



Telehealth/Telemedicine COVID-19 Billing Cheat Sheet

Telephonic Encounters					
Code	Brief Description	Who can bill	Payers Accepted	Modifiers Needed	POS
99441	Telephone E&M provided to an established patient, parent or guardian (5-10 minutes)	Physicians, NPs, PAs, CNMs and other qualified health professionals ( <b>Check payer specific guidelines</b> ) NC Medicaid Providers: Physicians and APPs. Not for use in FQHCs or RHCs <a href="#">Tricare for Life</a> use <i>Medicare guidance on telehealth</i>	Medicaid (anything other than COVID)	-CR (Medicaid)	11
			Medicare/Tricare for Life	None specified	11
			AETNA	None Specified	11
99442	Telephone E&M provided to an established patient, parent or guardian (11-20 minutes)	Physicians, NPs, PAs, CNMs and other qualified health professionals ( <b>Check payer specific guidelines</b> ) NC Medicaid Providers: Physicians and APPs. Not for use in FQHCs or RHCs <a href="#">Tricare for Life</a> use <i>Medicare guidance on telehealth</i>	Medicaid (anything other than COVID)	-CR (Medicaid)	11
			Medicare/Tricare for Life	None specified	11
			AETNA	None Specified	11
99443	Telephone E&M provided to an established patient, parent or guardian (21-30 minutes)	Physicians, NPs, PAs, CNMs and other qualified health professionals ( <b>Check payer specific guidelines</b> ) NC Medicaid Providers: Physicians and APPs. Not for use in FQHCs or RHCs <a href="#">Tricare for Life</a> use <i>Medicare guidance on telehealth</i>	Medicaid (anything other than COVID)	-CR (Medicaid)	11
			Medicare/Tricare for Life	None Specified	11
			AETNA	None Specified	11
98966	Telephone assessment and management service provided to an established patient, parent, or guardian (5-10 minutes)	Qualified nonphysician health care professional ( <b>Check payer specific guidelines</b> ) NC Medicaid Providers: LCSW/A, LPC/A, LMFT/A, LPA, LCAS/A, Ph.D. Not for use in FQHCs or RHCs <a href="#">Tricare for Life</a> use <i>Medicare guidance on telehealth</i>	Medicaid	-CR (Medicaid)	11
			Medicare/Tricare for Life	None specified	11
			AETNA	None Specified	11
98967	Telephone assessment and management service provided to an established patient, parent, or guardian (11-20 minutes)	Qualified nonphysician health care professional ( <b>Check payer specific guidelines</b> ) NC Medicaid Providers: LCSW/A, LPC/A, LMFT/A, LPA, LCAS/A, Ph.D. Not for use in FQHCs or RHCs <a href="#">Tricare for Life</a> use <i>Medicare guidance on telehealth</i>	Medicaid	-CR (Medicaid)	11
			Medicare/Tricare for Life	None specified	11
			AETNA	None Specified	11
98968	Telephone assessment and management service provided to an established patient, parent, or guardian (21-30 minutes)	Qualified nonphysician health care professional ( <b>Check payer specific guidelines</b> ) NC Medicaid Providers: LCSW/A, LPC/A, LMFT/A, LPA, LCAS/A, Ph.D. Not for use in FQHCs or RHCs <a href="#">Tricare for Life</a> use <i>Medicare guidance on telehealth</i>	Medicaid	-CR (Medicaid)	11
			Medicare/Tricare for Life	None Specified	11
			AETNA	None Specified	11



# NC AHEC PRACTICE SUPPORT

## Virtual Check-in Encounters

Code	Brief Description	Who can bill	Payers Accepted	Modifiers Needed	POS
G2012	Brief communication technology-based service, e.g. virtual check-in (5-10 minutes)	Physicians, NPs, PAs, CNMs and other qualified health professionals ( <b>Check payer specific guidelines</b> ) NC Medicaid Providers: Physicians and APPs. Not for use in FQHCs or RHCs  <a href="#">Tricare for Life</a> use Medicare guidance on telehealth  *Place of service not explicitly stated as 11 or 02.	<a href="#">Medicaid</a> (COVID SX Only)	-CR (Medicaid)	11
			<a href="#">Medicare/Tricare for Life</a>	None specified	11
			<a href="#">UHC</a>	None Specified	11*
			<a href="#">UHC MA</a>	None Specified	
			<a href="#">Cigna</a>	None Specified	11
			<a href="#">AETNA</a>	None Specified	11
			<a href="#">Humana</a>	None Specified	02
			<a href="#">Humana MA</a>	None Specified	02
<a href="#">Humana Military</a>	Check plan specific guidelines				

## Telehealth Visits (Audio/Visual required) New Patients

Code	Brief Description	Who can bill	Payers Accepted	Allow Audio Only	Modifiers Needed	POS
99201-99205	New patient E&M office visit (see CPT guidelines)  Interactive Audio/Video (Apple FaceTime, Facebook Messenger video chat, Google Hangouts video, or Skype)  *See <a href="#">OCR guidance</a> on acceptable platforms	Physicians, NPs, PAs, CNMs and other qualified health professionals ( <b>Check payer specific guidelines</b> ) NC Medicaid Providers: Physicians and APPs as well as, PsyD, LCSW, LPC, LCAS. Not for use in FQHCs or RHCs  <a href="#">AETNA MA</a> follows CMS policy  <a href="#">Tricare for Life</a> use Medicare guidance on telehealth  *See <a href="#">Guidance for QualCare</a>	<a href="#">Medicaid</a>	No	-CR & -GT	11
			<a href="#">Medicare</a>	No	-95	11
			<a href="#">AETNA</a>	Yes ( <a href="#">for acute visits only</a> )	-95 or -GT	02
			<a href="#">AETNA MA</a>	No	-95	11
			<a href="#">UHC</a>	Yes	-95 or -GT	11 or 02
			<a href="#">UHC MA</a>		None Specified	02
			<a href="#">BCBS &amp; Blue Medicare</a>	Yes	-CR (Audio only)	02
			<a href="#">BCBS FEP</a>	Unsure	-95 or -GT	
			<a href="#">Humana</a>	Yes	-95 or -GT	02
			<a href="#">Humana MA</a>	<a href="#">Review policy for specific guidance</a>		
			<a href="#">Humana Military</a>	Check plan specific guidelines		
			<a href="#">Tricare</a>	Call to verify: Plan specific		
			<a href="#">Tricare for Life</a>	No	-95	11
<a href="#">Cigna</a>	Yes	-GQ (Except QualCare)*	11			

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Version 04.02.2020\_Revised

**Telehealth Visits (Audio/Visual required) Established Patients**

Code	Brief Description	Who can bill	Payers Accepted	Allow Audio Only	Modifiers Needed	POS		
99212-99215	Established Patient E&M office visit (see CPT guidelines)  Interactive Audio/Video (Apple FaceTime, Facebook Messenger video chat, Google Hangouts video, or Skype)  *See <a href="#">OCR guidance</a> on acceptable platforms	Physicians, NPs, PAs, CNMs and other qualified health professionals ( <b>Check payer specific guidelines</b> ) NC Medicaid Providers: Physicians and APPs as well as, PsyD, LCSW, LPC, LCAS. Not for use in FQHCs or RHCs  <a href="#">AETNA MA</a> follows CMS policy  <a href="#">Tricare for Life</a> use Medicare guidance on telehealth  *See <a href="#">Guidance for QualCare</a>	<a href="#">Medicaid</a>	No	-CR & -GT	11		
			<a href="#">Medicare</a>	No	-95	11		
			<a href="#">AETNA</a>	Yes ( <a href="#">for acute visits only</a> )	-95 for -GT	02		
			<a href="#">AETNA MA</a>	No	-95	11		
			<a href="#">UHC</a>	Yes	-95 or -GT	11 or 02		
			<a href="#">UHC MA</a>		None Specified	02		
			<a href="#">BCBS &amp; Blue Medicare</a>	Yes	-CR (Audio only)	02		
			<a href="#">BCBS FEP</a>	Unsure	-95 or -GT			
			<a href="#">Humana</a>	Yes	-95 or -GT	02		
			<a href="#">Humana MA</a>	<a href="#">Review policy for specific guidance</a>				
			<a href="#">Humana Military</a>	<a href="#">Check plan specific guidelines</a>				
			<a href="#">Tricare</a>	Call to verify: Plan specific				
			<a href="#">Tricare for Life</a>	No	-95	11		
<a href="#">Cigna</a>	Yes	-GQ (Except QualCare)*	11					

**Disclaimer:** Information contained in this document is meant to be **informational only** and is **NOT a guarantee of payment**. **Use at your own discretion.** None of the information contained in this document supersedes any information that is provided by the specific payers and should be used with caution as the guidelines are being updated frequently. Please refer to the specific payer websites as the source of truth for billing guidance.

## General Guidance

### **Telehealth Coverage:**

The information contained in these tables is general payer information and doesn't reflect the specific plan information. Not every plan offers telehealth benefits and therefore, you will need to verify benefits for each plan to determine if telehealth will be covered. ERISA or self-funded employer plans do not necessarily follow payer telehealth policies if the payer is acting as a third-party administrator (TPA).

### **Modifiers:**

When appending multiple modifiers to a claim the sequencing of modifiers is as follows: 1) pricing 2) payment 3) location.

-95 is a CPT code modifier

-GT and -GQ are HCPCS codes modifiers

-CR is appended as a second modifier if required by payer.

### **Patient Consent for telehealth:**

Providers must obtain and document patient consent to telehealth services. Some payers allow this to be done verbally. Refer to specific payer policies.



## NC AHEC PRACTICE SUPPORT

[AETNA](#)

[AETNA Provider FAQs](#)

[BCBSNC](#)

[BCBSNC Telehealth Corporate Reimbursement Policy](#)

[CIGNA](#)

[Humana](#)

[Humana Telehealth Expansion 03/23/2020](#)

[Humana provider FAQs](#)

[Medicaid Special Bulletin #28 03/30/2020 \(Supersedes Special Bulletin #9\)](#)

[Medicare Telemedicine Provider Fact Sheet 03/17/2020](#)

[Medicare Waivers 03.30.2020](#)

[PalmettoGBA MLN Connects Special Edition - Tuesday, March 31, 2020](#)

[CMS Pub 100-04 Medicare Claims Processing Transmittal 3586](#)

[United Healthcare \(UHC\)](#)

[United HealthCare \(UHC\) COVID-19 Telehealth Services](#)

[United HealthCare Telehealth and Telemedicine Policy](#)

[United HealthCare Network Bulletin](#)

[UHC COVID-19 Electronic Visits](#)

[OCR HIPAA Guidance](#)

[NC Medical Society Guidance page](#)

[Tricare Telehealth](#)

[TRICARE Covers Certain Telemedicine Services in the U.S. 03/24/2020](#)

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Version 04.02.2020\_Revised