



Professional Provider Report

A newsletter for professional providers
and their staff members

March 20, 2020 • S-3-20

Telehealth Services Temporarily Expanded

Blue Cross and Blue Shield of Kansas (BCBSKS) continues to be committed to the health and safety of our members and communities that we serve. We also want to support your tireless efforts to address the coronavirus (COVID-19) outbreak. Because of the public health emergency, BCBSKS is temporarily expanding the situations in which the use of telehealth technology is acceptable to use. This expansion will include doctors and other health care providers for the diagnosis and treatment of COVID-19, as well as other conditions that are medically reasonable to be treated in this manner.

Here is a summary and detailed guidance on the temporary measures we are taking in conjunction with our commercial

The *Professional Provider Report* is published by the Professional Relations department of Blue Cross and Blue Shield of Kansas.

Dustin Kimmel,
Communications Coordinator

members who have telehealth benefits. These measures will remain in effect for a 60-day period, starting March 16, 2020. At that time, they will be re-evaluated for possible extension.

Expanded Temporary Telehealth Measures — Effective March 16, 2020

Visits to providers that can be performed virtually will be paid at the same rate as an in-person office visit as long as the service is medically necessary, meets the criteria listed below, and occurs on or after March 16, 2020 during the temporary period.

- These temporary measures include medically reasonable virtual care encounters performed in lieu of in-person visits to outpatient clinics,

hospitals, and emergency departments. This applies to all contracting provider types, not just those listed in the current BCBSKS policy applicable to virtual encounters.

- Telehealth services are limited to those which are patient initiated. Provider initiated services are not eligible for telehealth.
- Telehealth services are not limited to only COVID-19, but can include other medically necessary services that are medically reasonable to be performed through telehealth.
- For providers or members who don't have access to secure video systems, telephone (audio-only) visits can be used for the

Please see **TELEHEALTH**, page 2



BlueCross BlueShield
Kansas

bcbsks.com



TELEHEALTH: Defining an e-Visit

Continued from page 1

virtual visit. Please use both Telehealth as Place of Service (02) and GT modifier for audio-only visits.

- BCBSKS members can also contact American Well as a virtual care benefit. Federal Employee Program (FEP) members can only access virtual care through the Teledoc service. Teledoc offers both video or audio virtual services. You can view COVID-19 benefits for the Federal Employee Program [here](#).
- There will be no member cost-share. The administration of no member cost-share will be handled at the claim processing level. Member benefits will not be changed in the system. Therefore, if you look at member benefits on Availity or perform a 270/271 transaction, member benefits will still show a cost share as applicable. In addition, claims processed since March 16, 2020 where a member cost share was applied will be adjusted.

When billing telehealth services, the place of service 02 and GT modifier should be used. The standard telehealth CPT code 99422 can generally be used for most telehealth services;

however, the most appropriate code for the service provided should be billed. For e-visits the following should be used as appropriate:

CPT code 99421: Online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 5-10 minutes

CPT code 99422: Online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 11-20 minutes

CPT code 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

What is an e-visit?

The 2020 MPFS describes e-visits as non-face-to-face “patient-initiated digital communications that require a clinical decision that otherwise typically would have been provided in the office.” The descriptors further suggest that the codes are intended to cover short-term (“up to seven days”) evaluations and assessments that are conducted online or via some other digital platform, and also likely include any associated

interpretation and clinical decision making.

Telehealth shall be provided by means of real-time two-way interactive audio, visual, or audio-visual communications, including the application of secure video conferencing or store-and-forward technology to provide or support healthcare delivery, that facilitate the assessment, diagnosis, consultation, treatment, education and care management of a patient’s health care. Please review guidance issued by HHS and OCR on telehealth communications during the COVID public health emergency issued March 17, 2020 at: <https://www.hhs.gov/hipaa/for-professionals/special-topics/emergency-preparedness/notification-enforcement-discretion-telehealth/index.html>.

Telephone calls and web-based correspondence are content of service when billed with another service on the same day.

For more information on telehealth, see [Policy Memo No. 2](#), contact your professional relations representative or Provider Network Services in Topeka at 785-291-4135 or 800-432-3587. We will continue to monitor this dynamic situation and will communicate any new or updated information as it is available.