

## Local and National Telehealth Guidelines

**Payer Policy is FLUID!!!!**

**You must Verify Benefits!!! Ask these questions:**

- Are physical therapists eligible for telehealth payment?
- If so, Which CPT codes be completed via telehealth?
- What modifiers are required? Do I need to use a modifier (GT, 95) or place of service code (02)?
- Does the payment rate match the currently contracted in-office rate?
- Are there any restrictions on the location of the physical therapist or the patient?
- Can PTAs provide telehealth?
- What device(s) or application(s) can be utilized?
- What, if any, consents are required?
- Are there any special documentation requirements?

Updated 3/27/2020

Local Telehealth Updates					
Insurer	Billing Codes	Modifiers & POS ***	Co-Pay/Co-insurance	Reimbursement	Notes
BCBS of WI	Physical therapy (PT) evaluation codes 97161, 97162, 97163, and 97164  PT/OT treatment codes 97110, 97112,	Mod: CR POS: "02"	Waiving all cost-sharing: Co pay, co-insurance, deductibles.	Payment parity at contracted rates	See: <a href="https://providernews.anthem.com/wisconsin/article/information-from-anthem-for-care-providers-about-covid-19-10">https://providernews.anthem.com/wisconsin/article/information-from-anthem-for-care-providers-about-covid-19-10</a>

	97530, and 97535				
<b>Children's Community Healthplan</b>	See WI Medicaid Guidelines	Verify			
<b>CIGNA</b>	Evaluation ONLY CPT: 97161, 97162, 97163 And 97110	Mod: CR POS: "02"			
<b>Humana</b>	No Clear Guidance				
<b>Network Health Plan</b>	E-Visits Only	Verify			
<b>Prevea 360</b>	97000 Codes	Mod: CR POS: "02"			
<b>Quartz Health Plan</b>	97000 Codes	Mod: CR POS: "02"			
<b>Security Health Plan</b>	97000 Codes	Mod: CR POS: "02"			
<b>WEA</b>	97000 Codes along w/GT modifier are covered *Location-as long as there is video & audio/face- face *Codes 98970,98971, 98972 are non covered *Copays & co-insurance need to be collected *No other exclusions	Mod: CR POS: "02"			

<b>WPS</b>	97000 Codes	Verify			
<b>United Healthcare</b>	97000 Codes See notes	Mod: GT POS: "02"		Contracted Rates	Physical Therapy 97161 Physical therapy evaluation - low complexity Physical Therapy 97162 Physical therapy evaluation - moderate complexity Physical Therapy 97163 Physical therapy evaluation - high complexity Physical Therapy 97164 Physical therapy re-evaluation Physical Therapy 97110 Therapeutic procedure, one or more areas, each 15 minutes Physical Therapy 97116 Gait training Physical Therapy 97530 Therapeutic activities, one-to-one patient contact, each 15 minutes Physical Therapy 97112 Therapeutic procedure, one or more areas, each 15 minutes Physical Therapy 97535 Self-care/home management training, each 15 minutes
<b>WI Medicaid</b>	Medicaid Approved CPT Codes for Telehealth	Mod: CR POS: "02"			<p>See WI Medicaid Update: <b>Temporary Change in Allowable Telehealth Services</b> Beginning on March 12, 2020, and for the duration of the Wisconsin public health emergency for COVID-19, ForwardHealth will allow telehealth services utilizing interactive synchronous (real-time) technology, including audio-only phone communication, for currently covered services that can be delivered with functional equivalency to the face-to-face service. This applies to all service areas and all enrolled professional and paraprofessional providers allowable within current ForwardHealth coverage policy. Services that are not currently covered on a face-to-face basis are not covered via telehealth.</p> <p>Paraprofessional providers are providers who do not hold a license to practice independently but are providing services under the direction of a licensed provider. Paraprofessional providers are subject to supervision requirements, which may include face-to-face supervision. During Wisconsin's public health emergency, ForwardHealth will allow supervision requirements to be met via telehealth, but this flexibility does not change or replace licensure or certification requirements of the provider's supervising body or other regulatory authorities. When possible, face-to-face supervision requirements should be met via audio-visual technologies. Supervision must be documented according to existing benefit policy.</p> <p>Providers must keep complete and accurate documentation according to existing benefit policy requirements. Providers are expected to perform services within their scope of practice and to exercise professional judgment in determining whether services can be delivered appropriately and effectively via telehealth. Providers must make a good faith effort to provide clinically appropriate services during the public health emergency. Providers must adhere to all ForwardHealth benefit policy requirements in all respects.</p> <p>Providers may not require the use of telehealth as a condition of treating a member. Providers must develop and implement their own methods of informed consent to confirm that a member agrees to receive services via telehealth. ForwardHealth considers verbal consent to receiving services via telehealth an acceptable method of informed consent when it is documented in the member's medical record.</p>

<b>WI Worker's Comp</b>					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 our law if the treatment is required to cure and relieve an employee of the effects of a work-related injury and is a reasonable expense. Per e-mail to Lynn Steffes, PT, DPT from DWD Monday March 23 <sup>rd</sup> , 2020.
<b>Align</b>	Telehealth 97000	Verify			
<b>Homelink</b>	Telehealth 97000	Verify			
<b>MedRisk</b>	Telehealth 97000	Verify			
<b>One Call</b>	Telehealth 97000	Verify			
<b>Medicare</b>	e visits G2061 G2062 G2063	Mod: CR POS: "11 or 12"	Deductible/Co- ins apply	G2061: \$12.27 G2062: \$21.65 G2063: \$33.92	<ul style="list-style-type: none"> <li>No new evals but can do follow ups and new injury to different body part</li> <li>These services can only be reported when the billing practice has an established relationship with the patient. For these E-Visits, the patient must generate the initial inquiry and communications can occur over a 7-day period." Per CMS, "E-Visits" differ from "Telehealth Visits," which encompass any "office, hospital visits and other services that generally occur in-person." PTs, OTs, and SLPs still are not included in the list of providers who are eligible to conduct Telehealth Visits under Medicare.</li> <li><a href="https://www.cms.gov/newsroom/fact-sheets/medicare-telemedicine-health-care-provider-fact-sheet">https://www.cms.gov/newsroom/fact-sheets/medicare-telemedicine-health-care-provider-fact-sheet</a></li> </ul>
<b>Aetna</b>	Physical therapy (PT) evaluation codes 97161, 97162, 97163, and 97164  PT/OT treatment codes 97110, 97112, 97116, 97530, and 97535,	Mod: 95 POS: 02	Waiving all cost sharing		.

	97755,97760, 97761				
<b>TriCare</b>	97000 Codes				<p>Coronavirus Disease (COVID-19) and TRICARE's telemedicine benefit. March 18, 2020 <b>**Update:</b> If a beneficiary meets all other criteria for a covered service for speech therapy and for continuation of PT/OT, (but not initiation of PT/OT), it is covered using telemedicine, using any coding modifiers as you would for a TRICARE network provider office visit.</p> <p><a href="https://www.humanamilitary.com/provider/education-and-resources/quick-access/policy-updates-and-alerts/covid-19-telemedicine-031320">https://www.humanamilitary.com/provider/education-and-resources/quick-access/policy-updates-and-alerts/covid-19-telemedicine-031320</a></p>
<b>TriCare West</b>	97000 Codes				