

# UnitedHealthcare Expands Access to Telehealth Including Audio-only Services



This document is available to members as an informational resource. KMA expresses no opinion as to the feasibility, applicability, or impact to your particular practice. The guidance outlined below applies to UnitedHealthcare plans only.

**UnitedHealthcare (UHC)** is expanding telehealth services through June 18, 2020, for their Medicare Advantage and commercial plans to make it easier for patients to connect with their health care provider during the COVID-19 emergency. UHC will reimburse both **participating** and **non-participating** providers who submit appropriate telehealth claims.

## Here's what you need to know

### 1) Telehealth Visits (real-time audio-video or audio only)

- Telehealth services can be provided through **live, interactive audio-visual or audio-only** transmission to **new or existing patients** whose medical benefit plans cover telehealth services.
- The HHS Office for Civil Rights (OCR) is exercising enforcement discretion and waiving penalties for HIPAA violations against health care providers who serve patients in good faith through everyday communications technologies for the duration of the COVID-19 emergency, thus allowing the use of popular applications that allow for video chats, such as Apple FaceTime, Facebook Messenger video chat, Google Hangouts video, or Skype. **Public facing services** like Facebook Live, Twitch, and TikTok are not allowed and **should not be used for telehealth**.
- Cost shares are waived for all telehealth **visits with any in-network provider**.
- Standard cost shares apply for all telehealth visits with out-of-network providers except when such visits are **related to COVID-19 testing**.
- Telehealth services will be reimbursed, based on national reimbursement determinations, policies and contracted rates, as outlined in a provider's participation agreement.
- Some self-funded plans **may not cover provider-based telehealth services** under their member benefit plans.
- NEW** • Append modifier **95** when billing **commercial and Medicare Advantage plans** and use the place of service that would have been reported had the service been furnished in person.

### 2) Virtual Check-Ins (short audio-only or digital services)

- NEW** • Providers can offer virtual check-in services to **new and established patients**.
- Patient must verbally consent to receive virtual check-in services.
- 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).
- Can be conducted through several communication technology devices, such as telephone or captured video or image.
- Providers can bill for these brief communications with **HCPCS code G2012** for telephone or **G2010** for captured video or image.

- NEW**
- From March 31, 2020, until June 18, 2020, **telephone evaluation and management service** for both physician and qualified non-physician health care professionals (CPT codes 99441-99443 and 98966-98968) can also be used for new or established patients.

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

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

#### **Additional UnitedHealthcare Resources:**

- [COVID-19 Telehealth](#)
- [COVID-19 Telehealth Services](#)
- [COVID-19 Update from UHC's Chief Medical Officer](#)
- NEW** • [COVID-19 UHC Telehealth Services: Care Provider Coding Guidance](#)