home Health Visit:** See Attachment II to this policy for a list of CPT and HCPC codes eligible for Virtual Home Health reimbursement. **In response to the COVID-19 pandemic, these visits should be billed using the appropriate code with the Place of Service (POS) Code 02.**

3. **Eligible Physicians and Medical Practitioners:** Licensed home care nurses and therapists.

#### **Virtual Doula and Post-Partum Home Visits (Medicaid Only):**

1. **Description:** Virtual Doula and Post-Partum Home Visits are doula care & visits (provided by licensed doulas) and post-partum visits (provided by a licensed public health nurses) via a secure two-way interactive audiovisual connection. **In response to the COVID-19 pandemic, Virtual Doula and Post-Partum Visits are eligible for reimbursement when the visit occurs via two-way interactive audio and visual connection.**
2. **CPT/HCPC Codes Eligible for Virtual Doula and Post-Partum Visit:** Virtual Doula Visits: 99199 with U4 modifier, S9445 with U4 modifier are codes eligible for reimbursement when billed with the POS 02. Virtual Post-Partum Home Visit: S9123 and S9123 with U8 modifier are eligible for reimbursement when billed with POS 02.
3. **Eligible Physicians and Medical Practitioners:** Licensed doulas (Doula Virtual Visits) and licensed public health nurses (Virtual Post-Partum Home Visits).

#### **Virtual Autism Spectrum Disorder Therapy and Skills Training:**

1. **Description:** Virtual therapy and skills training for autism spectrum disorder diagnosed patients via a secure two-way interactive audiovisual connection. **In response to the COVID-19 pandemic, Virtual Autism Spectrum Disorder Therapy and Skills Training are eligible for reimbursement when the visit occurs via two-way interactive audio and visual connection.**
2. **CPT/HCPC Codes Eligible for Autism Spectrum Disorder Therapy and Skills Training: In response to the COVID-19 pandemic, these visits should be billed using codes 97151-97158 with the Place of Service (POS) Code 02.** HealthPartners will also accept claims billed with the POS code that would be have been used if the visit had occurred face-to-face (for example: POS 11 if the visit would have occurred in a clinic) and the modifier 95 indicating the visit occurred via telecommunications.
3. **Eligible Physicians and Medical Practitioners:** Licensed therapist or practitioner.

### **III. PROCEDURE(S)**

#### **Provider Responsibility:**

1. Submit claims on behalf of members for Telehealth/Telemedicine services
2. Upon request, provide a description of the types of Telehealth/Telemedicine services offered. The following services would not be reimbursed as part of Telehealth/Telemedicine:
  - Prescription renewals
  - Scheduling a test or appointment
  - Call to nurse line for questions or standing orders, e.g. sinusitis or conjunctivitis
  - Clarification of issues from previous visit
  - Other non-clinical communication
  - Updating patient demographic information
  - Reporting test results
  - Requesting a referral
  - Phone calls other than Scheduled Telephone Visits (STV) or email
  - Interactive video visits not initiated by the member



- Reminders
- Providing educational materials

**HealthPartners Responsibility:**

HealthPartners will process E-visits, Scheduled Telephone Visits, Telehealth/Telemedicine, and Virtual Therapy visits in the same manner as other evaluation & management and visit claims although reimbursement may differ. Member responsibility will apply to these services according to the member's benefit.

**IV. COMPLIANCE**

Failure to comply with this policy or the procedures may result in disciplinary action, up to and including termination.

**V. ATTACHMENTS**

Attachment I

**VI. RESOURCES**

MN Administrative Uniformity Committee (AUC) CMS  
Medicare Managed Care Manual, Chapter 4

**VIII. APPROVAL(S)**

Sr. Director  
Provider Relations and Network Management

Sr. Vice President  
Provider Partnerships, PC Relations & Contracting

**VII. ENDORSEMENT**

Affordability Council



**ATTACHMENT I TO ATT004 TELEHEATH SERVCIES  
LIST OF CODES ELIGIBLE FOR TELEHEALTH REIMBURSEMENT**

<b>Code</b>	<b>Description</b>
90785	Psytx complex interactive
90791	Psych diagnostic evaluation
90792	Psych diag eval w/med srvcs
90832	Psytx pt&/family 30 minutes
90833	Psytx pt&/fam w/e&m 30 min
90834	Psytx pt&/family 45 minutes
90836	Psytx pt&/fam w/e&m 45 min
90837	Psytx pt&/family 60 minutes
90838	Psytx pt&/fam w/e&m 60 min
90839	Psytx crisis initial 60 min
90840	Psytx crisis ea addl 30 min
90845	Psychoanalysis
90846	Family psytx w/o patient
90847	Family psytx w/patient
90951	Esrd serv 4 visits p mo <2yr
90952	Esrd serv 2-3 vsts p mo <2yr
90954	Esrd serv 4 vsts p mo 2-11
90955	Esrd srv 2-3 vsts p mo 2-11
90957	Esrd srv 4 vsts p mo 12-19
90958	Esrd srv 2-3 vsts p mo 12-19
90960	Esrd srv 4 visits p mo 20+
90961	Esrd srv 2-3 vsts p mo 20+
90963	Esrd home pt serv p mo <2yrs
90964	Esrd home pt serv p mo 2-11
90965	Esrd home pt serv p mo 12-19
90966	Esrd home pt serv p mo 20+
90967	Esrd home pt serv p day <2
90968	Esrd home pt serv p day 2-11
90969	Esrd home pt serv p day 12-19
90970	Esrd home pt serv p day 20+
96116	Neurobehavioral status exam
96150	Assess hlth/behave init
96151	Assess hlth/behave subseq
96152	Intervene hlth/behave indiv
96153	Intervene hlth/behave group
96154	Interv hlth/behav fam w/pt

96160	Pt-focused hlth risk assmt
96161	Caregiver health risk assmt
97802	Medical nutrition indiv in
97803	Med nutrition indiv subseq
97804	Medical nutrition group
99201	Office/outpatient visit new
99202	Office/outpatient visit new
99203	Office/outpatient visit new
99204	Office/outpatient visit new
99205	Office/outpatient visit new
99211	Office/outpatient visit est
99212	Office/outpatient visit est
99213	Office/outpatient visit est
99214	Office/outpatient visit est
99215	Office/outpatient visit est
99231	Subsequent hospital care
99232	Subsequent hospital care
99233	Subsequent hospital care
99307	Nursing fac care subseq
99308	Nursing fac care subseq
99309	Nursing fac care subseq
99310	Nursing fac care subseq
99354	Prolonged service office
99355	Prolonged service office
99356	Prolonged service inpatient
99357	Prolonged service inpatient
99406	Behav chng smoking 3-10 min
99407	Behav chng smoking > 10 min
99495	Trans care mgmt 14 day disch
99496	Trans care mgmt 7 day disch
99497	Advncd care plan 30 min
99498	Advncd are plan addl 30 min
G0108	Diab manage trn per indiv
G0109	Diab manage trn ind/group
G0270	Mnt subs tx for change dx
G0296	Visit to determ ldct elig
G0396	Alcohol/subs interv 15-30mn
G0397	Alcohol/subs interv >30 min
G0406	Inpt/tele follow up 15
G0407	Inpt/tele follow up 25
G0408	Inpt/tele follow up 35



G0420	Ed svc ckd ind per session	
G0421	Ed svc ckd grp per session	
G0425	Inpt/ed teleconsult30	
G0426	Inpt/ed teleconsult50	
G0427	Inpt/ed teleconsult70	
G0436	Tobacco-use counsel 3-10 min	
G0437	Tobacco-use counsel>10min	
G0438	Ppps, initial visit	
G0439	Ppps, subseq visit	
G0442	Annual alcohol screen 15 min	
G0443	Brief alcohol misuse counsel	
G0444	Depression screen annual	
G0445	High inten beh couns std 30m	
G0446	Intens behave ther cardio dx	
G0447	Behavior counsel obesity 15m	
G0459	Telehealth inpt pharm mgmt	
G0506	Comp asses care plan ccm svc	
G0508	Crit care telehea consult 60	
G0509	Crit care telehea consult 50	
G0513	Prolong prev svcs, first 30m	
G0514	Prolong prev svcs, addl 30m	
G2086	Off base opioid tx first m	
G2087	Off base opioid tx, sub m	
G2088	Off opioid tx month add 30	
77427	RADIATION TX MANAGEMENT X5	<i>Updated 4/9/2020 retro to 3/17/2020</i>
80502	LAB PATHOLOGY CONSULTATION	<i>Updated 4/9/2020 retro to 3/17/2020</i>
88329	PATH CONSULT INTROP	<i>Updated 4/9/2020 retro to 3/17/2020</i>
90849	Multiple family group psytx	<i>Updated 4/9/2020 retro to 3/17/2020</i>
90853	GROUP PSYCHOTHERAPY	<i>Updated 4/9/2020 retro to 3/17/2020</i>
90875	Psychophysiological therapy	<i>Updated 4/9/2020 retro to 3/17/2020</i>
90887	Consultation with family	<i>Updated 4/9/2020 retro to 3/17/2020</i>
90953	Esrd serv 1 visit p mo <2yr	<i>Updated 4/9/2020 retro to 3/17/2020</i>
90959	Esrd serv 1 vst p mo 12-19	<i>Updated 4/9/2020 retro to 3/17/2020</i>
90962	ESRD SERV 1 VISIT P MO 20+	<i>Updated 4/9/2020 retro to 3/17/2020</i>
92507	SPEECH/HEARING THERAPY	<i>Updated 4/9/2020 retro to 3/17/2020</i>
94005	HOME VENT MGMT SUPERVISION	<i>Updated 4/9/2020 retro to 3/17/2020</i>
96105	Assessment of aphasia	<i>Updated 4/9/2020 retro to 3/17/2020</i>
96121	Nubhvl xm phy/qhp ea addl hr	<i>Updated 4/9/2020 retro to 3/17/2020</i>
96127	BRIEF EMOTIONAL/BEHAV ASSMT	<i>Updated 4/9/2020 retro to 3/17/2020</i>
96130	Psycl tst eval phys/qhp 1st	<i>Updated 4/9/2020 retro to 3/17/2020</i>
96131	Psycl tst eval phys/qhp ea	<i>Updated 4/9/2020 retro to 3/17/2020</i>

96132	Nrpsyc tst eval phys/qhp 1st	Updated 4/9/2020 retro to 3/17/2020
96133	Nrpsyc tst eval phys/qhp ea	Updated 4/9/2020 retro to 3/17/2020
96136	Psycl/nrpsyc tst phy/qhp 1s	Updated 4/9/2020 retro to 3/17/2020
96137	Psycl/nrpsyc tst phy/qhp ea	Updated 4/9/2020 retro to 3/17/2020
96138	Psycl/nrpsyc tech 1st	Updated 4/9/2020 retro to 3/17/2020
96139	Psycl/nrpsyc tst tech ea	Updated 4/9/2020 retro to 3/17/2020
96156	Hlth bhv assmt/reassessment	Updated 4/9/2020 retro to 3/17/2020
96158	Hlth bhv ivntj indiv 1st 30	Updated 4/9/2020 retro to 3/17/2020
96159	Hlth bhv ivntj indiv ea addl	Updated 4/9/2020 retro to 3/17/2020
96164	Hlth bhv ivntj grp 1st 30	Updated 4/9/2020 retro to 3/17/2020
96165	Hlth bhv ivntj grp ea addl	Updated 4/9/2020 retro to 3/17/2020
96167	Hlth bhv ivntj fam 1st 30	Updated 4/9/2020 retro to 3/17/2020
96168	Hlth bhv ivntj fam ea addl	Updated 4/9/2020 retro to 3/17/2020
96170	Hlth bhv ivntj fam wo pt 1st	Updated 4/9/2020 retro to 3/17/2020
96171	Hlth bhv ivntj fam w/o pt ea	Updated 4/9/2020 retro to 3/17/2020
99024	POSTOP FOLLOW-UP VISIT	Updated 4/9/2020 retro to 3/17/2020
99220	INITIAL OBSERVATION CARE	Updated 4/9/2020 retro to 3/17/2020
99221	Initial hospital care	Updated 4/9/2020 retro to 3/17/2020
99222	INITIAL HOSPITAL CARE	Updated 4/9/2020 retro to 3/17/2020
99223	Initial hospital care	Updated 4/9/2020 retro to 3/17/2020
99315	NURSING FAC DISCHARGE DAY	Updated 4/9/2020 retro to 3/17/2020
99316	NURSING FAC DISCHARGE DAY	Updated 4/9/2020 retro to 3/17/2020
99327	DOMICIL/R-HOME VISIT NEW PAT	Updated 4/9/2020 retro to 3/17/2020
99328	DOMICIL/R-HOME VISIT NEW PAT	Updated 4/9/2020 retro to 3/17/2020
99334	DOMICIL/R-HOME VISIT EST PAT	Updated 4/9/2020 retro to 3/17/2020
99335	DOMICIL/R-HOME VISIT EST PAT	Updated 4/9/2020 retro to 3/17/2020
99336	DOMICIL/R-HOME VISIT EST PAT	Updated 4/9/2020 retro to 3/17/2020
99337	DOMICIL/R-HOME VISIT EST PAT	Updated 4/9/2020 retro to 3/17/2020
99339	DOMICIL/R-HOME CARE SUPERVIS	Updated 4/9/2020 retro to 3/17/2020
99341	HOME VISIT NEW PATIENT	Updated 4/9/2020 retro to 3/17/2020
99342	HOME VISIT NEW PATIENT	Updated 4/9/2020 retro to 3/17/2020
99343	HOME VISIT NEW PATIENT	Updated 4/9/2020 retro to 3/17/2020
99344	HOME VISIT NEW PATIENT	Updated 4/9/2020 retro to 3/17/2020
99345	HOME VISIT NEW PATIENT	Updated 4/9/2020 retro to 3/17/2020
99347	HOME VISIT EST PATIENT	Updated 4/9/2020 retro to 3/17/2020
99348	HOME VISIT EST PATIENT	Updated 4/9/2020 retro to 3/17/2020
99349	HOME VISIT EST PATIENT	Updated 4/9/2020 retro to 3/17/2020
99350	HOME VISIT EST PATIENT	Updated 4/9/2020 retro to 3/17/2020
99461	INIT NB EM PER DAY NON-FAC	Updated 4/9/2020 retro to 3/17/2020
99483	ASSMT & CARE PLN PT COG IMP	Updated 4/9/2020 retro to 3/17/2020
99484	Care mgmt svc bhvl hlth cond	Updated 4/9/2020 retro to 3/17/2020

99489	CMLPX CHRON CARE ADDL 30 MIN	<i>Updated 4/9/2020 retro to 3/17/2020</i>
99490	CHRON CARE MGMT SRVC 20 MIN	<i>Updated 4/9/2020 retro to 3/17/2020</i>
99492	1st psyc collab care mgmt	<i>Updated 4/9/2020 retro to 3/17/2020</i>
99493	Sbsq psyc collab care mgmt	<i>Updated 4/9/2020 retro to 3/17/2020</i>
99494	1st/sbsq psyc collab care	<i>Updated 4/9/2020 retro to 3/17/2020</i>
99605	Mtms by pharm np 15 min	<i>Updated 4/9/2020 retro to 3/17/2020</i>
99606	Mtms by pharm est 15 min	<i>Updated 4/9/2020 retro to 3/17/2020</i>
99607	Mtms by pharm addl 15 min	<i>Updated 4/9/2020 retro to 3/17/2020</i>
G2010	Remot image submit by pt	<i>Updated 4/9/2020 retro to 3/17/2020</i>
G2011	Alcohol/sub abuse assess	<i>Updated 4/9/2020 retro to 3/17/2020</i>
G2012	Brief check in by md/qhp	<i>Updated 4/9/2020 retro to 3/17/2020</i>
G9016	Demo-smoking cessation coun	<i>Updated 4/9/2020 retro to 3/17/2020</i>
H0001*	Alcohol and/or drug assessment	<i>Updated 4/9/2020 retro to 3/17/2020</i>
H0015*	Alcohol and/or drug services	<i>Updated 4/9/2020 retro to 3/17/2020</i>
H0031*	MH HEALTH ASSESS BY NON-MD	<i>Updated 4/9/2020 retro to 3/17/2020</i>
H0035*	Mh partial hosp tx under 24h	<i>Updated 4/9/2020 retro to 3/17/2020</i>
H2014*	SKILLS TRAIN AND DEV 15 MIN	<i>Updated 4/9/2020 retro to 3/17/2020</i>
H2017*	PSYSOC REHAB SVC PER 15 MIN	<i>Updated 4/9/2020 retro to 3/17/2020</i>
H2019*	THER BEHAV SVC PER 15 MIN	<i>Updated 4/9/2020 retro to 3/17/2020</i>
H2035*	A/d tx program, per hour	<i>Updated 4/9/2020 retro to 3/17/2020</i>
H2036*	A/D TX PROGRAM, PER DIEM	<i>Updated 4/9/2020 retro to 3/17/2020</i>
S0265*	GENETIC COUNSEL 15 MINS	<i>Updated 4/9/2020 retro to 3/17/2020</i>
S9152*	SPEECH THERAPY, RE-EVAL	<i>Updated 4/9/2020 retro to 3/17/2020</i>
S9441*	Asthma education	<i>Updated 4/9/2020 retro to 3/17/2020</i>
S9445*	Pt education noc individ	<i>Updated 4/9/2020 retro to 3/17/2020</i>
S9446*	Pt education noc group	<i>Updated 4/9/2020 retro to 3/17/2020</i>
S9453*	Smoking cessation class	<i>Updated 4/9/2020 retro to 3/17/2020</i>
90785	PSYTX COMPLEX INTERACTIVE	<i>Updated 5/13/2020 retro to 3/17/2020</i>
92609	USE OF SPEECH DEVICE SERVICE	<i>Updated 5/13/2020 retro to 3/17/2020</i>
92610	EVALUATE SWALLOWING FUNCTION	<i>Updated 5/13/2020 retro to 3/17/2020</i>
95251	CONT GLUC MNTR ANALYSIS I&R	<i>Updated 5/13/2020 retro to 3/17/2020</i>
98960	SELF-MGMT EDUC & TRAIN 1 PT	<i>Updated 5/13/2020 retro to 3/17/2020</i>
99238	HOSPITAL DISCHARGE DAY	<i>Updated 5/13/2020 retro to 3/17/2020</i>
99239	HOSPITAL DISCHARGE DAY	<i>Updated 5/13/2020 retro to 3/17/2020</i>
99281	EMERGENCY DEPT VISIT	<i>Updated 5/13/2020 retro to 3/17/2020</i>
99282	EMERGENCY DEPT VISIT	<i>Updated 5/13/2020 retro to 3/17/2020</i>
99283	EMERGENCY DEPT VISIT	<i>Updated 5/13/2020 retro to 3/17/2020</i>
99284	EMERGENCY DEPT VISIT	<i>Updated 5/13/2020 retro to 3/17/2020</i>
99285	EMERGENCY DEPT VISIT	<i>Updated 5/13/2020 retro to 3/17/2020</i>
99291	CRITICAL CARE FIRST HOUR	<i>Updated 5/13/2020 retro to 3/17/2020</i>
99292	CRITICAL CARE ADDL 30 MIN	<i>Updated 5/13/2020 retro to 3/17/2020</i>



99304	NURSING FACILITY CARE INIT	<i>Updated 5/13/2020 retro to 3/17/2020</i>
99305	NURSING FACILITY CARE INIT	<i>Updated 5/13/2020 retro to 3/17/2020</i>
99306	NURSING FACILITY CARE INIT	<i>Updated 5/13/2020 retro to 3/17/2020</i>
99381	INIT PM E/M NEW PAT INFANT	<i>Updated 5/13/2020 retro to 3/17/2020</i>
99382	INIT PM E/M NEW PAT 1-4 YRS	<i>Updated 5/13/2020 retro to 3/17/2020</i>
99383	PREV VISIT NEW AGE 5-11	<i>Updated 5/13/2020 retro to 3/17/2020</i>
99384	PREV VISIT NEW AGE 12-17	<i>Updated 5/13/2020 retro to 3/17/2020</i>
99385	PREV VISIT NEW AGE 18-39	<i>Updated 5/13/2020 retro to 3/17/2020</i>
99386	PREV VISIT NEW AGE 40-64	<i>Updated 5/13/2020 retro to 3/17/2020</i>
99387	INIT PM E/M NEW PAT 65+ YRS	<i>Updated 5/13/2020 retro to 3/17/2020</i>
99391	PER PM REEVAL EST PAT INFANT	<i>Updated 5/13/2020 retro to 3/17/2020</i>
99392	PREV VISIT EST AGE 1-4	<i>Updated 5/13/2020 retro to 3/17/2020</i>
99393	PREV VISIT EST AGE 5-11	<i>Updated 5/13/2020 retro to 3/17/2020</i>
99394	PREV VISIT EST AGE 12-17	<i>Updated 5/13/2020 retro to 3/17/2020</i>
99395	PREV VISIT EST AGE 18-39	<i>Updated 5/13/2020 retro to 3/17/2020</i>
99396	PREV VISIT EST AGE 40-64	<i>Updated 5/13/2020 retro to 3/17/2020</i>
99397	PER PM REEVAL EST PAT 65+ YR	<i>Updated 5/13/2020 retro to 3/17/2020</i>
99401	PREVENTIVE COUNSELING INDIV	<i>Updated 5/13/2020 retro to 3/17/2020</i>
99402	PREVENTIVE COUNSELING INDIV	<i>Updated 5/13/2020 retro to 3/17/2020</i>
99403	PREVENTIVE COUNSELING INDIV	<i>Updated 5/13/2020 retro to 3/17/2020</i>
99404	PREVENTIVE COUNSELING INDIV	<i>Updated 5/13/2020 retro to 3/17/2020</i>
99408	AUDIT/DAST 15-30 MIN	<i>Updated 5/13/2020 retro to 3/17/2020</i>
99409	AUDIT/DAST OVER 30 MIN	<i>Updated 5/13/2020 retro to 3/17/2020</i>
G0071	COMM SVCS BY RHC/FQHC 5 MIN	<i>Updated 5/13/2020 retro to 3/17/2020</i>
H2012	BEHAV HLTH DAY TREAT, PER HR	<i>Updated 5/13/2020 retro to 3/17/2020</i>
96040	GENETIC COUNSELING 30 MIN	<i>Updated 10/12/2020 retro to 3/17/2020</i>
S0265	GENETIC COUNSEL 15 MINS	<i>Updated 10/12/2020 retro to 3/17/2020</i>

**\*Codes not accepted for Medicare plans**



**ATTACHMENT II TO ATT004 TELEHEATH SERVCIES  
LIST OF HOME HEALTH VISIT CODES ELIGIBLE FOR TELEHEALTH REIMBURSEMENT**

<b>Code</b>	<b>Description</b>
T1002*	RN services, up to 15 minutes
S9123*	Nursing care, in the home; by registered nurse, per hour
G0299	Direct skilled nursing services of a registered nurse (RN) in the home health or hospice setting, each 15 minutes
T1030*	Nursing care, in the home, by registered nurse, per diem
T1031*	Nursing care, in the home, by licensed practical nurse, per diem
G0151	Services performed by a qualified physical therapist in the home health or hospice setting, each 15 minutes
S9131*	Physical therapy; in the home, per diem
G0152	Services performed by a qualified occupational therapist in the home health or hospice setting, each 15 minutes
S9129*	Occupational therapy, in the home, per diem
G0153	Services performed by a qualified speech-language pathologist in the home health or hospice setting, each 15 minutes
S9128*	Speech therapy, in the home, per diem
99509	Home visit for assistance with activities of daily living and personal care
G0156	Services of home health/hospice aide in home health or hospice settings, each 15 minutes
G0300	Skilled Nursing (LPN)
T1021*	Home health aide or certified nurse assistant, per visit
<i>The following codes were added 5/13/2020 retro to 3/17/2020</i>	
G0300	Skilled Nursing (LPN)
G0158	Occupational Therapy (assistant)
G0157	Physical Therapy (assistant)
G0155	Medical Social Worker

**\*Code not accepted for Medicare plans**