

Coronavirus & Telehealth Cheatsheet



Medicare-Approved Telehealth Services				
Evaluation & Management Other				
Service Type	Codes			
Evaluation & Management	t 99201-99205; 99211-99215			
Prolonged E/M Services	99354-99357; G0513-G0514			
Hospital (inpatient)	99221-99223; 99231-99233; 99234-99236; 99238; 99239; G0425; G0427 G0406-G0408; G0459			
Observation Services	99217-99220; 99224-99226; 99234-99236			
Intensive Care Unit (ICU)	99477-99480			
Nursing Facility	99304-99310; 99315-99316; G9685			
Critical Care	99291-99292; G0508-G0509; 99468-99469; 99471-99472; 99475-99476			
Home Visits	99341-99345; 99347-99350			
Domiciliary, Rest Home, Custodial	99324-99328; 99334-99337			
Advanced Care Planning	99497-99498			
Annual Wellness Visit	G0438-G0439			
Assessment/Care Planning, Cognitive	99483; G0506			
Transitional Care (TCM)	99495-99496			
Ophthalmology	92002; 92004; 92012; 92014			
Psychiatry	90785; 90791; 90792; 90832-90834; 90836-90840; 90845-90847; 90853; 90875; G0410			
Psych/Neuropsych Testing	96110-96127; 96130-96133; 96136-96139			
Respiratory Care Services	94002-94005; 94664			
Substance Interventions	G0396-G0397; G0436-G0437; G0442-G0447; G0442-G0447; G2086-G2088			
Emergency Visits	99281-99285; G0425-G0427			
Behavioral Assessments, Counseling, & Education				
Physical, Speech, Occupational, and Adaptive Behavior Therapy				
Nutrition Services/Therapy	97802-97804; G0270			
ESRD Services	90951-90970 (90953, 90959, 90962)			
Radiation Treatment Management	77427			

Telecommunication Services				
Codes	Service Notes			
Other (non-telehealth)				
G2010, G2012	Virtual Check-ins			
	New patient OR Established patientPhysician or NPP/QHPSpecial rules apply			
G2061-G2063*	E-Visits			
99421-99423	 G-Codes are reported by NPPs/QHPs CPT codes reported by physicians Established patients only Time-based codes 			
	*Clinicians unable to bill independently (PT, OT, SLP, clinical psychologist) report these codes			
98966-98968	Telephone Assessment & Management			
	Nonphysician practitioners/QHP onlyEstablished patient, parent			
99441-99443	Telephone E/M service			
	Established patientMD/QHP/NPPSpecial rules apply			
Remote Monitoring Services				
99457-99458	Remote physiologic monitoring			
	Clinical staff, physician, QHPTime based-per monthPrimary and add-on codes			
99473	Remote monitoring BP device			
	Calibration, education & trainingData collection & physician/QHP report			
99493-99494	Remote monitoring			
	Psychiatric collaborative care managementTimed based-per month			

Place of Service (POS)

During the Public Health Emergency, the POS for telehealth services is reported based on individual payer preferences. Medicare prefers the POS as the place where the service would have taken place if performed in person instead of POS 02, along with modifier 95 to identify telehealth. Medicare patients may receive telehealth services from home.

Cost Sharing		Cost Sharing		
Medicare Part B cost-sharing (co- insurance and deductibles) are waived between March 18, 2020 and the end of the Public Health Emergency for COVID-19-relat- ed testing (e.g., U0001, U0002, U0003, U0004, 87635, 86328, 86769), or E/M services per- formed to determine if testing is needed, to order testing, or to administer testing. See cms.gov/files/document/ se20011.pdf for E/M Medicare Part B categories.	GQ	Remote monitoring services are part of a federal telemedicine demonstration project		
	GT	(T) Critical Access Hospital (CAH) method II claims		
	G0	(T) Service for diagnosis/treatment of acute stroke		
	95	(T) Identifies services not subject to cost-sharing due to COVID-19 waiver		
	CS	Cost-Sharing waived for COVID-19 testing-related services		
	CR	Catastrophe/Disaster-Related Service - NOT Telehealth – Part B claims		
	DR	Disaster Related (insitutional billing only)		
Other Charges				

Some payers allow the use of the following charges billed with telehealth services. Do **NOT** use these codes if the patient is in their home at the time of service.

G2025 Distant site service furnished by RHC or FQHC only

Q3014 Telehealth originating site facility fee

T1014 Telehealth transmission fee

Collection*

G2023 Home

99211 Office

C9803 Outpatient (hospital)

G2024 Skilled Nursing Facility

Handling/Conveyance

99000 Office to laboratory

99001 Other location (not office) to laboratory

Laboratory Prorated Travel Fees

P9603 miles traveled P9604 trip charge

> * Report with codes G2023 or G2024

Testing | Testing labs require CLIA certification

U0001 CDC test (real-time RT-PCR panel)

U0002 Non-CDC (any technique, multiple subtypes)

U0003 Nucleic-Acid (high-throughput technologies)

U0004 Any method (high-throughput technologies)

86408 Neutralizing antibody, screen

86409 Neutralizing antibody, titer

86413 Antibody, quantitative

87426 Infectious agent antigen detection by immunoassay

87635 Nucleic-Acid (swab)

COVID-19 SARS-CoV2 Specimen Collection & Testing

86328 Antibody: Single step (reagent strip)

86769 Antibody: Multi-step

Testing | Proprietary Laboratory Analyses (PLA)

0202U BioFire® Respiratory Panel 2.1

0223U QIAstat-Dx Respiratory SARS CoV-2 Panel

0224U COVID-19 Antibody Test

0225U ePlex® Respiratory Pathogen Panel 2

0226U Tru-Immune™

HIPAA Violation Waivers

HHS OCR plans to waive penalties for HIPAA violations resulting from the good-faith use of non-public-facing technologies during the Public Health Emergency (e.g., FaceTime, Skype)

COVID-19 ICD-10-CM Codes

- Confirmed case (symptomatic, asymptomatic, or presumptive positive) (U07.1)
- Symptomatic, not confirmed (report symptom codes)
- Contact with COVID-19 (suspected exposure) (Z20.828)
- Possible exposure, ruled out (Z03.818)
- Asymptomatic (none or unsure of exposure), ruled out (Z11.59)
- Negative COVID-19 but confirmed other condition or illness (report codes for other condition or illness)

E/M Key Components

Scoring is based on either the three (3) key components or time.

Three Key Components

- 1. History: CC, HPI, ROS, PFSH
- 2. **Exam:** Perform & document findings in the affected or related body areas or organ systems
- 3. Medical Decision Making:
 - a. Number of diagnoses or problems
 - b. Amount of data ordered or reviewed
 - c. Risk of death, morbidity, loss of bodily function with the treatment planned

Time: Document the time spent face-to-face (or audio visually), including a summary of what was discussed, counseled, or any care coordinated.

COVID-19 Coding guidelines are changing rapidly. As of Sept. 14th, 2020 this coding cheat sheet is current. Visit our Resource Page and verify codes at FindACode.com for continued current information.



www.innoviHealth.com





www.HCCcoder.com

www.FindACode.com

Evaluation and Management (E/M) Codes 99201-99215 (Office and other Outpatient) are changing effective January 1, 2021. Today is the time to prepare for this major change. Get a copy of your 2021 E/M Changes Cheatsheet from innoviHealth by purchasing the Evaluation & Management Comprehensive Guide for 2021 with Cardpack Bundle.

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