# ANCILLARY GUIDELINE A5, TELEHEALTH, TELECONSULTATIONS AND ONLINE/TELEPHONIC SERVICES

Telehealth services include a variety of health services provided by synchronous or asynchronous electronic communications, including secure electronic health portal, audio, or audio and video and clinician-to-clinician virtual consultations.

***Criteria for coverage***

The clinical value of the telehealth service delivered must reasonably approximate the clinical value of the equivalent services delivered in-person.

Coverage of telehealth services requires the same level of documentation, medical necessity, and coverage determinations as in-person visits.

Examples of covered telephone or online services include but are not limited to:

1. Extended counseling when person-to-person contact would involve an unwise delay or exposure to infectious disease.
2. Treatment of relapses that require significant investment of provider time and judgment.
3. Counseling and education for patients with complex chronic conditions.

Examples of non-covered telehealth services include but are not limited to:

1. Prescription renewal.
2. Scheduling a test.
3. Reporting normal test results.
4. Requesting a referral.
5. Services which are part of care plan oversight or anticoagulation management (CPT codes 99339-99340, 99374-99380 or 99363-99364).
6. Services which relate to or take place within the postoperative period of a procedure provided by the physician are not separately covered. (Such a service is considered part of the procedure and is not be billed separately.)

Codes eligible for telehealth delivery include 90785, 90791, 90792, 90832-90834, 90836, 90837-90840, 90846, 90847, 90951, 90952, 90954, 90955, 90957, 90958, 90960, 90961, 90963, 90964-90970, 96116, 96156-96171, 96160, 96161, 97802-97804, 99201-99205, 99211-99215, 99231-99233, 99307-99310, 99354-99357, 99406-99407, 99495-99498, G0108-G0109, G0270, G0296, G0396, G0397, G0406-G0408, G0420, G0421, G0425-G0427, G0438-G0439, G0442-G0447, G0459, G0506, G0508, G0509, G0513, G0514, G2086-G2088. Additional codes are covered when otherwise appropriate according to this guideline note and other applicable coverage criteria.

The originating site code Q3014 is covered only when the patient is present in an appropriate health care setting and receiving services from a provider in another location.

***Clinician to Patient Services billed using specified codes indicating telephone or online service delivery***

Covered telephonic and online services include services related to evaluation, assessment and management as well as other technology-based services (CPT 98966-98968, 99441-99443, 99421-99423, 98970-98972, G2012, G2061-G2063, G2251-G2252).

Covered telephone and online services billed using these codes do not include either of the following:

1. Services related to a service performed and billed by the physician or qualified health professional within the previous seven days, regardless of whether it is the result of patient-initiated or physician-requested follow-up.
2. Services which result in the patient being seen within 24 hours or the next available appointment.

***Clinician-to-Clinician Consultations (telephonic, online or using electronic health record)***

Covered interprofessional consultations delivered online, through electronic health records or by telephone (CPT 99446-99449, 99451-99452).

***Store and Forward***

Store and forward codes (HCPCS G2010, G2250) are only covered when billed concurrently with a code that includes medical decision making and communication with the patient (for example, HCPCS G2012).