

Coding for Telemedicine

As of Nov 7, 2018

- Telemedicine is defined by a real-time interaction between a physician or other qualified health care professional and a patient who is located at a distant site from the physician.
- The examination and communication of information exchange between the physician and the patient must be the same as when rendered face-to-face.
- Telemedicine codes are identified by a star (*)
 - Office based
 - 99201 – 99205 E/M new patient
 - 99212 – 99215 E/M established patient
 - Does not apply to tech code 99211 or Eye visit codes
 - Office consultations
 - For insurances that still recognize this family of codes
 - 99241 - 99245
 - Subsequent Hospital Care
 - 99231 – 99233
 - Inpatient Consultation
 - 99251 – 99255
 - Subsequent Nursing Facility Care
 - 99307-99310
- Append modifier -95 Synchronous telemedicine service rendered via a real-time interactive audio and video telecommunications systems.

Screening Tests

- Screening patients with no known retinopathy.
 - 92227 Remote imaging for detection of retinal disease (eg, retinopathy in a patient with diabetes) with analysis and report under physician supervision, unilateral or bilateral \$15.24
 - No -26/-TC split.
 - Either the PCP *or* the ophthalmologist can bill it and collect the entire amount, with a separate contract with the other provider for their portion.
- For patients with known retinopathy:
 - 92228 Remote imaging for monitoring and management of active retinal disease (eg, diabetic retinopathy) with physician review, interpretation and report, unilateral or bilateral
 - 92228 -26 billed by the ophthalmologist \$21.06
 - 92228 -TC billed by the PCP \$13.78
 - Do not report 92250 -26 for telemedicine.
 - \$22.51
- What about 92250 Fundus photography?
 - For Medicare Part B, do not report 92250 -26 for telemedicine. \$22.51
 - There is a code 92228 that describes what was done
 - Increases utilization significantly
 - What about commercial plans that have published policies state 92250 -26 is appropriate
 - Follow the rules of the commercial payer.