## **Local and National Telehealth Guidelines**

## Payer Policy is FLUID!!!!

Please Note that Medicare Coverage of Telehealth 97000 Codes is tied to the FEDERAL Public Health Emergency (PHE). Currently the PHE is set to expire on July 19<sup>th</sup> 2021. Many Payer Policies are tied to Medicare & the PHE.

## Updated 5/26/2021/2021

	Local Telehealth Updates							
Insurer	Billin	Modifiers &	Co-	Reimburs	Notes			
	g	POS ***	Pay/Co	ement				
	Code		-					
	s		insuran					
			ce					

BCBS of WI May 31 <sup>st</sup> 2021	Physical thera py (PT) evaluation code s 9716 1, 9716 2, 9716 3, and 9716 4 PT/O T treat ment code s 9711 0, 9711 2, 9753 0, and 9753	Mod: 95 POS: "02"	Waivin g all cost-sharing: Co pay, co-insuran ce, deducti bles.	Payment parity at contracte d rates	See: Provider Communications (anthem.com) What codes would be appropriate to consider for telehealth (audio and video) for physical, occupational, and speech therapies? Telehealth (video + audio)  Anthem will waive member cost shares for telehealth visits for the following physical, occupational and speech therapies for visits coded with Place of Service (POS) "02" and modifier 95 or GT:  Telehealth visits for the following physical, occupational and speech therapies for visits coded with Place of Service (POS) "02" and modifier 95 or GT would be appropriate for our fully-insured employer, individual, Individual, Medicare Advantage plans and Medicaid plans, where permissible:  • Physical therapy (PT) evaluation codes 97161, 97162, 97163, and 97164 • Occupational (OT) therapy evaluation codes 97165, 97166, 97167, and 97168 • PT/OT treatment codes 97110, 97112, 97530, and 97535 • Speech therapy (ST) evaluation codes 92521, 92522, 92523, and 92524 • ST treatment codes 92507, 92526, 92606, and 92609  PT/OT codes that require equipment and/or direct physical hands-on interaction and therefore are not appropriate via telehealth include: 97010-97028, 97032-97039, 97113-97124, 97139-97150, 97533, and 97537-97546.  Telephonic-only care  Effective from March 19, 2020 through March 31, 2021, Anthem's affiliated health plans will cover telephonic-only visits with in-network providers.
	0,				

Children 's Commu nity	WI Medi caid	Verify	Continues re: WI Medicaid
Healthpl	Guid eline s		
CIGNA Extende d Indefinit ely for some codes Cover BOTH in- Networ k, Out of Networ k Provider s	See 9700 0 Eval Code s; 9711 0, 9711 2, 9753 0, 9775 5, 9776 0	Mod: 95= Synchronous telemedicine service rendered via a real-time interactive audio and video telecommuni cation system GQ= asynchronou s telecommuni cations system or GT Via interactive audio and video telecommuni cations systems)POS	Q: Will Cigna allow for physical, occupational, and speech therapists to provide virtual care?  SEE: CIGNA 1-21 R31 Virtual Care.pdf  Services must be interactive and use both audio and video internet-based technologies  Yes. PT/OT/ST providers who bill on HCFA 1500 (private Practices & Some Rehab Agencies) can now deliver virtual care for any service if it is on their current fee schedule and if CMS covers it virtually. Both in-network & out of Network Providers are covered. Please note that virtual care services billed on a UB-04 claim will not be reimbursed under the new policy.  We maintain all current medical necessity review criteria for virtual care at this time.  • Our national ancillary partner American Specialty Health (ASH) is applying the same virtual care guidance, so any provider participating through ASH and providing PT/OT services to Cigna customers is covered by the same guidance.
Humana UPDATE :	See PT Eval & Re-	:11	https://www.humana.com/provider/coronavirus/telemedicine  Humana follows Medicare Guidelines for all products: Check back for anticipated UPDATES  • Temporary expansion of telehealth service scope and reimbursement rules

Through the Public Health Crisis Which has now been extende d to July 19th 2021	Eval Code s, 9711 0, 9711 2, 9711 6, 9715 0, 9753 5, 9754 2, 9777 0, 9776 0, 9766 1		<ul> <li>To ease systemic burdens arising from COVID-19 and support shelter-in-place orders, Humana is encouraging the use of telehealth services to care for its members. Please refer to CMS, state and plan coverage guidelines for additional information regarding services that can be delivered via telehealth.</li> <li>Temporary expansion of telehealth channels         <ul> <li>Humana understands that not all telehealth visits will involve the use of both video and audio interactions. For providers or members who don't have access to secure video systems, we will temporarily accept telephone (audio-only) visits. These visits can be submitted and reimbursed as telehealth visits.</li> <li>Please follow CMS or state-specific guidelines and bill as you would a standard telehealth visit.</li> </ul> </li> <li>Temporary expansion of telehealth to broader types of providers         <ul> <li>Both participating/in-network primary and specialty providers can render care using telehealth services, provided that CMS and state-specific guidelines are followed.</li> </ul> </li> </ul>
Network Health Plan Website says Teleheal th Expires when CMS ends Medicare	See Medi care Guid eline s	Mod: 95 POS "02"	Per CMS Coverage!

coverag e, July 19 <sup>th</sup> 2021			
Medica Continu es Coverag e with PHE		Mod: 95 POS "02"	The Current Procedural Terminology (CPT®) and Healthcare Common Procedure Coding System (HCPCS) codes that describe a telemedicine service may be the same codes that describe an encounter when the health care provider and patient are at the same site <a href="https://www.medica.com/-/media/documents/provider/">https://www.medica.com/-/media/documents/provider/</a> emergency-telemedicine-policy-mhcp.pdf?la=en&hash= 2352181061199DA4F1623DA741C05BE3
Prevea 360 UPDATE Continu es coverag e with PHE	9700 0 Code s	Mod: 95 POS: "02"	https://www.prevea360.com/For-Providers/What-you-need-to-know-about-coronavirus.aspx  We are referring to the CMS Medicare Telemedicine Health Care Provider Fact Sheet for our expanded telemedicine coverage guidance effective for dates of service beginning March 6, 2020. Our expanded coverage will remain in effect until further notice.
Quartz Health Plan Continu ed Coverag e see WI Medicai d	9700 0 Code s	Mod: CR POS: "02"	Refers to WI Medicaid and Telehealth Update: <a href="https://www.forwardhealth.wi.gov/kw/pdf/2020-15.pdf">https://www.forwardhealth.wi.gov/kw/pdf/2020-15.pdf</a>
Security Health Plan Continu ed Coverag e see PHE	9700 0 Code s	Mod: 95 POS: 11	See: <a href="https://securityhealth.policytech.com/dotNet/documents/?docid=12220&amp;public=true">https://securityhealth.policytech.com/dotNet/documents/?docid=12220&amp;public=true</a> PT evaluation and treatment can be done via telehealth.  All product lines - therapy evaluation and treatment can be done via telehealth, audiovisual interactive. All product lines - For an in-network provider, prior authorization (PA) is still required. If a non-contracted provider wants to provide care, the provider will need to follow Security Health Plan's prior authorization process. Medicare Advantage only - PA is not required to provide treatment for a Medicare Advantage member from a non-affiliated provider.

			Medicare Advantage — Any Medicare-covered professional service may be performed via telehealth as long as the service is within the scope of practice and can be performed with the functional equivalency of a face-to-face service. This can be done as a telephonic consult, where both provider and member are talking on the phone while the member is at home. The telephone services codes may be used to bill for the services.
WEA	Mod: 95	Waiver of	https://www.weatrust.com/DesktopModules/Bring2mind/DMX/Download.aspx?Comman
No No	POS: "02"	Co-pays	d=Core_Download&EntryId=1439&language=en-US&PortalId=0&TabId=186
<mark>current</mark>			
<mark>stated</mark>			
<b>Expirati</b>			Prior Auth Required
on Date-			97000 Codes
will give			along w/GT modifier are covered
<mark>30 day</mark>			*Location-as long as there is video & audio/face-face
notice.			

WPS NOT UPDATED: Generally States that it remains during the PHE.	97000 Codes	Mod: 95 POS: "02"			https://www.wpshealth.com/resources/files/telehealth-telemedicine-temporary.pdf  Must have a valid license (or certification) for the state in which the patient is physically located at the time telehealth services are provided. Eligible telehealth providers may only provide services that fall within the scope of practice of the specific license/certification. Eligible
United Healthcare UPDATED For in-and out of network providers, UnitedHealthc are will extend the expansion of telehealth access indefinitely at this time.	97000 Codes See notes	Mod: 95 POS: 02	For providers who submit claims on a UB-04 claim form, UHC will no longer reimburse for outpatient therapy services delivered via telehealth unless mandated by an Executive Order by the State Wisconsin's PHE is Set to expire on March 18, 2021 but may be renewed in 60 day	Waive for In- Network Providers Co-pays  Contract ed Rates	https://www.uhcprovider.com/content/dam/provider/docs/public/pol icies/comm-reimbursement/COMM-Telehealth-and-Telemedicine-Policy.pdf  UnitedHealthcare will reimburse eligible codes on a CMS 1500 form, using the place of service (POS) that would have been reported had the services been furnished in person, along with a 95 modifier, or on a UB04 form with revenue code 780.  Covered PT Codes: 97161-97164; 97110, 97112, 97116, 97530, 97535, 97750, 97760, 97661, 97755.  UHC will reimburse when using interactive audio-video technology.  In-Network Providers are covered more liberally than out of Network providers: SEE: https://www.uhcprovider.com/en/resource-library/news/Novel-Coronavirus-COVID-19/covid19-telehealth-services/covid19-telehealth-pt-ot-st.html

WI Medicaid UPDATED: Telehealth coverage ongoing as the DHS formulates more specific policies.	Medicaid Approved CPT Codes for Telehealth	Mod: CR POS: "02"	increments ) due to the public health emergency due to COVID-19.	See WI Medicaid Update:  ForwardHealth's temporary telehealth policy will remain in effect until permanent policy is published. ForwardHealth has implemented temporary telehealth policy in response to COVID-19, pursuant to Wis. Stat. § 49.45(61). ForwardHealth will publish additional guidance about the topics addressed in the ForwardHealth Updates listed below when the temporary policies transition to permanent telehealth policy. For information on temporary telehealth policy currently in effect, please refer to the following ForwardHealth Updates:  • The March 2020 Update (2020-09), titled "Changes to ForwardHealth Telehealth Policies for Covered Services, Originating Sites, and Federally Qualified Health Centers."  • The March 2020 Update (2020-12), titled "Temporary Changes to Telehealth Policy and Clarifications for Behavioral Health and Targeted Case Management Providers."  • The March 2020 Update (2020-15), titled "Additional Services to Be Provided via Telehealth."
WI Worker's Comp				In Wisconsin there is no provision in our law, ch. 102. Wis. Stats. or administrative rules, chs. DWD 80 and DWD 81 that address telemedicine or telehealth.  Treatment in the form of telemedicine/telehealth to injured employees is compensable under out law if the treatment is required to cure and relieve an employee of the effects of a work-related injury and is a
Align Homelink	Telehealth 97000 Telehealth	Verify Verify		reasonable expense. Per e-mail to Lynn Steffes, PT, DPT from DWD Monday March 23 <sup>rd</sup> , 2020.

	97000				
MedRisk	Telehealth	Verify			
On a Call	97000	Manife.			
One Call	Telehealth 97000	Verify			
	97000				
Medicare	e visits	Mod: CR	Deductible/	G2061:	
UPDATED: The	G2061	POS: "11 or 12"	Co-ins apply	\$12.27	Medicare Telehealth clinicians can now provide more services to beneficiaries via
Public Health	G2062	1 00. 11 0. 12	Co ms apply	G2062:	telehealth so that clinicians can take care of their patients while mitigating the
Crisis &	G2063			\$21.65	risk of the spread of the virus. Under the public health emergency, all
therefore the	G2010,			G2063:	beneficiaries across the country can receive Medicare telehealth and other communications technology-based services wherever they are located. Clinicians
Telehealth	G2012			\$33.92	can provide these services to new or established patients. In addition, health care
Coverage has	98970,				providers can waive Medicare copayments for these telehealth and other non-
NOW been	98971,				face-to-face services for beneficiaries in Original Medicare.
extended to	98972				CMS is usely in a the subject and of the subject and the subje
July 19 <sup>th</sup> , 2021					CMS is waiving the which specify the types of practitioners that may bill for their services when furnished as Medicare telehealth services from the distant site.
based on the					The waiver of these requirements expands the types of health care professionals
<mark>updated</mark>					that can furnish distant site telehealth services to include all those that are
<mark>Public Health</mark>					eligible to bill Medicare for their professional services-physical therapists,
Emergency.					occupational therapists, and speech language pathologists can use telehealth to
					provide many Medicare services
					Medicare will allow Physical and Occupational Therapy and SLP to provide the
					following services via telehealth. CPT codes 97161- 97168; CPT codes 97110,
					97112, 97116, 97535, 97750, 97755, 97760, 97761, 92521- 92524, 92507. <b>NOT</b>
					97140 OR 97530!
					All Virtual Services (E-visits, Remote Evaluations, Telephone Assessment &
					Management Services, Virtual Check-Ins and Telehealth) can now be performed
					by therapists for NEW and established patients with acute or chronic conditions.
					For a complete list of all Medicare telehealth services including how the virtual
					service is Conducted, please <u>click here</u>
					C2010. Demoke evaluation of recorded titles and/activities of the
					<b>G2010</b> : Remote evaluation of recorded video and/or images submitted
					by an established patient (e.g., store and forward), including
					interpretation with follow-up with the patient within 24 business hours, not originating from a related E/M service provided within the
					induis, not originating from a related c/ivi service provided within the

previous 7 days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment
G2012: Brief communication technology-based service, e.g. virtual check-in, by a physician or other qualified health care professional who can report evaluation and management services, provided to an established patient, not originating from a related E/M service provided within the previous 7 days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment; 5-10 minutes of medical discussion
<b>G2061</b> : Qualified non-physician healthcare professional online assessment and management service, for an established patient, for up to seven days, cumulative time during the 7 days; 5–10 minutes
<b>G2062</b> : Qualified non-physician healthcare professional online <b>assessment and management</b> service, for an established patient, for up to seven days, <b>cumulative time</b> during the 7 days; 11-20 minutes
G2063: •Qualified non-physician healthcare professional assessment and management service, for an established patient, for up to seven days, cumulative time during the 7 days; 21 or more minutes
98970: Qualified non-physician healthcare professional online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 5–10 minutes
98971: Qualified non-physician healthcare professional online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 11–20 minutes

				98972: Qualified non-physician healthcare professional online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 21 or more minutes  These codes can now be billed by physical therapists and occupational therapist, not by physical therapist assistant (PTA) or occupational therapy assistant (OTA). Per CMS 4/9/20
Aetna UPDATED Covered until further notice.	Physical therapy (PT) evaluation codes 97161, 97162, 97163, and 97164  PT/OT treatment codes 97110, 97112, 97116, 97530, and 97535, 97755,977 60, 97761	Mod: 95=synchronous telemedicine service rendered via a real-time interactive audio and video telecommunicati ons system Mod: GT=delivered via interactive audio and video telecommunicati ons systems POS: "02"	Waiving all cost sharing. Parity in Payment	https://www.aetna.com/health-care-professionals/covid-faq/telemedicine.html  4/3/2020: Aetna advised that telehealth services delivered by physical therapists may be billed on a UB04 using the modifier GT or 95. 4/22/2020: The Aetna e-visit approach is slightly different from the CMS system, allowing PTs to bill for either CPT codes associated with evaluation and management (98970, 98971, 98972) or HCPC codes for assessment and management (G2061, G062, and G2063). CMS only allows PTs to bill for the G codes. Providers should check with Aetna's provider page for updates and changes. https  Yes. Providers can temporarily use non-public facing synchronous video chat platforms, such as Skype® and FaceTime®, to complete telemedicine visits as long as these platforms are allowed in their states and they are able to meet the standard of care via a telehealth encounter. Health care providers should not, however, use public-facing video applications, such as Facebook Live®, Twitch® or TikTok®. For more information, refer to the temporary Federal guidelines concerning use of these platforms during the COVID-19 pandemic.8

TriCare	97000		Coronavirus Disease (COVID-19) and TRICARE's telemedicine benefit.
	Codes		March 18, 2020 **Update: If a beneficiary meets all other criteria for a
<b>Telehealth</b>			covered service for speech therapy and for continuation of PT/OT, (but
coverage is			not initiation of PT/OT), it is covered using telemedicine, using any
ongoing.			coding modifiers as you would for a TRICARE network provider office
			visit.
			https://www.humanamilitary.com/provider/education-and-
			resources/quick-access/policy-updates-and-alerts/covid-19-
			telemedicine-031320
TriCare West	97000		See CMS Guidelines
	Codes		