

Important Information on Telemedicine Coding, Billing and Reimbursement for our Provider Partners

Excellus BlueCross BlueShield has received many questions surrounding coding, billing and reimbursement for telemedicine. We would like to help provide clarity around these questions and ensure providers have the most up-to-date telemedicine information. The information contained in this document will assist with properly coding and billing for telemedicine services.

Place of Service (POS) 02

Our health plan requires that services delivered by telemedicine be accompanied by Place of Service (POS) 02 for services rendered on or after August 1, 2019, consistent with the Centers for Medicare & Medicaid Services (CMS).

- POS 02 – Telehealth: The location where health services and health related services are provided or received, through telecommunication technology

Telemedicine claims submitted with any other place of service code will be denied. The appropriate modifier (95, GQ, or GT) should also be used, when applicable.

- 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 telecommunications system
- G0(zero): New – telehealth services for diagnosis, evaluation, or treatment, of symptoms of an acute stroke

Excellus BlueCross BlueShield adopted the CMS reimbursement methodology for telemedicine services with dates of services on or after August 1, 2019. Telemedicine claims billed with POS 02 will be reimbursed at 100 percent of the facility allowance.

Reimbursement

- Interested in knowing the reimbursement for telemedicine codes? Go to Provider.Excellusbcb.com.
- At the bottom of the page, click on Fee Schedule in the gray area. Log in with your username and password. Lastly, the system will prompt you to enter a fee schedule password.
- If you need any assistance getting logged in, please contact your Provider Relations representative.

Coverage

Department of Financial Services issued an Emergency Regulation on Monday, March 16, 2020 prohibiting Plans from imposing cost sharing on all in-network telehealth visits, not just those related to COVID-19, during the state of emergency. The regulation applies to all comprehensive policies and requires coverage of in-network telehealth visits with no cost sharing when such services would have been covered under the policy if it had been delivered in person, including behavioral health treatment, etc.

- **Commercial plans** are covered for telemedicine services and follow CMS, CPT guidelines and State regulations
- **Medicare Advantage plans** are provided additional benefits compared to Original Medicare
- **Medicaid Managed Care plans** are covered, however must be **live audio and video consultations** per New York State Guidelines. **Effective March 13, 2020 during the current State of Emergency only, New York State Medicaid will reimburse telephonic evaluation and management services to members in cases where face-to-face visits may not be recommended, and it is medically appropriate for the member to be evaluated and managed by telephone. Telehealth will be covered for all appropriate services for all patients appropriate to treat through this modality. If there is not an established relationship between provider and patient, the initial visit must be audio and video and all subsequent visits can be telephonic. Relevant CPT codes for telephonic codes 99441-99443**

Important Notes about Non-Face-to-Face Services

Examples of **non-reimbursable** or **non-covered** phone only (99441-99443, 98966-98968) and online evaluation (e-visit) (99421-99423, 98970-98972 and G2061-G2063) services:

- These codes should not be reported if the telephone service ends with a decision to see the patient **within 24 hours or the next available urgent visit appointment**
- These codes should not be reported if the telephone call is related to an evaluation and management service performed by that practitioner (or his/her covering physician) within the **previous seven days** or if the phone call is received during the follow-up period of a previously performed procedure
- Provider initiated calls or e-visit
- Scheduling appointments or tests
- Follow-up phone calls after evaluation and management (E/M)
- Providing test results
- Request for medication refills
- Requests for a referral
- Global surgical follow-up

Important Billing Notes

Please visit the **Medical Policy**, section of our website Provider.Excellusbcb.com/policies/medical, to review the telemedicine policy for additional details. You will also find other important and helpful information at Provider.Excellusbcb.com/resources/clinical/telehealth.

- Telemedicine coverage requirements may vary by line of business
- Members receiving care by telemedicine must understand their financial responsibilities and provide **permission or consent before** services are provided. Standard cost-sharing may apply (deductibles, copayments, coinsurances)
 - Consent can be verbal or written, however verbal consent must be documented in the EMR
- Telemedicine services must be documented in the patient’s medical record
 - **Please note:** documentation must support the billing requirements of the service (i.e. E&M codes)

If you have questions, please contact your Provider Relations representative. Please share this information with all practice locations or corporate offices. Thank you for your continued participation with us, and for joining us to improve access to care to our members, your patients.

Excellus BCBS Telemedicine Codes

***New codes effective January 1, 2020**

Code	Category	Short Descriptor
90785	Interactive Complexity	Interactive complexity
90791	Psychiatric evaluation – non-MD	Psychiatric diagnostic evaluation
90792	Psychiatric evaluation - Psychiatrist	Psychiatric diagnostic evaluation with medical services
90832	Psychotherapy	Psychotherapy patient & family; 30 minutes
90833	Psychotherapy - MD	Psychotherapy patient & family with E&M; 30 minutes
90834	Psychotherapy	Psychotherapy patient & family; 45 minutes
90836	Psychotherapy - MD	Psychotherapy patient & family with E&M; 45 minutes
90837	Psychotherapy	Psychotherapy patient & family; 60 minutes
90838	Psychotherapy - MD	Psychotherapy patient & family with E&M; 60 minutes
90839	Psychotherapy Crisis	Psychotherapy crisis; initial 60 minutes
90840	Psychotherapy Crisis	Psychotherapy crisis; each additional 30 minutes
90845	Psychoanalysis	Psychoanalysis
90846	Family Psychotherapy	Family Psychotherapy without patient
90847	Family Psychotherapy	Family Psychotherapy with patient

90863	Pharmacologic management	Pharmacologic management, including prescription and review of medication, when performed with psychotherapy services (List separately in addition to the code for primary procedure)
90951	ESRD	End Stage Renal Disease related service, 4 visits per month, <2yr
90952	ESRD	End Stage Renal Disease related service, 2-3 visits per month, <2yr
90954	ESRD	End Stage Renal Disease related service, 4 visits per month, 2-11
90955	ESRD	End Stage Renal Disease related service, 2-3 visits per month, 2-11
90957	ESRD	End Stage Renal Disease related service, 4 visits per month, 12-19
90958	ESRD	End Stage Renal Disease related service, 2-3 visits per month, 12-19
90960	ESRD	End Stage Renal Disease related service, 4 visits per month, 20
90961	ESRD	End Stage Renal Disease related service, 2-3 visits per month, 20
90963	ESRD	End Stage Renal Disease related service, per month, <2yrs
90964	ESRD	End Stage Renal Disease related service, per month, 2-11
90965	ESRD	End Stage Renal Disease related service, per month, 12-19
90966	ESRD	End Stage Renal Disease related service, per month, 20
90967	ESRD	End Stage Renal Disease related service, per month, <2
90968	ESRD	End Stage Renal Disease related service, per month, 2-11
90969	ESRD	End Stage Renal Disease related service, per month, 12-19
90970	ESRD	End Stage Renal Disease related service, per month, 20
92227	Remote Imaging	Remote imaging for detection of retinal disease (e.g. retinopathy in a patient with diabetes) with analysis and report under physician supervision, unilateral or bilateral
92228	Remote Imaging	Remote imaging for monitoring and management of active retinal disease (e.g. diabetic retinopathy) with physician review, interpretation and report, unilateral or bilateral
93228	Cardiovascular Telemetry	External mobile cardiovascular telemetry with electrocardiographic recording, concurrent computerized real time data analysis and greater than 24 hours of accessible ECG data storage (retrievable with query) with ECG triggered and patient selected events transmitted to a remote attended surveillance center for up to 30 days; review and interpretation with report by a physician or other qualified health care professional
93229	Cardiovascular Telemetry	External mobile cardiovascular telemetry with electrocardiographic recording, concurrent computerized real time data analysis and greater than 24 hours of accessible ECG data storage (retrievable with query) with ECG triggered and patient selected events transmitted to a remote attended surveillance center for up to 30 days; technical support for connection and patient instructions for use, attended surveillance, analysis and transmission of daily and emergent data reports as prescribed by a physician or other qualified health care professional
93268	Cardiovascular Telemetry	External patient and, when performed, auto activated electrocardiographic rhythm derived event recording with symptom-related memory loop with remote download capability up to 30 days, 24-hour attended monitoring; includes transmission, review and interpretation by a physician or other qualified health care professional
93270	Cardiovascular Telemetry	External patient and, when performed, auto activated electrocardiographic rhythm derived event recording with symptom-related memory loop with remote download capability up to 30 days, 24-hour attended monitoring; recording (includes connection, recording, and disconnection)
93271	Cardiovascular Telemetry	External patient and, when performed, auto activated electrocardiographic rhythm derived event recording with symptom-related memory loop with remote download capability up to 30 days, 24-hour attended monitoring; transmission and analysis
93272	Cardiovascular Telemetry	External patient and, when performed, auto activated electrocardiographic rhythm derived event recording with symptom-related memory loop with remote download capability up to 30 days, 24-hour attended monitoring; review and interpretation by a physician or other qualified health care professional

96040	Genetic Counseling	Genetic counseling
96116	Neurobehavioral – Exam - MD	Neurobehavioral status exam by physician or other qualified health care professional, both face-to-face time with the patient and time interpreting test results and preparing the report; first hour
96160	Health Risk Assessment	Patient-focused health risk assessment
96161	Health Risk Assessment	Caregiver health risk assessment
97802	Nutrition	Medical nutrition therapy, individual
97803	Nutrition	Med nutrition therapy individual, subsequent
97804	Nutrition	Medical nutrition group
98960	Education-self management	Education patient self-manage, non-MD, each 30 minutes; individual patient
98961	Education-self management	Education patient self-manage, non-MD, each 30 minutes; 2-4 pts
98962	Education-self management	Education patient self-manage, non-MD, each 30 minutes; 5-8 pts
98966	Audio - Phone Only - non-MD	Telephone management, non-physician, established patient; 5-10 minutes
98967	Audio - Phone Only - non-MD	Telephone management, non-physician, established patient; 11-20 mins
98968	Audio - Phone Only - non-MD	Telephone management, non-physician, established patient; 21-30 minutes
98970*	e-Visit-Online digital evaluation – non-MD	Qualified nonphysician health care professional online digital evaluation and management, for an established patient , for up to 7 days, cumulative time during the 7 days; 5-10 minutes
98971*	e-Visit-Online digital evaluation – non-MD	Qualified nonphysician health care professional online digital evaluation and management, for an established patient , for up to 7 days, cumulative time during the 7 days; 11-20 minutes
98972*	e-Visit-Online digital evaluation – non-MD	Qualified nonphysician health care professional online digital evaluation and management, for an established patient , for up to 7 days, cumulative time during the 7 days; 21 or more minutes
99091	Remote patient monitoring	Collection and interpretation of data, transmitted by patient, to physician or qualified healthcare professional, 30 minutes; each 30 days
99201	E&M - office	Office/outpatient visit new
99202	E&M - office	Office/outpatient visit new
99203	E&M - office	Office/outpatient visit new
99204	E&M - office	Office/outpatient visit new
99205	E&M - office	Office/outpatient visit new
99211	E&M - office	Office/outpatient visit established
99212	E&M - office	Office/outpatient visit established
99213	E&M - office	Office/outpatient visit established
99214	E&M - office	Office/outpatient visit established
99215	E&M - office	Office/outpatient visit established
99231	E&M	Subsequent hospital care
99232	E&M	Subsequent hospital care
99233	E&M	Subsequent hospital care
99251	E&M	Inpatient consultation; 20 minutes
99252	E&M	Inpatient consultation; 40 minutes
99253	E&M	Inpatient consultation; 55 minutes
99254	E&M	Inpatient consultation; 80 minutes
99255	E&M	Inpatient consultation; 110 minutes
99307	E&M	Subsequent nursing facility care, per day, for the evaluation and management of a patient, Straightforward medical decision making

99308	E&M	Subsequent nursing facility care, per day, for the evaluation and management of a patient, Medical decision making of low complexity
99309	E&M	Subsequent nursing facility care, per day, for the evaluation and management of a patient, Medical decision making of moderate complexity
99310	E&M	Subsequent nursing facility care, per day, for the evaluation and management of a patient, Medical decision making of high complexity
99354	E&M	Prolonged service office
99355	E&M	Prolonged service office
99356	E&M	Prolonged service inpatient
99357	E&M	Prolonged service inpatient
99406	Smoking cessation	Smoking and tobacco use cessation counseling visit; 3-10 min
99407	Smoking cessation	Smoking and tobacco use cessation counseling visit; > 10 min
99408	Alcohol/Substance Abuse screening	Alcohol and/or substance (other than tobacco) abuse structured screening (e.g. AUDIT, DAST), and brief intervention (SBI) services; 15 to 30 minutes
99409	Alcohol/Substance Abuse screening	Alcohol and/or substance (other than tobacco) abuse structured screening (e.g. AUDIT, DAST), and brief intervention (SBI) services; greater than 30 minutes
99421*	e-Visit-Online digital evaluation- MD/NP/PA	Physician or qualified health care professional online digital evaluation and management, for an established patient , for up to 7 days, cumulative time during the 7 days; 5-10 minutes
99422*	e-Visit-Online digital evaluation- MD/NP/PA	Physician or qualified health care professional online digital evaluation and management, for an established patient , for up to 7 days, cumulative time during the 7 days; 11-20 minutes
99423*	e-Visit-Online digital evaluation- MD/NP/PA	Physician or qualified health care professional online digital evaluation and management, for an established patient , for up to 7 days, cumulative time during the 7 days; 21 or more minutes
99441	Audio - Phone Only - MD/NP/PA	Telephone management, physician or qualified health care professional, established patient, 5-10 minutes
99442	Audio - Phone Only - MD/NP/PA	Telephone management, physician or qualified health care professional, established patient, 11-20 minutes
99443	Audio - Phone Only - MD/NP/PA	Telephone management, physician or qualified health care professional, established patient, 21-30 minutes
99446	Interprofessional Consultation	Interprofessional telephone/Internet/electronic health record assessment and management service provided by a consultative physician, including a verbal and written report to the patient's treating/requesting physician or other qualified health care professional; 5-10 minutes of medical consultative discussion and review
99447	Interprofessional Consultation	Interprofessional telephone/Internet/electronic health record assessment and management service provided by a consultative physician, including a verbal and written report to the patient's treating/requesting physician or other qualified health care professional; 11-20 minutes of medical consultative discussion and review
99448	Interprofessional Consultation	Interprofessional telephone/Internet/electronic health record assessment and management service provided by a consultative physician, including a verbal and written report to the patient's treating/requesting physician or other qualified health care professional; 21-30 minutes of medical consultative discussion and review
99449	Interprofessional Consultation	Interprofessional telephone/Internet/electronic health record assessment and management service provided by a consultative physician, including a verbal and written report to the patient's treating/requesting physician or other qualified health care professional; 31 or more minutes of medical consultative discussion and review
99451	Interprofessional Consultation	Interprofessional telephone/Internet/electronic health record assessment and management service provided by a consultative physician, including a written report to the patient's treating/requesting physician or other qualified health care professional; 5 minutes or more of medical consultative time

99452	Interprofessional Consultation	Interprofessional telephone/Internet/electronic health record referral service(s) provided by a treating/requesting physician or other qualified health care professional; 30 minutes
99453	Remote patient monitoring	Remote monitoring of physiologic parameter(s) (e.g. weight, blood pressure, pulse oximetry, respiratory flow rate), initial; set-up and patient education on use of equipment
99454	Remote patient monitoring	Remote monitoring of physiologic parameter(s) (e.g. weight, blood pressure, pulse oximetry, respiratory flow rate), device(s) supply with daily recording(s) or programmed alert(s) transmission; each 30 days
99457	Remote patient monitoring treatment	Remote physiologic monitoring treatment management services, 20 minutes or more of clinical staff/physician/other qualified health care professional time in a calendar month requiring interactive communication with the patient/caregiver during the month
99458*	Remote patient monitoring treatment	Remote physiologic monitoring treatment management services, clinical staff/physician/other qualified health care professional time in a calendar month requiring interactive communication with the patient/caregiver during the month; each additional 20 mins
99495	Transitional Care Management	Transitional care management; 14-day discharge
99496	Transitional Care Management	Transitional care management; 7-day discharge
99497	Advanced Care Planning – MD/NP/PA	Advanced care planning; 30 minutes
99498	Advanced Care Planning	Advanced care planning; additional 30 minutes
G0071	Medicare -Virtual Check in-rhc/fqhc	Communications based technology services, virtual check in, or remote eval of video/images by rural health clinic or federally qualified health center ; 5 minutes or more
G0108	Medicare - Diabetes management	Diabetes outpatient self-management training services, individual; per 30 minutes
G0109	Medicare - Diabetes management	Diabetes outpatient self-management training services, group session (2 or more); per 30 minutes
G0270	Medicare - Medical Nutrition	Medical nutrition therapy; reassessment and subsequent intervention(s) following second referral in same year for change in diagnosis, individual, face-to-face with the patient; each 15 minutes
G0271	Medicare - Medical Nutrition	Medical nutrition therapy, reassessment and subsequent intervention(s) following second referral in same year for change in diagnosis, group (two or more individuals); each 30 minutes
G0296	Medicare - Low Dose CT eligibility	Counseling visit to discuss need for lung cancer screening using low dose CT scan
G0396	Medicare - Substance use	Alcohol and/or substance (other than tobacco) use structures assessment (e.g. DAST, AUDIT); 15-30 minutes
G0397	Medicare - Substance use	Alcohol and/or substance (other than tobacco) use structures assessment (e.g. DAST, AUDIT); >30 min
G0406	Medicare - Inpatient Telehealth	Follow-up inpatient telehealth consultation; 15 minutes
G0407	Medicare - Inpatient Telehealth	Follow-up inpatient telehealth consultation; 25 minutes
G0408	Medicare - Inpatient Telehealth	Follow-up inpatient telehealth consultation; 35 minutes
G0420	Medicare - CKD education	Face-to-face educational services related to the care of chronic kidney disease; individual per session
G0421	Medicare - CKD education	Face-to-face educational services related to the care of chronic kidney disease; group per session
G0425	Medicare - ER / Inpatient Consultation	Emergency department or initial inpatient telehealth consultation; 30 minutes
G0426	Medicare - ER / Inpatient Consultation	Emergency department or initial inpatient telehealth consultation; 50 minutes
G0427	Medicare - ER / Inpatient Consultation	Emergency department or initial inpatient telehealth consultation; 70 minutes
G0436	Medicare-Tobacco counsel	Tobacco-use counsel 3-10 min

G0437	Medicare-Tobacco counsel	Tobacco-use counsel>10min
G0438	Medicare – Annual Well Visit - Initial	Personalized prevention plan, initial visit
G0439	Medicare – Annual Well Visit -Subsequent	Personalized prevention plan, subsequent visit
G0442	Medicare - Alcohol screening	Annual alcohol misuse screening; 15 minutes
G0443	Medicare - Alcohol counseling	Brief face-to-face behavioral counseling for alcohol misuse; 15 minutes
G0444	Medicare - Depression screening	Annual depression misuse screening; 15 minutes
G0445	Medicare - High Intensity Behavioral Counseling	High intensity behavioral counseling to prevent sexually transmitted infection; face-to-face, individual, performed semi-annually; 30 minutes
G0446	Medicare - Intense Behavioral Therapy for Cardiovascular Disease	Annual, face-to-face intensive behavioral therapy for cardiovascular disease, individual; 15 minutes
G0447	Medicare- Intense Behavioral Therapy for Obesity	Face-to-face behavioral counseling for obesity; 15 minutes
G0459	Medicare - Inpatient- Pharmacy	Inpatient telehealth pharmacologic management
G0506	Medicare - Care Plan for CCM	Comprehensive assessment care plan chronic care management services
G0508	Medicare - Critical care	Critical care telehealth; consultation 60 minutes
G0509	Medicare - Critical care	Critical care telehealth consultation; 50 minutes
G0513	Medicare - E&M- prolonged	Prolong prevent services; first 30 minutes
G0514	Medicare - E&M- prolonged	Prolong preventive services; additional 30 minutes
G2010	Medicare - Remote Evaluation	Remote eval of recorded video or images, submitted by established patient, includes interpretation and follow up with patient within 24 hours
G2012	Medicare -Virtual Check in	Communications based technology services, virtual check in by MD or qualified healthcare professional who can report E&M services ; 5 -10 mins of medical discussion
G2061*	Medicare - non-MD online assessment	Qualified nonphysician healthcare professional online assessment, for an established patient, for up to seven days, cumulative time during the 7 days; 5-10 minutes
G2062*	Medicare - non-MD online assessment	Qualified nonphysician healthcare professional online assessment service, for an established patient, for up to seven days, cumulative time during the 7 days; 11-20 minutes
G2063*	Medicare - non-MD online assessment	Qualified nonphysician qualified healthcare professional assessment service, for an established patient, for up to seven days, cumulative time during the 7 days; 21 or more minutes
G2086*	Medicare - Opioid Treatment Program	Office-based treatment for opioid use disorder, at least 70 minutes; first calendar month
G2087*	Medicare - Opioid Treatment Program	Office-based treatment for opioid use disorder, 60 minutes; subsequent calendar month
G2088*	Medicare - Opioid Treatment Program	Office-based treatment for opioid use disorder; each additional 30 minutes; beyond the first 120 minutes
G9868	Medicare- Store & Forward	Dermatology- Ophthalmology- receipt and analysis of asynchronous images ACO-model; less than 10 minutes
G9869	Medicare- Store & Forward	Dermatology-Ophthalmology- receipt and analysis of asynchronous images ACO-model; 10-20 minutes
G9870	Medicare- Store & Forward	Dermatology-Ophthalmology- receipt and analysis of asynchronous images ACO-model; 20 or more minutes
Q3014	Originating site fee	Telehealth originating site facility fee
S9110	Telemonitoring- homecare use	Telemonitoring of patient in their home, including all necessary equipment; computer system, connections, and software; maintenance; patient education and support; per month

***New codes effective January 1, 2020**