

COVID-19 Information for our Health Care Provider Partners

To: Participating Physicians
Date: May 13, 2020
Subject: Preventive Health Visits for Children and Adults via Telehealth During the COVID-19 State of Emergency

The health and well-being of our members remains our highest priority. We want to ensure that our members have access to preventive care during the COVID-19 state of emergency, and we also want to eliminate barriers to providing this care.

Because a key component to a preventive health visit is a comprehensive physical exam, performing this visit type via telehealth poses challenges. Where community circumstances require physicians to limit in-person well visits, clinicians are encouraged to prioritize in-person newborn care, well visits and immunization of infants and young children (through 24 months of age) to ensure timely assessment of developmental milestones and provision of immunizations on schedule.

The CPT® code definitions for adult and child preventive health visits do not support conducting these visits via telehealth, but we recognize that an in-person visit may not be feasible for some of your patients or their parents during the state of emergency.

While it is highly recommended that preventive health visits occur in-person whenever possible during the state of emergency, when community circumstances require physicians to limit in-person visits, Excellus BlueCross BlueShield will provide coverage of preventive health visits conducted through telehealth, recognizing that some elements of the well exam must be completed in the office once community circumstances allow.

We will provide reimbursement for preventive health visits for children and adults conducted via telehealth from March 13, 2020 through June 30, 2020 when an in-person visit is not advisable, and postponement is not feasible. We will monitor COVID-19 developments and may revise the June 30 date, if necessary.

This update applies to all lines of business, but it's **important to note** that New York state regulations prohibit the submission of claims for members with coverage under Medicaid managed care products, including the Health and Recovery Plan (HMOBlue Option, Blue Choice Option, Premier Option, Blue Option Plus and Premier Option Plus) until the entire service is completed.

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Providers may submit their charge following the telehealth visit with our commercial members as well as members with coverage under Child Health Plus, Essential Plan and Healthy NY.

In the event that you receive a telehealth claim denial or copay applied in error for dates of service beginning March 13, 2020, we will automatically adjust any impacted claims with no action required on your part and no need to rebill or contact Customer Care or Provider Relations.

Important Reminders

- Reimbursement for preventive health visits via telehealth for children (CPT codes 99381-99385, 99391-99395 and G0513-G0514), women (CPT codes 99384-99387, 99394-99397 and S0610, S0612) and all adults (CPT codes 99385-99387, 99395-99397, G0438-G0439 and G0513-G0514) will be the same rate as if the service was performed in-person.
- The appropriate modifier (GT, GQ or 95) must be included on all claims for preventive health services provided via telehealth, as appropriate.

Modifier	Description	Notes
95	Synchronous telemedicine service rendered via real-time interactive audio and video telecommunication system	Modifier 95 may only be appended to the specific services listed in Appendix P of the AMA's CPT® code book. The CPT codes listed in Appendix P are for services that are typically performed face-to-face but may be rendered via a real-time (synchronous) interactive audio-visual telecommunication system.
GT	Via interactive audio and video telecommunication systems	Modifier GT is used for services typically performed face-to-face, but that may be rendered via a real-time (synchronous) interactive audio-visual telecommunication system. Modifier GT is only for use with those services provided via synchronous telemedicine for which modifier 95 cannot be used
GQ	Via asynchronous telecommunications system	Although CPT defines modifier GQ as "services delivered via asynchronous telecommunications system,", during the COVID-19 state of emergency, New York state has re-purposed this modifier to identify covered services performed via audio only (telephone). During the state of emergency, the health plan is using modifier GQ to identify audio only services.

- All key elements of the preventive medicine service which may be conducted via telehealth must be documented in the medical record. Documentation should also identify which key elements of the service were not performed and that the patient or their parent(s) were advised that they will need to complete the visit in-person as soon as practically feasible.
- A follow-up in-person visit must be conducted within 90 days of the telehealth visit to complete the physical exam, immunizations and/or screenings. The follow-up in-person visit must be billed with the same code used for the preventive medicine telehealth visit and with the applicable place of service, but at "0" charge, which will indicate that the service was completed. Separate charges may also be submitted, along with coding for immunizations, if applicable.
- We will conduct audits to ensure that any preventive health visit conducted via telehealth was completed with timely in-person follow-up and billed correctly.