

Telehealth Billing Basics

1. Telemedicine Coding

Modifiers: Most payers require the use of a telehealth modifier. Providers should confirm this with each payer. Providers should inquire whether the payer utilizes GT or 95 modifier for telebehavioral health services.

- **GT:** The GT modifier tells the payer that a provider delivered service via synchronous telemedicine. GT is the most common telehealth modifier and can be paired with any CPT code.
- **95:** The 95 modifier tells the payer that a provider delivered service via synchronous telemedicine. Similar to GT, but there are limits to the codes that GT can be applied to. 95 can only be applied to codes listed in appendix P of CPT manual (including behavioral health treatment).
- **GQ:** The GQ modifier tells the payer that a provider delivered services via asynchronous telemedicine.

Note: Some funders are not set up to recognize these modifiers.

Facility Fee/Telehealth Transmission Fee:

- **Q3014:** billed on a separate line item. Billed once per transmission (untimed code). Billed under facility (box 24J) along with place of service 11 “office”.
 - MUE exists limiting use to 1 unit per day
 - Some funders have authorized use of more than one unit per day.
 - If billing multiple units per day, Q3014 must be billed on a separate line item.
 - Additionally, some funders require use of the “XE” modifier next to all consecutive Q3014 codes billed indicating a separate service.
- **T1014:** billed on a separate line item. Billed one unit per minute (1-min code).



Place of Service: Place of Service “2” represents place of service: telehealth. This would be paired with codes billed by the telehealth provider (and would be paired with the facility fee/telehealth transmission code).

Note: Some funders are not set up to recognize POS 2.

	Originating Site / Hosting Facility	Distance (Telehealth) Provider
Location / Other Terms	Originating Site Site where patient is present Site where RBT is present	Distance/Remote Site Site where Telehealth Provider is Located
Place of Service	03 (school) 11 (office) 12 (home), etc.	02
Billing	Codes representing services rendered by on-site provider	Codes representing services rendered by distance provider

2. Major private payers all cover telemedicine, but that coverage can be policy dependent.

3. Always verify that the patient’s insurance covers telemedicine beforehand.

Eligibility Verification Review

- Pair ABA Codes with Place of Service 2 (Telehealth)
- Pair ABA Codes with Telehealth Modifiers
- Inquire about coverage of code Telehealth Transmission codes

4. Know the telemedicine guidelines for each payer

- Which providers can bill for telemedicine?
- What components of service can be performed via telemedicine?
- Is telehealth coverage limited to synchronous (real-time) delivery?
- Are there any restrictions or conditions that need to be met before a patient qualifies for telemedicine (e.g. patient consent in writing)



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- Does the Insurer require a Telehealth Amendment or Attestation to be signed by the Provider Organization?
- Does the Insurer require addition of the telehealth transmission code to contract (if covered)?