

Telehealth, telemedicine, and related terms generally refer to the exchange of medical information from one site to another through electronic communication to improve a patient’s health. With the emergence of the COVID-19, there is an urgency to expand the use of technology to maintain access to needed care, while also keeping vulnerable patients with minor/mild symptoms in their homes. Limiting community spread of the virus, as well as limiting the exposure to other patients and staff members will slow viral spread.

Under the expansion of the telehealth 1135 waiver, Medicare will pay for office, hospital, and other visits furnished via telehealth across the country and including in patient’s places of residence starting March 6, 2020. A range of providers, such as doctors, nurse practitioners, clinical psychologists, and licensed clinical social workers, will be able to offer telehealth to their patients. Telehealth services are paid under the Physician Fee Schedule at the same amount as in-person services. Documentation guidelines still apply.

Additionally, the HHS Office of Inspector General (OIG) is providing flexibility for healthcare providers to reduce or waive cost-sharing for telehealth visits paid by federal healthcare programs. Waiving cost-sharing is optional and will not be considered an illegal inducement by the OIG.

Health and Human Services (HHS) will not conduct audits to ensure that a prior relationship (new vs. established patient) existed for claims submitted during the public emergency. All of these new flexibilities are subject to review and renewal in 90 days.

**This fact sheet summarizes three main types of virtual services: telehealth visits, virtual check-ins and e-visits, based on the respective line of business.**

Line of Business	Type of service	What is the service?	Is it covered? How much?	HCPCS/ CPT Code
Medicare	Telehealth Visit	<p>Visit with a provider that uses telecommunication systems between a provider and a patient.</p> <p>(For new* or established patients.</p> <p>*To the extent the 1135 waiver requires an established relationship, HHS will not conduct audits to ensure that such a prior relationship existed for claims submitted during this public health emergency.)</p>	Yes	<p>99201-99205 (office/outpatient visits for new patients)</p> <p>99211-99215 (office/ Outpatient visits for established patients)</p> <p>List POS 02</p> <p>G0425-G0427 (Telehealth consultations, ED or initial inpatient)</p> <p>G0406-G0408 (F/U inpatient telehealth consultations furnished to patients in hospitals or SNFs)</p> <p><a href="#">Here</a> is a complete list.</p>
Medicare	Virtual Check-In	<p>a. For established patient, brief (5-10 mins) check in with practitioner via telephone or other telecommunications device to decide whether an office visit or other service is needed.</p> <ul style="list-style-type: none"> <li>Confirm patient identity (e.g., name, date of birth or other identifying information as needed, in particular if documenting independently from the patient’s electronic or paper record).</li> <li>Confirm that the patient is an established patient to the practice.</li> <li>Detail what occurred during the communication (e.g., patient problem(s), details of the encounter as warranted) to establish medical necessity.</li> </ul>	a. Yes, \$14.81 Medicare Part B	a. HCPCS code G2012 List POS 11

		<ul style="list-style-type: none"> <li>Document the total amount of time spent in communicating with the patient and only submit code G2012 if a minimum of five minutes of direct communication with the patient was achieved.</li> <li>Document that the nature of the call was not tied to a face-to-face office visit or procedure that occurred within the past seven days.</li> <li>Document that a subsequent office visit for the patient's problems were not indicated within 24 hours or the next available appointment.</li> <li>Include that the patient provided consent for the service.</li> </ul> <p>b. Remote evaluation of recorded video and/or images submitted by an established patient.</p>	b. Yes, \$11.91 Medicare Part B	b. HCPCS code G2010 List POS 11
Medicare	E-Visits	<p>A communication between patient and their provider through an online patient portal, for an established patient, for up to 7 days, cumulative time during the 7 days. Not to be used for:</p> <ul style="list-style-type: none"> <li>Scheduling appointments</li> <li>Conveying test results</li> </ul> <p>Consider HIPAA compliant secure platforms.</p> <p>*Non-HIPAA compliant platforms are allowed during the public emergency as long as they are not public facing. Examples of non-public facing remote communication products would include platforms such as Apple Face Time, Facebook Messenger video chat, Google Hangouts video, Whatsapp video chat, or Skype. Such products also would include commonly using texting applications such as Signal, Jabber, Facebook Messenger, Google Hangouts, Whatsapp, or iMessage. (<a href="#">HIPAA Flexibility</a>)</p>	<p>Yes</p> <p>\$15.52 (5-10 mins)</p> <p>\$31.04 (10-20 mins)</p> <p>\$50.16 (21+ mins)</p>	<p>99421*</p> <p>99422*</p> <p>99423*</p> <p>For qualified nonphysician healthcare professionals: G2061 G2062 G2063</p> <p>List POS 02</p>
Medicare Resources		<p><a href="#">CMS Information Current COVID-19 Emergency</a>  <a href="#">Medicare FFS Response to Public Health Emergency COVID-19</a>  <a href="#">General Provider Telehealth and Telemedicine Tool Kit</a>  <a href="#">Medicare Telemedicine Health Care Provider Fact Sheet</a></p>		
Medicaid Resources:		<p>Since Medicaid programs are state-run, they follow state-specific telemedicine regulations, which can vary widely. Some states have expansive policies that will allow for telehealth to be used when an emergency like COVID-19 occurs; others will follow CMS adjustments during this time. To learn more about current state laws and reimbursement policies in your state for Medicaid, visit the <a href="#">Center for Connected Health Policy</a>.</p> <p>CMS has provided tools that will permit states to assess emergency administrative relief, make temporary modifications to Medicaid eligibility and benefit requirements, relax rules to ensure that individuals with disabilities and the elderly can be effectively served in their homes, and modify payment rules to support health care providers impacted by the outbreak. The Administration has called on states to allow Medicaid beneficiaries to receive services through telehealth. While this doesn't require federal approval in many cases, these tools can also help states quickly remove state-specific restrictions on telehealth:</p> <p><a href="#">Medicaid Telemedicine</a>  <a href="#">Policy Options for Paying Medicaid Providers for Telehealth Services</a>  <a href="#">Tools to Accelerate Relief for State Medicaid &amp; CHIP Programs</a>  <a href="#">Section 1135 Waiver Template for State and Territory Medicaid</a>  <a href="#">CMS FAQs for State Medicaid and Children's Health Insurance Program (CHIP) Agencies</a>  <a href="#">California DHCS Telehealth FAQs</a></p> <p>Here is a list of <a href="#">approved state 1135 waivers</a> and <a href="#">Appendix K waivers</a>.</p>		

Managed Medicaid	Telehealth Visit	<p>Visit with a provider that uses telecommunication systems between a provider and a patient.</p> <p>(For new* or established patients.</p> <p>*To the extent the 1135 waiver requires an established relationship, HHS will not conduct audits to ensure that such a prior relationship existed for claims submitted during this public health emergency.)</p>	Yes	99201-99205 (office/outpatient visits for new patients) 99211-99215 (office/ Outpatient visits for established patients) List POS 02
Managed Medicaid	Virtual Check-In	<p>a. For established patient, brief (5-10 mins) check in with practitioner via telephone or other telecommunications device to decide whether an office visit or other service is needed.</p> <ul style="list-style-type: none"> <li>Confirm patient identity (e.g., name, date of birth or other identifying information as needed, in particular if documenting independently from the patient's electronic or paper record).</li> <li>Confirm that the patient is an established patient to the practice.</li> <li>Detail what occurred during the communication (e.g., patient problem(s), details of the encounter as warranted) to establish medical necessity.</li> <li>Document the total amount of time spent in communicating with the patient and only submit code G2012 if a minimum of five minutes of direct communication with the patient was achieved.</li> <li>Document that the nature of the call was not tied to a face-to-face office visit or procedure that occurred within the past seven days.</li> <li>Document that a subsequent office visit for the patient's problems were not indicated within 24 hours or the next available appointment.</li> <li>Include that the patient provided consent for the service.</li> </ul> <p>b. Remote evaluation of recorded video and/or images submitted by an established patient.</p>	<p>a. Yes</p> <p>b. Yes</p>	<p>a. HCPCS code G2012</p> <p>b. HCPCS code G2010</p>
Managed Medicaid	E-Visits	<p>A communication between patient and their provider through an online patient portal, for an established patient, for up to 7 days, cumulative time during the 7 days.</p> <p>Not to be used for:</p> <ul style="list-style-type: none"> <li>Scheduling appointments</li> <li>Conveying test results</li> </ul> <p>Consider HIPAA compliant secure platforms.</p> <p>*Non-HIPAA compliant platforms are allowed during the public emergency as long as they are not public facing. Examples of non-public facing remote communication products would include platforms such as Apple Face Time, Facebook Messenger video chat, Google Hangouts video, Whatsapp video chat, or Skype. Such products also would include commonly using texting applications such as Signal, Jabber, Facebook Messenger, Google Hangouts</p>	No	Not Covered
Commercial	Telehealth Visit	<p>Visit with a provider that uses telecommunication systems between a provider and a patient.</p> <p>(For new* or established patients.</p> <p>*To the extent the 1135 waiver requires an established relationship, HHS will not conduct audits to ensure that such a prior relationship existed for claims submitted during this public health emergency.)</p>	Coverage varies per health plan	99201-99205 (office/outpatient visits for new patients) 99211-99215 (office/ Outpatient visits for established patients) G0425-G0427 (Telehealth)

				consultations, ED or initial inpatient) G0406-G0408 (F/U inpatient telehealth consultations furnished to patients in hospitals or SNFs) <a href="#">Here</a> is a complete list. Add Modifier 95 (depending on Commercial Payer)
Commercial	Virtual Check-In	<p>a. For established patient, brief (5-10 mins) check in with practitioner via telephone or other telecommunications device to decide whether an office visit or other service is needed.</p> <ul style="list-style-type: none"> <li>Confirm patient identity (e.g., name, date of birth or other identifying information as needed, in particular if documenting independently from the patient's electronic or paper record).</li> <li>Confirm that the patient is an established patient to the practice.</li> <li>Detail what occurred during the communication (e.g., patient problem(s), details of the encounter as warranted) to establish medical necessity.</li> <li>Document the total amount of time spent in communicating with the patient and only submit code G2012 if a minimum of five minutes of direct communication with the patient was achieved.</li> <li>Document that the nature of the call was not tied to a face-to-face office visit or procedure that occurred within the past seven days.</li> <li>Document that a subsequent office visit for the patient's problems were not indicated within 24 hours or the next available appointment.</li> <li>Include that the patient provided consent for the service.</li> </ul> <p>b. Remote evaluation of recorded video and/or images submitted by an established patient.</p>	<p>a. Coverage varies per health plan</p> <p>b. Coverage varies per health plan</p>	<p>a. HCPCS code G2012</p> <p>b. HCPCS code G2010</p>
Commercial	E-Visits	<p>A communication between patient and their provider through an online patient portal, for an established patient, for up to 7 days, cumulative time during the 7 days. Not to be used for:</p> <ul style="list-style-type: none"> <li>Scheduling appointments</li> <li>Conveying test results</li> </ul> <p>Consider HIPAA compliant secure platforms.</p> <p>*Non-HIPAA compliant platforms are allowed during the public emergency as long as they are not public facing. Examples of non-public facing remote communication products would include platforms such as Apple Face Time, Facebook Messenger video chat, Google Hangouts video, Whatsapp video chat, or Skype. Such products also would include commonly using texting applications such as Signal, Jabber, Facebook Messenger, Google Hangouts, Whatsapp, or iMessage. (<a href="#">HIPAA Flexibility</a>)</p>	Coverage varies per health plan	<p>99421* (5-10 mins) 99422* (10-20 mins) 99423* (21+ mins)</p> <p>For qualified nonphysician healthcare professionals: G2061 G2062 G2063</p> <p>List POS 02 List Modifier 95 (for synchronous telemedicine service via a real-time interactive audio and video telecommunication system) List Modifier GQ (for asynchronous</p>

				telemedicine services rendered by both originating site and distant provider)
Other resources				<ul style="list-style-type: none"> <li>• <a href="#">Expansion of Telehealth Access to Combat COVID-19</a></li> <li>• <a href="#">Telehealth for Private Coverage FAQs</a></li> <li>• <a href="#">AHIP: Health Insurance Plans Respond to COVID-19</a></li> <li>• <a href="#">Aetna Health Plan Guidance for COVID-19</a></li> <li>• <a href="#">Anthem Health Plan Guidance for COVID-19</a></li> <li>• <a href="#">BCBSA Health Plan Guidance for COVID-19</a></li> <li>• <a href="#">Blue Shield CA Health Plan Guidance for COVID-19</a></li> <li>• <a href="#">Bright Health Plan Guidance for COVID-19</a></li> <li>• <a href="#">CareFirst Health Plan Guidance for COVID-19</a></li> <li>• <a href="#">Centene Health Plan Guidance for COVID-19</a></li> <li>• <a href="#">Cigna Health Plan Guidance for COVID-19</a></li> <li>• <a href="#">Health Net Health Plan Guidance for COVID-19</a></li> <li>• <a href="#">Health Care Service Corporation Health Plan Guidance COVID-19</a></li> <li>• <a href="#">Humana Health Plan Guidance for COVID-19</a></li> <li>• <a href="#">Kaiser Permanente Health Plan Guidance for COVID-19</a></li> <li>• <a href="#">UnitedHealthcare Health Plan Guidance for COVID-19</a></li> <li>• <a href="#">Center for Connected Health Policy Billing for Telehealth Encounters</a></li> </ul>