

MEDICARE Announces New Flexibilities for Telehealth, Expands Phone-only Services



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Medicare continues to announce new flexibilities and expand telehealth coverage in response to the COVID-19 emergency. On March 17, Medicare announced it would allow providers to bill **Medicare fee-for-service for patient care in all areas of the country and in all settings, including the beneficiary's home.**

NEW Medicare is further expanding access to allow for more than 80 additional services to be provided via telehealth. **Medicare** also is permitting physicians and other clinicians to provide **certain services by telephone.**

Here's what you need to know

NEW 1) Telephone Services (audio-only with no video connection)

- Providers can now provide certain services to their patients **by telephone.**
- CPT codes covered are **99441-99443.** These are time-based codes, and it is important to note the amount of time spent on the telephone with the patient.
- These services are available for **new and established patients.**
- Communication should **not** be related to a medical visit within the previous 7 days nor lead to a medical visit within the next 24 hours (or soonest appointment available).

2) Telehealth Visits (same as in-person and paid at the same rate as regular, in-person visits)

- Provider must use an “**interactive audio and video telecommunications system** that permits real-time communication between the distant site and the patient at home.” The HHS Office for Civil Rights (OCR) also allows physicians to use non-HIPAA compliant telehealth for the duration of the COVID-19 emergency, thus allowing the use of popular applications that allow for video chats, such as including Apple FaceTime, Facebook Messenger video chat, Google Hangouts video, or Skype.
- Telehealth visits are available to **new and established patients.** HHS will not conduct audits to ensure that a patient had a prior established relationship with the practitioner for claims submitted during this public health emergency.
- **NEW** When billing for **traditional Medicare telehealth services** and **non-traditional Medicare telehealth services** (i.e., one of newly allowed telehealth codes) with dates of services on or after March 1, 2020, and for the duration of the Public Health Emergency (PHE), bill with the **Place of Service (POS) equal to what would have been used if the service had been furnished in-person, along with modifier 95,** indicating that the service rendered was actually performed via telehealth.
- Claims **do not** require “DR” condition code or “CR” modifier.
- A complete list of all Medicare telehealth services can be found at <https://www.cms.gov/Medicare/Medicare-General-Information/Telehealth/Telehealth-Codes>.

3) Virtual Check-Ins (5-10 minute, patient-initiated communications with a healthcare provider that mitigate the need for an in-person visit)

- NEW** • Provider can provide virtual check-in services to both **new and established patients**.
- Communication should **not** be related to a medical visit within the previous 7 days nor lead to a medical visit within the next 24 hours (or soonest appointment available).
- Virtual Check-ins can be conducted with a broader range of communication methods, unlike Medicare telehealth visits, which require audio and visual capabilities for real-time communication. **Use of traditional telephone or cell phone calls for Virtual Check-ins is acceptable.**
- Providers can bill for these brief communications with HCPCS code G2012. Separate from these virtual check-in services, captured video or images can be sent to a physician for remote evaluation (HCPCS code G2010).

4) E-Visits (non-face-to-face, patient-initiated communications through an online patient portal)

- Provider must have an **established relationship with the patient**.
- Patient communicates with their doctor by using an **online patient portal**.
- Patient must generate the initial inquiry and communications can occur over a 7-day period.
- The services may be billed using CPT codes 99421-99423 or HCPCS codes G2061-G2063, as applicable.

Additional Medicare Telehealth Resources:

- NEW** • [Physicians and Other Clinicians: CMS Flexibilities to Fight COVID-19](#) – Released March 30, 2020
- NEW** • [Additional Background: Sweeping Regulatory Changes Fact Sheet](#) – Released March 30, 2020
- [Medicare Telemedicine Health Care Provider Fact Sheet](#) – Released March 17, 2020
- [Medicare Telehealth Frequently Asked Questions \(FAQs\)](#) – Released March 17, 2020
- NEW** • [CMS Current Emergencies](#)