Tips for Telehealth Billing During the COVID-19 Pandemic

Plan to get reimbursed for services you would typically provide in the office? Then use this primer to identify the various types of telehealth visits and associated billing codes.

Keep in mind that guidelines change often during the COVID-19 crisis. Please reference the links below for the most current details.

1 TELEHEALTH VISITS THAT REPLACE OFFICE VISITS

This is a real-time video visit and is the most common type of mental health digital visit.

It has the same standards as an in-person visit and should be paid at the same rate. However, it is a good idea to review the settings on your billing software to make sure it is accurate.

+95 Real-time audio video modifier to add to the end of the billing code During the COVID-19 crisis, use this for visits that you would typically have in your office.

You can use the same CPT codes you already use with the addition of a modifier – modifier 95 in most cases – that tells the payer that the visit was a telehealth visit and a place of service code (POS) that tells the payer the location of the clinician. Coverage policies may vary across payers, especially during the public health emergency. Before you bill, make sure to check and confirm that you can provide and bill the service by telehealth.

Information listed in italics are those services that can also be temporarily provided by telephone during the COVID-19 crisis.

Initial Psychiatric Evaluation
90791+95
90792+95

Evaluation and Management Outpatient
99204+95	99205+95	99212+95
99213+95	99214+95	99215+95

Evaluation and Management Plus Psychotherapy
30 (16-37*) minutes - E/M code [Audio only - use the appropriate 99441-99443 code] and *90833+95*

45 (38-52*) minutes - E/M code [Audio only – use the appropriate 99441-99443 code] and *90836+95*

60 (53+*) minutes - E/M code [Audio only – use the appropriate 99441-99443 code] and *90838+95*

Psychotherapy Alone
90832+95	30 (16-37*) minutes
90834+95	45 (38-52*) minutes
90837+95	60 (53+*) minutes

Family Therapy
90846+95	Patient not present
90847+95	Patient present
90849+95	Group

Group Therapy
90853+95   (Added temporarily to the Medicare Telehealth list for the period of the COVID-19 crisis)

2 TELEPHONE VISITS

There are CPT codes that describe care provided via telephone alone. They are for medical discussions or assessment and management of a new (allowed during COVID-19 crisis) or established patient.

For physicians and others who can bill for E/M services:
99441	5-10 minutes
99442	11-20 minutes

For psychologists, social workers, and others who can bill for E/M services:
98966	5-10 minutes
98967	11-20 minutes
98968	21-30 minutes

3 VIRTUAL CHECK-IN (G2012)

Physicians and others who can bill E/M services can bill for time spent talking to a new or established patient on the telephone or via telephone and video. Generally, the physician is responding to a contact made by the patient. This code should not be billed if the patient has been seen in the 7 days prior to the call or within 24 hours or the soonest available appointment after the brief check-in. The goal of this visit is to see if a patient needs to be seen for further evaluation or if the problem can be resolved through this call.

4 E-VISIT

This type of visit is not real time or face-to-face. It is a digital communication that a patient must initiate. Often it is done through a portal or email. This visit requires a clinical decision that typically you would provide in an office. Time is cumulative during a 7-day period. You can use CPT codes for these visits based on time.

Those that bill evaluation and management services should use:
99421	5-10 minutes
99422	11-20 minutes
99423	21-30 minutes

Those that cannot bill evaluation and management services should use:
G2061	5-10 minutes
G2062	11-20 minutes
G2063	21-30 minutes

REMOTE PATIENT MONITORING

This involves the collection and interpretation of data that is digitally stored and transmitted by a patient to a clinician. An example is sleep tracking data from a wearable device. There are no specific billing codes in mental health for this type of visit.

STAY CURRENT

Guidelines for telehealth visits change fast. For up-to-date details on telehealth, you can use these resources.

- SMI Adviser
- American Psychiatric Association
- Center for Connected Health Policy
- Centers for Medicare and Medicaid Services
- Federation of State Medical Boards

SMIAdviser A Clinical Support System for Serious Mental Illness

An APA and SAMHSA Initiative
AMERICAN PSYCHIATRIC ASSOCIATION
SAMHSA Substance Abuse and Mental Health Services Administration