

REIMBURSEMENT POLICY	
Policy Name:	Telemedicine Services
Policy Number:	PI-010
Original Effective Date:	07/31/2018
Annual Approval Date:	01/01/2022
Products:	Pennsylvania HealthChoices Medical Assistance

Disclaimer

Highmark Wholecare medical claims payment and prior-authorization policy is a reference resource regarding payment and coverage for the services described. This policy does not constitute medical advice and is not intended to govern and/or otherwise influence medical necessity decisions.

POLICY SCOPE

This policy applies to claims submitted to Highmark Wholecare under the Health Choices Medical Assistance product.

Billing and Reimbursement for Professional Services Furnished Via Telemedicine

Submit claims for Telemedicine Services using the appropriate CPT or HCPCS code for the professional service.

For Federal telemedicine demonstration programs in Alaska or Hawaii, submit claims using the appropriate CPT or HCPCS code for the professional service along with the telemedicine modifier GQ if you performed telemedicine services “via an asynchronous telecommunications system” (for example, 99211 GQ). By coding and billing the GQ modifier, you are certifying that the asynchronous medical file was collected and transmitted to you at the distant site from a Federal telemedicine demonstration project conducted in Alaska or Hawaii.

As of January 1, 2018, the GT modifier is no longer required for Telemedicine Services. An exception would be for services billed under Critical Access Hospital (CAH) method II

on institutional claims, the GT modifier is still required. Use of Place of Service (POS) 02 (Telehealth: The location where health services and health related services are provided

or received, through telehealth telecommunication technology) certifies that the service meets Telemedicine requirements.

POLICY SOURCES

American Medical Association, *Current Procedural Terminology (CPT)*

American Medical Association, *HCPCS Level II Professional Edition*

CMS, *MLN Booklet, Telehealth Services, MLN901705, June 2021*

<https://go.cms.gov/mln-telehealth-services-icn901705>

CMS, *MLN Matters, Elimination of the GT Modifier for Telehealth Services, MM10152, November 29, 2017* <https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/downloads/MM10152.pdf>

Highmark Wholecare, *Provider Policy and Procedure Manual, Telemedicine*

<https://highmarkwholecare.com/Provider/Medicaid-Resources/Medicaid-Provider-Forms-and-Reference-Materials>

Medicaid.gov, *Telemedicine*

<https://www.medicaid.gov/medicaid/benefits/telemed/index.html>

Policy History

Date	Activity
07/31/2018	Initial effective date
02/01/2021	Reviewed with no changes
01/01/2022	Updated policy source links