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Medicaid Managed Care

Provider Bulletin
April 2022

HEDIS Telehealth Eligible Measures Coding Bulletin

Before providing telehealth services to Clear Health Alliance (CHA) members, ensure that telehealth is listed within your contracted scope of services with CHA.

Per NCQA, there are three modalities for delivery of telemedicine services:
1. **Synchronous telehealth**: real-time, two-way audio-visual communications via a technology platform such as Webex or Zoom
   Note: Synchronous telehealth visits, telephone visits and asynchronous telehealth (e-visits, virtual check-ins) are considered separate modalities for HEDIS® reporting.
2. **Telephonic visits**: exchange of communication via a live telephone call
3. **Asynchronous telehealth**: two-way communication but not real-time such as secure messaging or email

The following is a list of HEDIS measures, which are eligible for provider gap closure through telehealth services:
- Adherence to Antipsychotic Medications for Individuals with Schizophrenia (SAA)
- Antibiotic Utilization for Respiratory Conditions (AXR)
- Antidepressant Medication Management (AMM)
- Appropriate Testing for Pharyngitis (CWP)
- Appropriate Treatment for Upper Respiratory Infection (URI)
- Asthma Medication Ratio (AMR)
- Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis (AAB)
- Blood Pressure Control for Patients With Diabetes (BPD)
- Breast Cancer Screening (BCS)
- Cardiac Rehabilitation (CRE)
- Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia (SMC)
- Child and Adolescent Well-Care Visits (WCV)
- Colorectal Cancer Screening (COL)
- Controlling High Blood Pressure (CBP)
- Diabetes Monitoring for People With Diabetes and Schizophrenia (SMD)
- Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD)
- Eye Exam Performed for Patients With Diabetes (EED)
- Follow-Up After Emergency Department Visit for Substance Use (FUA)
- Follow-Up After Emergency Department Visit for Mental Illness (FUM)
- Follow-Up After Emergency Department Visit for People with Multiple High-Risk Chronic Conditions (FMC)
- Follow-Up After High Intensity Care for Substance Use Disorder (FUI)

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- Follow-Up After Hospitalization for Mental Illness (FUH) (follow-up visit must be provided by a BH provider and may include telehealth services)
- Follow-Up Care for Children Prescribed ADHD Medication (ADD) (one of two visits can be a conducted via telephone or utilizing telehealth technology)
- Hemoglobin A1c Testing & Control for Patients With Diabetes (HBD)
- Diagnosed Substance Use Disorders (DSU)
- Initiation and Engagement of Substance Use Disorder Treatment (IET)
- Kidney Health Evaluation for Patients with Diabetes (KED)
- Mental Health Utilization (MPT)
- Persistence of Beta-Blocker Treatment After a Heart Attack (PBH)
- Plan All-cause Readmissions (PCR)
- Prenatal and Postpartum Care (PPC)
- Statin Therapy for Patients With Cardiovascular Disease (SPC)
- Statin Therapy for Patients With Diabetes (SPD)
- Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP)
- Use of Imaging for Low Back Pain (LBP)
- Use of Spirometry Testing in the Assessment and Diagnosis of COPD (SPR)
- Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC)
- Well-Child Visits in the First 30 Months of Life (W30)

When billing for these services, follow the same process for billing office-based services, but also include the telehealth modifier(s).

Required modifier	Code	Detail
Telehealth modifier	95	Telemedicine service rendered via a real-time interactive audio and video telecommunications systems The CPT® codes listed in *Appendix P* are for services that are typically performed face-to-face, but may be rendered via a real-time (synchronous) interactive audio-visual telecommunication system.
Telehealth modifier	GT	Via interactive audio and telecommunications systems Modifier **GT** is used with services provided via synchronous telemedicine for which Modifier **95 cannot be used**.
Required place of service (POS)	**Code**	**Detail**
Telehealth POS	02	The location where health services and health-related services are provided or received, through telehealth telecommunication technology. When billing telehealth services, providers must bill with place of service code **02** and continue to bill Modifier **95** or **GT**.

Billing codes-CPT	Detail
Telephonic visits	
99441	Phone call with physician 5 to 10 minutes of medical discussion
99442	Phone call with physician 11 to 20 minutes of medical discussion
99443	Phone call with physician 21 to 30 minutes of medical discussion
98966	Phone call with physician extender 5 to 10 minutes of medical discussion

98967	Phone call with physician extender 11 to 20 minutes of medical discussion
98968	Phone call with physician extender 21 to 30 minutes of medical discussion
Asynchronous telehealth	
98970	Qualified non-physician healthcare professional online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 5 to 10 minutes
98971	Qualified non-physician healthcare professional online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 11 to 20 minutes
98972	Qualified non-physician healthcare professional online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 21 or more minutes
99421	Online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 5 to 10 minutes
99422	Online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 11 to 20 or more minutes
99423	Online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 21 or more minutes
99457	Remote physiologic monitoring treatment management services, 20 minutes or more of clinical staff/physician/other qualified healthcare professional time in a calendar month requiring interactive communication with the patient/caregiver during the month
Billing codes-HCPCS	**Detail**
G0071	Payment for communication technology-based services for 5 minutes or more of a virtual (non-face-to-face) communication between an rural health clinic (RHC) or federally qualified health center (FQHC) practitioner and RHC or FQHC patient, or 5 minutes or more of remote evaluation of recorded video and/or images by an RHC or FQHC practitioner, occurring in lieu of an office visit; RHC or FQHC only
G2010	Remote evaluation of recorded video and/or images submitted by an 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 7 days nor leading to an E&M service or procedure within the next 24 hours or soonest available appointment
G2012	Brief communication technology-based service (e.g., virtual check-in, by a physician or other qualified healthcare professional who can report evaluation and management services) provided to an established patient, not originating from a related E&M service provided within the previous 7 days nor leading to an E&M service or procedure within the next 24 hours or soonest available appointment; 5 to 10 minutes of medical discussion

Disclaimer: The information presented in this bulletin does not guarantee reimbursement, benefit coverage, or payment for services.

What if I need assistance?

If you have questions about this communication or need assistance with any other item, contact your local Provider Relations associate or call Provider Services at **844-405-4296**.

Email is the quickest and most direct way to receive important information from Clear Health Alliance.

To start receiving email from us (including some sent in lieu of fax or mail), submit your information using the QR code to the right or via our online form (**https://bit.ly/2ZoU8so**).