

UnitedHealthcare Expands Access to Telehealth Including Audio-only Services



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UnitedHealthcare (UHC) is once again expanding many of the COVID-19 telehealth services through October 22, 2020 for their Medicare Advantage plans to make it easier for patients to connect with their health care provider during the COVID19 emergency. [Read more](#) for full details, including applicable benefit plans and service information.

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.
- **New** Cost shares are waived for all telehealth visits with any in-network provider through October 22, 2020 for group plans and Medicare Advantage plans.
- **New** Standard cost shares apply for all telehealth visits with out-of-network providers except when such visits are related to COVID-19 testing through October 22, 2020,
- 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.
- Telehealth services will be reimbursed that are:
 - Recognized by CMS and appended with modifiers GT or GQ
 - Recognized by the American Medical Association (AMA), included in Appendix P of CPT and appended with modifier 95
- Append appropriate modifier 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)

- 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.
- 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:

- [New COVID-10 Summary](#)
- [COVID-19 Telehealth](#)
- [COVID-19 Telehealth Services](#)
- [COVID-19 Update from UHC's Chief Medical Officer](#)
- [COVID-19 UHC Telehealth Services: Care Provider Coding Guidance](#)