# Telehealth and COVID-19: 2020 Coding and Billing Tips



Effective date: June, 2020

Screen	ing i	for (	CO'	VID:	-19

For **asymptomatic** individuals who are being screened for COVID-19 and have no known exposure to the virus, and the **test results** are either **unknown or negative**.

ICD 10-CM code <b>Z11.59</b>		Encounter for screening for other viral diseases				
	Possible/Actual Exp	xposure to COVID-19				
Encounter for possible exposure			Encounter for actual exposure			
<b>Z03.818</b> Encounter for observation for suspected exposure to other biological agents ruled out		Z20.828	Contact with and (suspected) exposure to other viral communicable diseases			

#### Signs/Symptoms related to COVID-19

For patients presenting with any signs/symptoms relating to COVID-19 (such as fever, shortness of breath, cough, fatigue) where definitive diagnosis has not been established, assign the appropriate code(s) for each of the presenting signs and symptoms plus any conditions that are not an integral part of a disease process when present.

R06.2	Shortness of breath	R05	Cough	R53.83	Other fatigue	R50.9	Fever unspecified
	Coding Example						
	Scer	nario			Effective 02	2/20/2020	
Fever, cough, actual exposure to COVID-19 - diagnosis not established		R50.9	Fever unspecified				
		R05	Cough				
				Z20.828	Contact with and (suspect viral communicable disea		re to other

#### Only Confirmed/Positive COVID-19

Date of Service 03/31/2020 or prior

ICD 10-CM code B97.29 - Other coronavirus as the cause of diseases classified elsewhere, should be used to report a patient who has tested positive for COVID-19

ICD 10-CM code **U07.1** - **2019 nCoV acute respiratory disease**, should be used to report a patient who has tested positive for COVID-19

Date of Service effective 04/01/2020

Coding Example					
Scenario	Effe	ctive 02/20/2020 - 03/31/2020	Effective <b>04/01/2020</b>		
Acute bronchitis confirmed as due to COVID-19	J20.8	Acute bronchitis due to other specified organisms	U07.1	2019-nCoV acute respiratory disease	
	B97.29	Other coronavirus as the cause of diseases classified elsewhere	J20.8	Acute bronchitis due to other specified organisms	

#### **Laboratory Tests to Confirm COVID-19**

Effective 03/18/2020 and through the end of the COVID-19 Emergency

For certain COVID-19 testing related services, coinsurance and deductible amounts are waived. Use modifier CS on applicable claim lines.

Use the CS modifier on applicable claim lines to identify the service as subject to the cost-sharing wavier for COVID-19 testing-related services.

Note: If your office is not running the test for COVID-19 or incurring the cost, you will not report these codes

Effective 02/04/2020				Effective <b>03/13/2020</b>		
HCPCS	CDC, 2019 nCoV	HCPCS	Non-CDC, 2019 nCoV Coronavirus	СРТ	Infectious agent detection by	
Code U0001	Real-Time RT-PCR Diagnostic Panel. Reported by laboratories using CDC test kit	Code U0002	SARS-CoV-2/2019-nCoV(COVID-19) any technique, multiple types or subtypes (includes all targets).  Reported by any validated	Code 87635	nucleic acid (DNA or RNA) SARS Coronavirus 2 (SARS-CoV-2 (Coronavirus disease [COVID-19]), amplified probe technique).	
	using CDC test kit		laboratories not using CDC test kit		Reported by hospitals, health system and laboratories using method specified by CPT code description	

## Laboratory Tests to Confirm COVID-19 - Performed With High Throughput Technologies

## Effective 03/18/2020 and for the COVID-19 emergency

HCPCS	Infectious agent detection by nucleic acid (DNA or RNA);
Code	severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)
U0003	(Coronavirus disease [COVID-19]), amplified probe technique,
	making use of high throughput technologies

HCPCS Code U0004 2019-nCoV Coronavirus, SARS-CoV-2/2019-nCoV (COVID-19), any technique, multiple types or subtypes (includes all targets), non-CDC, making use of high throughput technologies

### Laboratory Tests to Identify the Presence of Antibodies to the Coronavirus (COVID-19)

# Effective 04/10/2020

CPT Code 86328

Modifier CS

Immunoassay for infectious agent antibody(ies), qualitative or semi-quantitative, single step method (e.g. reagent strip); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19])

**CPT Code 86769** 

Antibody; severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19])

### TELEHEALTH/TELEMEDICINE (COVID-19)

## Visit with a provider that uses telecommunication system between a provider and patient

For the COVID-19 Pandemic Emergency CMS has expanded access to Telehealth services for Medicare patients.

Effective 03/06/20 - Services can be provided in all settings, including a patient's home, and can be provided for beneficiaries who have audio phones only.

Health plans may also cover these extended benefits for Medicaid, Marketplace, and Commercial.

## Refer to your payer guidelines on reporting Telehealth/Telemedicine.

When billing professional claims for all Telehealth services

effective 03/01/2020 and for the duration of COVID-19 Emergency, bill with:

Place of Service (POS) equal to what it would have been had the service been furnished in-person

Modifier 95, indicating that the service rendered was actually performed via telehealth

**Note:** Before billing refer to your payer guidelines on reporting applicable POS and Modifier.

#### POS and Modifiers

POS 02 Telehealth - The location where health services and health related services are provided or received, through a telecommunication system.

Note: This Telehealth POS code does not apply to Originating Site facilities billing a facility fee.

Modifier 95 Synchronous Telemedicine Service Rendered Via a Real-Time Interactive Audio and Video Telecommunications system.

Modifier GT  Via Interactive Audio and Video Telecommunications Systems.  Note: Except for institutional claims, Medicare stopped using this modifier in 2017 after POS-02 was introduced. Use this modifier if billing CAH Optional Payment Method II. Commercial carriers request it.						
Modifier <b>G0</b> Telehealth services furnished for purposes of diagnosis, evaluation, or treatment of symptoms of an acute stroke.						
	Common Medicare Telehealth Services	T.,				
CPT Codes 99201 - 9		New/Established patient				
HCPCS Codes <b>G042</b>	5 - G0427 Telehealth consultations, emergency department or initial inpatient	To the extent the 1135 waiver requires an established relationship. HHS will not conduct audits to ensure that				
HCPCS Codes <b>G0406</b>	furnished to beneficiaries in hospitals or SNFs	such a prior relationship existed for claims submitted during this public health emergency.				
. ,	dded Telehealth Services for the COVID-19 Pandemic Emergency (Medicare; health pl	ans may also extend to other lines of business)				
	99220, 99234 - 99236 Facility Observation Visits/Discharge	_				
	99223, 99238 - 99239 Inpatient Hospital Visits/Discharge	New/Established patient				
CPT Codes <b>99281</b> - 9		(effective 03/01/20 for the				
	99306, 99315 - 99316 Nursing Facility Visits/Discharge	COVID-19 emergency)				
	99345, 99347 - 99350 Home Visits	_				
	E-Visits					
All to	rpes of locations including the patient's home, and in all areas. May have non-face-to-f.	and nations initiated communications				
All ty						
	Communication between a patient and physician through an onlin	e patient portal				
CPT Code <b>99421</b>	up to 7 days (5-10 min)	New/Established patient				
CPT Code <b>99422</b>	up to 7 days (11-20 min)	(effective 03/01/20 for the				
CPT Code <b>99423</b>	up to 7 days (21 or more min)	COVID-19 emergency)				
LIODO O LA TA	Communication between a patient and qualified non-physician through a	an online patient portal				
HCPS Code G2061	up to 7 days (5-10 min)	New/Established patient				
HCPS Code <b>G2062</b> HCPS Code <b>G2063</b>	up to 7 days (11-20 min) up to 7 days (21 or more min)	(effective 03/01/20 for the COVID-19 emergency)				
ncP3 Code G2003	Remote Evaluation of Patient-Submitted Images and Video, Includi	no Interpretation				
HCPS Code <b>G2010</b>	Not related to an E/M within the previous 7 days, not leading to an	New/Established patient				
	E/M within next 24 hours	(effective 03/01/20 for the				
	Remote Monitoring/Collection Biological Data	COVID-19 emergency)				
CPT Code <b>99453</b>	Remote monitoring of physiologic parameter(s) (g. weight, blood pressure, pulse oximetry,					
	respiratory flow), initial; set-up and patient education on use of equipment.					
CPT Code <b>99454</b>	Remote monitoring of physiologic parameter(s) (g. weight, blood pressure, pulse oximetry, respiratory flow), initial; device(s) supply with daily recording (s)					
	or programmed alert(s) transmission, each 30 days.	New/Established patient (effective 03/01/20 for the				
CPT Code <b>99473</b>	Self-measured blood pressure using a device validated for clinical accuracy; patient education/training and device calibration	COVID-19 emergency)				
CPT Code <b>99454</b>	Separate self-measurements of two readings one minute apart, twice daily over a 30					
	day period (minimum 12 readings). Subsequent communication of a treatment plan to the patient					
	Remote Monitoring Management					
	Clinical/Physicians/Other Qualified Health Care Profess	ionals				
CPT Code <b>99457</b>	Remote physiologic monitoring treatment management services, requiring interactive communication with the patient/caregiver during the month; first 20 minutes.	New/Established patient				
CPT Code <b>99458</b>	Remote physiologic monitoring treatment management services, requiring interactive					
	communication with the patient/caregiver during the month; each additional 20 minutes (List separately in addition to code for procedure).	COVID-19 emergency)				
	· · ·					
	Services Rendered by In-Network Providers  Virtual Check-In					
In all areas	s (not just rural). The patient must verbally consent to receive virtual check-in services (car	n be obtained before or at the time of service)				
	Brief communication by physician or qualified health care professional via telephone or					
HCPS Code <b>G2012</b>	Not related to an E/M within the previous 7 days, not leading to an E/M within next 24 hours (5-10 min)	New/Established patient				
	24110013 (0 1011111)	(effective 03/01/20 for the COVID-19 emergency)				
	Patient Initiated Telephone Calls For Patient Management (Qualified Hea	alth Care Professional)				
CPT Code <b>99441</b>	Not related to an E/M within the previous 7 days, not leading to an E/M within next 24					
CPT Code <b>99442</b>	hours (5-10 min)  Not related to an E/M within the previous 7 days, not leading to an E/M within next 24	New/Established patient				
	hours (11-20 min)	(effective 03/01/20 for the COVID-19 emergency)				
CPT Code <b>99443</b>	Not related to an E/M within the previous 7 days, not leading to an E/M within next 24 hours (21-30 min)	5512 15 Ss.gssy/				
	Patient Initiated Telephone Calls For Patient Management (Non-Physician I	Health Care Professional)				
CPT Code <b>98966</b>	Not related to an E/M within the previous 7 days, not leading to an E/M within next 24					
007.0	hours (5-10 min)	New/Established patient				
CPT Code <b>98967</b>	Not related to an E/M within the previous 7 days, not leading to an E/M within next 24 hours (11-20 min)	(effective 03/01/20 for the				
CPT Code <b>98968</b>	Not related to an E/M within the previous 7 days, not leading to an E/M within next 24	COVID-19 emergency)				
hours (21-30 min)						
CPT Code <b>99091</b>	Remote Monitoring/Collection and Interpretation of Physiol Minimum of 30 minutes/each 30 days	ogic Data Unbundled in 2018 and				
	wii iii du do Tiiii lutes/each 30 days	paid separately by Medicare				
Telehealth Facility Fee						
HCPS Code Q3014	Telehealth Originating Site Facility Fee	Billed by facility where patient located.  Note: However, locations that are temporarily				
		eligible will not receive a facility fee.				