



COMMERCIAL REIMBURSEMENT POLICY

Telehealth and Virtual Care Services

Active

Section: General Coding
Policy Number: 007
Effective Date: 07/01/24

Description

This policy addresses the coding and reimbursement of services rendered via telecommunications technology submitted on a professional (837P) or outpatient facility (837I) claim.

This policy does not apply to FEP.

Definitions

Distant Site: The distant site is the location where the physician or other qualified healthcare professional (QHP) providing the telehealth service is located.

Electronic Visit (E-Visit): A patient-initiated service between a provider or other QHP and an established patient using an online portal for communication.

Originating Site: The originating site is where the patient receiving the service is located.

Remote Monitoring Services (Telemonitoring): The remote monitoring of data, such as physiologic information or therapeutic responses, by a monitoring device or equipment that transmits the data electronically to a health care provider for analysis.

Store-and-forward technology: The asynchronous electronic transmission of medical information from an originating site to a distant site.

Telehealth/Telemedicine Services: The delivery of health care services or consultations while the patient is at an originating site and the licensed health care provider is at a distant site. Telehealth may be provided by means of real-time two-way interactive audio, and visual communications, including the application of secure video conferencing or store-and-forward technology.

Telephone Calls: A patient-initiated service between a provider or other QHP and an established patient conducted over the telephone.

Policy Statement

Telehealth

In alignment with state law, Blue Cross and Blue Shield of Minnesota (Blue Cross) is waiving the policy requirement of a visual component associated with telehealth services for commercial members.

- **Place of Service (POS):** Blue Cross recognizes the following POS for telehealth services:
 - **POS Code 02:** The location where health services and health related services are provided or received, through telecommunication technology. Patient is not located in their home when receiving health services or health related services through telecommunication technology.
 - **POS Code 10:** The location where health services and health related services are provided or received through telecommunication technology. Patient is located in their home (which is a location other than a hospital or other facility where the patient receives care in a private residence) when receiving health services or health related services through telecommunication technology.
- **Modifiers:** Blue Cross recognizes the following modifiers for telehealth services:
 - **FQ modifier:** The service was furnished using audio-only communication technology.
 - **FR modifier:** The supervising practitioner was present through two-way, audio/video communication technology.
 - **GQ modifier:** The service was furnished via asynchronous telecommunications system.
 - **GT modifier:** Services via interactive audio and video telecommunication systems.
 - **G0 modifier:** Telehealth services for diagnosis, evaluation, or treatment of symptoms of an acute stroke. According to CMS, the Modifier G0 is valid for all: Telehealth distant sites codes billed with POS code 02, or Critical Access Hospitals, CAH method II, (revenue codes 096X, 097X, or 098X) or telehealth originating site facility fee, billed with HCPCS code Q3014.
 - **93 modifier:** Synchronous telemedicine service rendered via telephone or other real-time interactive *audio-only* telecommunications system. Services are between the physician/or other qualified healthcare professionals and a patient who is located at a distant site. The CPT code submitted must meet same criteria and key components as if it was a *face-to-face* interaction.
 - **95 modifier:** Synchronous telemedicine service rendered via a real-time interactive audio and video telecommunication system. Services are between the physician/or other qualified healthcare professionals and a patient who is located at a distant site. The CPT code submitted must meet same criteria and key components as if it was a *face-to-face* interaction. Only append modifier 95 to codes listed in CPT Appendix P.

Remote Monitoring Services (Telemonitoring)

Remote Physiologic Monitoring (RPM) and Remote Therapeutic Monitoring (RTM) Services should not be reported, and will not be reimbursed, if monitoring is less than 16 days.

The initial set-up and patient education on use of the equipment will be reimbursed only once per episode of care.

Telephone Calls

Blue Cross will reimburse patient-initiated telephone encounters between a provider and an established patient. Blue Cross does not reimburse for provider-initiated calls to patients.

If the telephone call results in the patient being seen within 24 hours or the next available urgent visit appointment, the telephone call is not reimbursed separately.

If the telephone call is related to an E/M service performed and reported by the physician within the previous seven days or within the global period of a previously completed procedure, the telephone call is not reimbursed separately.



E-Visits

Online digital E/M services are reimbursed for patient-initiated digital communications. These services require a clinical decision that typically would have been provided in the office (eg, medication dose adjustment, ordering of a test, or prescription of a new medication).

The routine dissemination of test results, processing of medication requests, or scheduling of appointments are not reimbursed separately.

Online digital E/M services include all related work within a 7-day period by the reporting physician or other QHP in the same group practice.

Originating Site Fee

An originating site fee may be billed on either the professional (837P) or institutional (837I) claim format using Healthcare Common Procedure Coding System (HCPCS) code Q3014: Telehealth originating site facility fee, without any modifier. Only the provider at the originating site will be reimbursed for an originating site fee for hosting the patient.

The distant site provider who is providing healthcare services to the patient via a telecommunications system (e.g., audio/video, telephone, online digital) cannot bill for the originating site fee because they aren't hosting the member. The submission of an originating site fee by the distant site provider will not be reimbursed separately.

When using the institutional (837I) claim format, revenue code 078X should be used with bill types 12X, 13X, 22X, 23X, 71X, 72X, 73X, 76X, and 85X.

Documentation Submission

Documentation must identify and describe the procedures performed. If a denial is appealed, this documentation must be submitted with the appeal.

Coverage

Eligible services will be subject to the subscriber benefits, applicable fee schedule amount and any coding edits.

The following applies to all claim submissions.

All coding and reimbursement is subject to all terms of the Provider Service Agreement and subject to changes, updates, or other requirements of coding rules and guidelines. All codes are subject to federal HIPAA rules, and in the case of medical code sets (HCPCS, CPT, ICD), only codes valid for the date of service may be submitted or accepted. Reimbursement for all Health Services is subject to current Blue Cross Medical Policy criteria, policies found in the Provider Policy and Procedure Manual sections, Reimbursement Policies and all other provisions of the Provider Service Agreement (Agreement).

In the event that any new codes are developed during the course of Provider's Agreement, such new codes will be paid according to the standard or applicable Blue Cross fee schedule until such time as a new agreement is reached and supersedes the Provider's current Agreement.

All payment for codes based on Relative Value Units (RVU) will include a site of service differential and will be calculated using the appropriate facility or non-facility components, based on the site of service identified, as submitted by Provider.

Coding

The following codes are included below for informational purposes only and are subject to change without notice. Inclusion or exclusion of a code does not constitute or imply subscriber coverage or provider reimbursement.

CPT/HCPCS Modifier: 93 95 FQ FR G0 GQ GT
ICD-10 Diagnosis: N/A
ICD-10 Procedure: N/A
CPT/HCPCS: See [Appendix](#)
Revenue Codes: N/A

Resources

Current Procedural Terminology (CPT®)
Healthcare Common Procedure Coding System (HCPCS)
U.S. Department of Health and Human Services (HHS) - Telehealth
Centers for Medicare & Medicaid Services (CMS)

Policy History

01/27/2015	Initial Committee Approval
02/04/2020	Annual Policy Review and Code update
01/26/2021	Code Update
11/29/2021	Annual Policy Review
03/22/2022	Revised and Code update
06/28/2022	Code Update
08/23/2022	Code Update
01/01/2023	Code Update
3/28/2023	Code Update
04/25/2023	Annual Policy Review
06/27/2023	Revised
10/01/2023	Revised
04/23/2024	Annual Policy Review

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Appendix

Telemonitoring

98975 98976 98977 98978 98980 98981 99453 99454 99457 99458
S9110

Telephone Calls

98966 98967 98968 99441 99442 99443 G2010 G2012 G2250
S0320

E-Visits

98970 98971 98972 99421 99422 99423 G0071 G2251 G2252

Originating Site Fee

Q3014

Telehealth

0362T 0373T 0403T 0591T 0592T 0593T
77427
90785 90791 90792 90832 90833 90834 90836 90837 90838 90839
90840 90845 90846 90847 90849 90853 90863 90875 90901 90951
90952 90953 90954 90955 90956 90957 90958 90959 90960 90961
90962 90963 90964 90965 90966 90967 90968 90969 90970 92002
92004 92012 92014 92227 92228 92507 92508 92521 92522 92523
92524 92526 92550 92552 92553 92555 92556 92557 92563 92565
92567 92568 92570 92587 92588 92601 92602 92603 92604 92607
92608 92609 92610 92625 92626 92627 93228 93229 93268 93270
93271 93272 93750 93797 93798 94002 94003 94004 94005 94625
94626 94664 95970 95971 95972 95983 95984 96040 96105 96110
96112 96113 96116 96121 96125 96127 96130 96131 96132 96133
96136 96137 96138 96139 96156 96158 96159 96160 96161 96164
96165 96167 96168 96170 96171 96202 97110 97112 97116 97129
97130 97139 97150 97151 97152 97153 97154 97155 97156 97157
97158 97161 97162 97163 97164 97165 97166 97167 97168 97530
97533 97535 97537 97542 97550 97552 97750 97755 97760 97761
97763 97802 97803 97804 98960 98961 98962 98966 98967 98968
99202 99203 99204 99205 99211 99212 99213 99214 99215 99221
99222 99223 99231 99232 99233 99234 99235 99236 99238 99239
99242 99243 99244 99245 99252 99253 99254 99255 99281 99282
99283 99284 99285 99291 99292 99304 99305 99306 99307 99308
99309 99310 99315 99316 99341 99342 99344 99345 99347 99348
99349 99350 99381 99382 99383 99384 99385 99386 99387 99391



99392	99393	99394	99395	99396	99397	99401	99402	99403	99404
99406	99407	99408	99409	99417	99418	99468	99469	99471	99472
99473	99475	99476	99477	99478	99479	99480	99483	99495	99496
99497	99498	99605	99606	99607					
G0108	G0109	G0136	G0270	G0296	G0316	G0317	G0318	G0396	G0397
G0406	G0407	G0408	G0409	G0410	G0420	G0421	G0422	G0423	G0425
G0426	G0427	G0438	G0439	G0442	G0443	G0444	G0445	G0446	G0447
G0459	G0506	G0508	G0509	G0513	G0514	G2011	G2086	G2087	G2088
G2211	G2212	G3002	G3003	G9685					
H0001	H0015	H0031	H0035	H2011	H2012	H2014	H2017	H2019	H2020
H2035	H2036								
S0201	S0265	S9140	S9141	S9152	S9441	S9443	S9445	S9446	S9453
S9480	S9482	S9484							
V5362	V5363								