

Common Telehealth & Technology Based “Office” Services for COVID-19 Waiver 1135

Common Telemedicine Services: visits require interactive audio and video communication that permits real-time communication between you and the patient. (example: Updox, Skype, Facetime)

Documentation: A provider can select a level of service based on total time or MDM. The time spent includes non-face-to-face time that the practitioner spends and does not need to be dominated by counseling. Document the same as a face to face encounter, the visit is provided through telehealth, the location of the provider, any other persons involved in the visit and time spent:

CPT Established	Time	Decision Making (MDM)
99212	10	Straightforward
99213	15	Low
99214	25	Moderate
99215	40	High

CPT New	Time	Decision Making (MDM)
99201	10	Straightforward
99202	20	Straightforward
99203	30	Low
99204	45	Moderate
99205	60	High

Telephone Patient Visit: Time based codes used to report non-face-to-face patient services initiated by a new or established patient via the telephone. Service by a **physician or other qualified health care professional** who may report evaluation and management services provided to a patient, parent, or guardian 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. **Documentation:** Document assessment, plan, time and persons in attendance.

CPT	Time Requirement
99441	5-10 min
99442	11-20 min
99443	21-30 min

Virtual Check-ins: Brief communication services initiated by a new or established patient that are unrelated to a medical visit within the previous 7 days and does not lead to a medical visit within the next 24 hours. Verbal consent must be obtained and documented. **Documentation:** Document assessment, plan, time and persons in attendance.

CPT/HCPCS	Time	Method
G2012	5-10 min	Via phone, audio/visual, secure text, email or portal
G2010		Evaluation of recorded patient-submitted images/video

Online E-Visits: Services initiated by new and established patients using patient portals. Billing is captured over a 7-day period on time-based communications. **Documentation:** Document assessment, plan, time and persons in attendance.

CPT/HCPCS	Time	Notes
99421	5-10 min	Performed by physicians, midwives, NP, PA, CRNA, CP & RD
99422	11-20 min	Performed by physicians, midwives, NP, PA, CRNA, CP & RD
99423	21 min or more	Performed by physicians, midwives, NP, PA, CRNA, CP & RD
G2061-G2063		Non-physician provider services such as PT, OT, etc

POS – Based on where service would typically be rendered or 02. Follow payor specific guidelines (see payor grid on UPA website)

Modifiers: **95** (CMS & UHC) **GQ** (Cigna) **CR** (Cigna COVID-19 cases) **G0** (CMS stroke only) **GT** (Triwest)

<https://www.cms.gov/files/document/covid-final-ifc.pdf>