

## **Coding for Phone Calls, Internet and Telehealth Consultations**

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Visit this site frequency for additional details and updates.

https://www.aao.org/practice-management/news-detail/coding-phone-calls-internet-telehealth-consult

#### What You Need to Know:

- Telemedicine refers to a group of services that may be provided to a patient without any physical patient contact. Services may be provided via a telephone (audio) connection, or via some type of online communication such as a patient/provider portal or via email interactions between the patient and practitioner.
- Telehealth refers to a distinct level of services that have traditionally been performed via a faceto-face interaction between the patient and physician. Telehealth allows the interaction to still occur face-to-face; however, it can be achieved via the audio and video connection.
  - Important: Effective April 30, CMS added the Eye visit codes to the list of covered exams during the COVID-19 public health emergency (PHE). Documentation requirements remain the same.
  - 92002 and 92012 are achievable via virtual face-to-face interaction. Place of service is
    11 and append modifier -95.
  - This expansion of coverage may be unique to CMS.
- Time involving staff who are not licensed to practice medicine can't be billed for or factored into physician time-based coding options.
  - Important: Effective April 30, CMS includes the technician code 99211 as a telemedicine code option.
    - Applies to new and established patients.
    - There must be a documented order from the physician indicating what should be addressed during the staff/patient encounter by phone.
    - Supervision may be virtual.
    - 99211 continues to be bundled with all testing services performed the same day.
    - A physician visit performed on the same day of 99211 would not be separately billable.
- Commercial and Medicaid programs do have their own rules regarding coverage of codes, modifiers and place of service (POS). Please check every commercial and Medicaid website for specific information.
- All information applies to new and established patients.
- Patients must be notified that a claim will be submitted to the payer.

- Phone call codes G2012 or 99441-99443 should not be reported when originating from a related E/M service should be provide within the past seven day nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment. Should not be reported for postop visits.
  - Important: Effective April 30, CMS increased the allowable of 99441 to 99212, 99442 to 99213 and 99443 to 99214. The increase will be automatically made to March 1 dates of service. These codes are reported for medical discussion with the physician and should not be used for administrative or other non-medical discussion with the patient. Learn more at <a href="https://www.aao.org/eye-on-advocacy-article/cms-regulatory-relief-bolsters-telehealth-service">https://www.aao.org/eye-on-advocacy-article/cms-regulatory-relief-bolsters-telehealth-service</a>.)
- E-visit codes 99421-99423 include up to seven days cumulative time. Not to be used for scheduling appointments or conveying test results.
- Evaluation of Video or Images code G2010 should be used for remote evaluation of recorded video and/or images submitted by a new or established patient (e.g., store and forward), including interpretation with follow-up with the patient within 24 business hours, not originating from a related E/M service provided within the previous seven days nor leading to an E/M services or procedure within the next 24 hours or soonest available appointment. G2010 and G2012 may be submitted the same day.

# Option 1: Telehealth Virtual Two-Way Communication Between Physician and Patient

• Level of exam is based on either physician total time on the date of the encounter (listed below) or medical decision making (MDM) during the PHE.

CPT Code New Patient	Level of MDM	Time	Modifier	Place of Service
99201	Straightforward	10 min	95	11
99202	Straightforward	20 min	95	11
99203	Low	30 min	95	11
99204	Moderate	45 min	95	11
99205	High	60 min	95	11

#### **Eye Visit Codes**

CPT Code	Description	Modifier	Place of Service
92002	New patient Intermediate exam	95	11
92004	New patient Comprehensive Exam	95	11

CPT Code Established Patient	Level of MDM	Time	Modifier	Place of Service
99211	Doesn't qualify	5 min	95	11
99212	Straightforward	10 min	95	11
99213	Low	15 min	95	11
99214	Moderate	25 min	95	11
99215	High	40 min	95	11

### **Eye Visit Codes**

CPT Code	Description	Modifier	Place of Service
92012	Established patient Intermediate exam	95	11
92014	Established patient Comprehensive Exam	95	11

## **Option 2: Physician/Patient Phone Calls**

CPT Code	Time	Modifier	Place of Service
G2012	5-10 min	N/A	11
99441	5-10 min	N/A	11
99442	11-20 min	N/A	11
99443	21-30 min	NJ/A	11

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**Option 3: E-Visits for Online Digital Services** 

CPT code	Time	Modifier	Place of Service
99421	5-10 min	N/A	11
99422	11-20 min	N/A	11
99423	21 or more min	N/A	11

# **Option 4: Evaluation of Video or Images**

CPT code	Description	Modifier	POS
G2010	Remote evaluation of recorded video and/or images submitted by a new or established patient (e.g., store and forward), including interpretation with follow-up with the patient within 24 business hours	N/A	11