<table>
<thead>
<tr>
<th></th>
<th>State Coverage TMB</th>
<th>Medicare*</th>
<th>Medicaid/Medicaid Managed Care - Telemedicine**</th>
<th>Medicaid/Medicaid Managed Care - Telehealth**</th>
</tr>
</thead>
</table>
| **Distant-Site Providers** | Physician or health professional acting under the delegation and supervision of a physician licensed in Texas | Physicians  
Nurse practitioners  
Physician assistants  
Nurse-midwives  
Clinical nurse specialists  
Certified registered nurse anesthetists  
Clinical psychologists and social workers  
Registered dietitians and nutrition professionals | Physician  
CNS  
NP  
PA  
CNM | Licensed professional counselor  
Licensed marriage and family therapist  
Licensed clinical social worker  
Psychologist  
Licensed psychological associate  
Provisionally licensed psychologist  
Licensed dietitian |
| **Originating Sites** | Any originating site requirement that would apply is now waived | Physician and practitioner offices  
Hospitals  
Critical access hospitals (CAHs)  
Rural health clinics  
Federally qualified health centers  
Hospital-based or CAH-based renal dialysis centers  
Skilled nursing facilities  
Community mental health centers  
Mobile stroke units  
Patient homes  
*Any originating site requirement that would apply is now waived | Does not use "originating site"  
References Patient Site where the client is physically located (Patient’s home is an approved POS)  
*Any originating site requirement that would apply is now waived | Does not use "originating site"  
References "patient site" – where the client is physically located (Patient’s home is an approved POS)  
*Any originating site requirement that would apply is now waived |
| **CPT** | Telemedicine: 99201-99205; 99211-99215  
Telephone specific E/M: 99441-99443 | Common telehealth codes include: 99211-99215, G0425-G0427, G0406-G0408  
Virtual Check-ins: G2010, G2012  
*New and established  
evVisits: 99431, 99422-99423, G2061-G2063  
Telephone/Audio-only: 99441-99443 (physician); 98966-98968 (nonphysician)  
Refer to the full list of codes at: www.cms.gov/Medicare/Medicare-General-Information/Telehealth/Telehealth-Codes.html | 90791, 90792, 90832-90834, 90836-90838, 90951, 90952, 90954, 90955, 90957, 90958, 90960, 90961, 99201-99205*, 99211-99215*, 99241-99245, 99251-99255, 99354-99357, G0406-G0408, G0425-G0427, G0459  
* Telephone encounters; payments will be the same as currently paid via Medicaid FFS | 90791, 90792, 90832-90834, 90836-90838, 90951, 90952, 90954, 90955, 90957, 90958, 90960, 90961, 97802-97804, 99201-99205*, 99211-99215*, 99241-99245, 99251-99255, S9470  
* Telephone encounters; payments will be the same as currently paid via Medicaid FFS |
| **COVID-19 Testing Codes *Covid Expansion*** | U0001, U0002  
Can use 87635 if accepted by the health plan | U0001, U0002  
*New as of 3/31/2020:  
• B2023 - Specimen collection for severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), any specimen source  
• B2024 - Specimen collection for severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), from an individual in a skilled nursing facility or by a laboratory on behalf of a home health agency, any specimen source | U0001, U0002  
*Telephone encounters; payments will be the same as currently paid via Medicaid FFS |

**Modifiers**
- 95

**POS**
- 02

Based on the location the physician or other qualified healthcare provider is providing services from, i.e.:  
Physician Office-11  
Outpatient-22
<table>
<thead>
<tr>
<th>State Coverage</th>
<th>TMB</th>
<th>Medicare*</th>
<th>Medicaid/Medicaid Managed Care - Telemedicine**</th>
<th>Medicaid/Medicaid Managed Care - Telehealth**</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation</td>
<td></td>
<td>Standards do not change! Include: relevant findings, tests ordered, treatment recommendations, and consent. MR must be complete to support billing for services.</td>
<td>Standards do not change! Include: relevant findings, tests ordered, treatment recommendations, and consent. MR must be complete to support billing for services.</td>
<td>Standards do not change! Include: relevant findings, tests ordered, treatment recommendations, and consent. MR must be complete to support billing for services.</td>
</tr>
<tr>
<td>Cost Share <em>COVID Expansion</em></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Resource(s)</td>
<td></td>
<td>MLN Telehealth Services Booklet</td>
<td>Medicaid Provider Manual</td>
<td>Medicaid Provider Manual</td>
</tr>
<tr>
<td>Resource(s)</td>
<td></td>
<td>CMS Flexibilities to Fight COVID-19</td>
<td>HTW and Family Planning Program</td>
<td>HTW and Family Planning Program</td>
</tr>
<tr>
<td>Covid Expansion Resources</td>
<td></td>
<td>TMB FAQ on Telemedicine</td>
<td>Medicare Telemedicine Fact Sheet</td>
<td>Medicaid Provider Manual</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Medicaid Provider Manual</td>
<td>Medicaid Provider Manual</td>
</tr>
</tbody>
</table>

* Rules for Medicare Advantage Plans differ  **Medicaid splits telemedicine and telehealth into separate sections

POS 02 = Place of service where health services are provided via a telecommunications system (replaced GT in 2018)

Note: This Telemedicine Quick Reference Chart provides summary telemedicine payer information obtained on April 9, 2020, from the resources linked with this document. The COVID-19 emergency funding bill allows the DHHS Secretary to waive geographic and POS restrictions; TMA is awaiting guidance. Caution: The payer policies summarized are subject to change at any time. Consult with each payer for specific information and requirements on current policies before proceeding. TMA will update as new information becomes available.
<table>
<thead>
<tr>
<th>Distant-Site Providers</th>
<th>Aetna</th>
<th>UnitedHealthcare</th>
<th>Humana</th>
<th>BCBSTX</th>
<th>Cigna</th>
</tr>
</thead>
</table>
| Information not available | Physicians  
Nurse practitioners  
Physician assistants  
Nurse-midwives  
Clinical nurse specialists  
Certified registered nurse anesthetists  
Clinical psychologists and social workers  
Registered dietitians and nutrition professionals | Physicians  
Nurse practitioners  
Physician assistants  
Nurse midwives  
Certified nurse anesthetists  
Clinical psychologists and social workers  
Registered dietitians and nutrition professionals | *Follow CMS  
physicians  
nurse practitioners  
physician assistants  
nurse midwives  
certified nurse anesthetists  
clinical psychologists  
clinical social workers  
registered dietitians  
nutrition professionals | Information not available | Information not available |
| Originating Sites | *Any originating site requirement that would apply is now waived | Physician and practitioner offices  
Hospitals  
Critical access hospitals (CAHs)  
Rural health clinics  
Federally qualified health centers  
Hospital-based or CAH-based renal dialysis centers  
Skilled nursing facilities  
Community mental health centers  
Mobile stroke units  
Patient homes for ERSD dialysis  
*Any originating site requirement that would apply is now waived | Follow CMS or state-specific guidelines  
Members that do not have access to secure video systems, audio-only visits are accepted | Information not available | *Any originating site requirement that would apply is now waived |
| CPT | All eligible including HCPCS codes: 0188T, G0406, G0425, G0459, G0508, G3014, S9110, T1014  
*Audiovisual: G2061-G2063; 99421-99423  
Audiovisual OR Telephone: G2010, G2012, 98966, 98967, 98968, 99441, 99442, 99443  
**For complete list refer to resources link below** | All services recognized by CMS and AMA in addition to 96040, 98960-98962, 99408-99409, 99499  
*Common telehealth codes include: 99211-99215, G0425-G0427, G0406-G0408  
Virtual Check-ins: G2010, G2012  
eVisits: 99422-99423, G2061-G2063  
**99201-99215 can be used for audio-only visits | All telehealth, telemedicine, interprofessional telephone, or internet assessment and management services except 99444 and 98969 | Refer to the CPT codebook | Virtual Screening telephone consult: G2012  
Virtual or face-to-face visit: 99201-99215  
Refer to link below for specific guidance.  
*Will comply with all state mandates as applicable* |
| COVID-19 Testing Codes *Covid Expansion* | Are complying with CMS coding guidelines  
U0002, 87635 | U0001, U0002, 87635 | U0001, U0002 | U0002 | U0001, U0002, 87635 |
<p>| Modifiers | 95 | 95 | 95 | 95 | GQ,CR |
| POS | 02 | 02 | 02 | 02 | POS normally billed (NOT 02) |</p>
<table>
<thead>
<tr>
<th>Documentation</th>
<th>Aetna</th>
<th>UnitedHealthcare</th>
<th>Humana</th>
<th>BCBSTX</th>
<th>Cigna</th>
</tr>
</thead>
<tbody>
<tr>
<td>Standards do not change! Include: relevant findings, tests ordered, treatment recommendations, and consent. MR must be complete to support billing for services.</td>
<td>Standards do not change! Include: relevant findings, tests ordered, treatment recommendations, and consent. MR must be complete to support billing for services.</td>
<td>Standards do not change! Include: relevant findings, tests ordered, treatment recommendations, and consent. MR must be complete to support billing for services.</td>
<td>Standards do not change! Include: relevant findings, tests ordered, treatment recommendations, and consent. MR must be complete to support billing for services.</td>
<td>Standards do not change! Include: relevant findings, tests ordered, treatment recommendations, and consent. MR must be complete to support billing for services.</td>
<td>Standards do not change! Include: relevant findings, tests ordered, treatment recommendations, and consent. MR must be complete to support billing for services.</td>
</tr>
<tr>
<td>Cost Share <em>COVID Expansion</em></td>
<td>Waiving member cost care-Do not collect</td>
<td>Waiving member cost care-Do not collect</td>
<td>Waiving member cost care-Do not collect</td>
<td>Waiving member cost care-Do not collect</td>
<td>Waiving member cost share-COVID related only</td>
</tr>
<tr>
<td>Resource(s)</td>
<td>Aetna Claims Payment Policy</td>
<td>UHC Telehealth and Telemedicine Policy</td>
<td>Humana Claims Payment Policy</td>
<td>BCBSTX Clinical and Coding Policy</td>
<td>Cigna’s Response to COVID-19</td>
</tr>
<tr>
<td>Resource(s)</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td>Covid Expansion Resources</td>
<td>Aetna COVID FAQ</td>
<td>UHC COVID-19 Information &amp; Resources</td>
<td>Humana Coronavirus</td>
<td>BCBS Telemedicine Coverage Expansion</td>
<td></td>
</tr>
</tbody>
</table>

Modifiers

<table>
<thead>
<tr>
<th>Modifier</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>95</td>
<td>Synchronous Telemedicine Service Rendered Via Real-Time Interactive Audio and Video</td>
</tr>
<tr>
<td>GT</td>
<td>Via interactive audio and video telecommunication systems</td>
</tr>
<tr>
<td>GQ</td>
<td>Via asynchronous telecommunications system</td>
</tr>
<tr>
<td>CR</td>
<td>catastrophe/disaster related</td>
</tr>
</tbody>
</table>

© 2020 Texas Medical Association. All rights reserved. TMA gratefully acknowledges the Texas Medical Association Special Funds Foundation for its support of this document using funds awarded by The Physicians Foundation.