

Last Updated: 04/23/20 Contact: advocacy@apta.org

COMMERCIAL PAYER TELEHEALTH OR E-VISITS COVERAGE

As things rapidly develop regarding the COVID-19 pandemic, payer policies around telehealth are continuously evolving. Below is a summary of the status of commercial payers that are covering some form of telehealth or e-visits, based on information they have released. The information is current as of the "Date Updated" for each payer, and APTA will continue to make weekly updates when new information is confirmed. This a summary only; refer to your payer policies for the most accurate and current information and for additional contractual, coding, and billing guidance.

Payer	Details	Reference	Date Updated
Aetna	Aetna will allow PTs to bill e-visits only (not telehealth) using either G2061-G2063 or 98970-98972. Providers must comply with all of the requirements associated with billing e-visits. 4/1/2020: Aetna will cover the telehealth-based delivery of the services and procedures by PTs for CPT codes 97161, 97162, 97163, 97164, 97110, 97112, 97116, 97535, 97755, 97760, and 97761. The telehealth care must be provided as a two-way synchronous (real-time) audiovisual service. Providers are required to append the GT modifier to the codes. 4/3/2020: Aetna advised that telehealth services delivered by physical therapists may be billed on a UB04 using the modifier GT or 95. 4/22/2020: Aetna would require no copay on telemedicine visits for any reason for 90 days—and would allow PTs to bill for e-visits consistent with the recent e-visit waiver policy announced by CMS, retroactive to March 9. The Aetna e-visit approach is slightly different from the CMS system, allowing PTs to bill for either CPT codes associated with evaluation and management (98970, 98971, 98972) or HCPC codes for assessment and management (G2061, G062, and G2063). CMS only allows PTs to bill for the G codes. Provider page for updates and changes.	https://www.aetna.com/health-care- professionals.html	4/22/2020

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American Specialty Health	American Specialty Health released a telehealth policy that applies to its Cigna business in varied regions of the country. This impacts ASH- contracted providers in CA, TX, NV, AZ, FL, southeast, northeast, and mid-Atlantic. Effective dates March 2 through May 31, 2020.	Following CIGNA guidelines	4/6/2020
AmeriHealth (PA, NJ, and NH)	In addition to the existing telemedicine services coverage, telemedicine services are eligible for reimbursement consideration by the company when all criteria are met: The service is medically necessary, is capable of being delivered through an interactive telecommunications system, and, as specifically outlined in the policy, is provided through the company's network of eligible providers in the following disciplines: Physical therapy Occupational therapy Speech therapy Home care Skilled nursing for remote patient monitoring which must include capabilities that include monitoring vital signs and weight Physical therapy Occupational therapy Speech therapy Medical nutrition therapy Social services	http://medpolicy.amerihealth.com/pol icies/mpi.nsf/589af45da2d92902852 575080056bc3a/205877c3594eadaf 8525853b00700fb9!OpenDocument http://medpolicy.amerihealth.com/pol icies/mpi.nsf/589af45da2d92902852 575080056bc3a/7982e451391e36b0 852585490077c218!OpenDocument	3/20/2020
Anthem Blue Cross - CA	Chiropractic services and PT, OT, and SLP require face-to-face interaction and therefore are not appropriate for telephone-only consultations. All Anthem contracted providers can provide telehealth services if clinically appropriate. For telehealth services, providers should bill the same CPT codes that they would normally bill for in-person visits, with modifier GT and POS code 02.	https://providernews.anthem.com/cal ifornia/article/information-from- anthem-for-care-providers-about- covid-19-5	4/1/2020
Anthem BCBS - Colorado	 For 90 days effective March 17, 2020, Anthem will waive member cost shares for telehealth visits for the following PT, OT, and SLP for visits coded with POS "02" and modifier 95 or GT: PT evaluation codes 97161, 97162, 97163, 97164 PT/OT treatment codes 97110, 97112, 97530, 97535 For telehealth services rendered by a facility provider, report the CPT/HCPCS code with the applicable 	https://providernews.anthem.com/col orado/article/information-from- anthem-for-care-providers-about- covid-19-updated-march-20-2020	4/8/2020

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	revenue code as would normally be done for an in-person visit, and also append either modifier 95 or GT.		
Anthem BCBS – Connecticut	For 90 days effective March 17, 2020, Anthem will waive member cost shares for telehealth visits for physical therapy for visits coded with Place of Service (POS) "02" and modifier 95 or GT: Physical therapy (PT) evaluation codes 97161, 97162, 97163 and 97164. PT treatment codes 97110, 97112, 97530 and 97535. PT codes that require equipment and/or direct physical hands-on interaction and therefore are not appropriate via telehealth include: 97010-97028, 97032-97039, 97113-97124, 97139-97150, 97533 and 97537-97546. For telehealth services rendered by a facility provider, report the CPT/HCPCS code with the applicable revenue code as would normally be done for an in-person visit, and also append either modifier 95 or GT.	https://providernews.anthem.com/co nnecticut/article/information-from- anthem-for-care-providers-about- covid-19-3	4/22/20
Anthem BCBS- Georgia	For 90 days effective March 17, 2020, Anthem will waive member cost shares for telehealth visits for the following physical, occupational and speech therapies for visits coded with POS "02" and modifier 95 or GT: Physical therapy evaluation codes 97161, 97162, 97163, and 97164 Occupational therapy evaluation codes 97165, 97166, 97167, and 97168 PT/OT treatment codes 97110, 97112, 97530, and 97535 Speech therapy evaluation codes 92521, 92522, 92523, and 92524 ST treatment codes 92507, 92526, 92606, and 92609 PT/OT codes that require equipment and/or direct physical hands-on interaction and therefore are not appropriate via telehealth include: 97010-97028, 97032-97039, 9711397124, 97139 - 97150, 97533, and 97537-97546. For telehealth services rendered by a facility provider, report the CPT/HCPCS code with the applicable revenue code as would normally be done for an in-person visit, and also append either modifier 95 or GT.	https://anthempc-attachments- prod.s3.us-west- 2.amazonaws.com/pdf/articles/Infor mation%20from%20Anthem%20for %20Ca%20-%20ga4382.pdf	4/1/2020

Anthem BCBS - Indiana	For 90 days effective March 17, 2020, Anthem will waive member cost shares for telehealth visits for physical therapy for visits coded with Place of Service (POS) "02" and modifier 95 or GT: Physical therapy (PT) evaluation codes 97161, 97162, 97163 and 97164. PT treatment codes 97110, 97112, 97530 and 97535. PT codes that require equipment and/or direct physical hands-on interaction and therefore are not appropriate via telehealth include: 97010-97028, 97032-97039, 97113-97124, 97139-97150, 97533 and 97537-97546. For telehealth services rendered by a facility provider, report the CPT/HCPCS code with the applicable revenue code as would normally be done for an in-person visit, and also append either modifier 95 or GT.	https://providernews.anthem.com /indiana/article/information-from- anthem-for-care-providers-about- covid-19-6	4/22/2020
Anthem BCBS - Kentucky	For 90 days effective March 17, 2020, Anthem will waive member cost shares for telehealth visits for physical therapy for visits coded with Place of Service (POS) "02" and modifier 95 or GT: Physical therapy (PT) evaluation codes 97161, 97162, 97163 and 97164. PT treatment codes 97110, 97112, 97530 and 97535. PT codes that require equipment and/or direct physical hands-on interaction and therefore are not appropriate via telehealth include: 97010-97028, 97032-97039, 97113-97124, 97139-97150, 97533 and 97537-97546. For telehealth services rendered by a facility provider, report the CPT/HCPCS code with the applicable revenue code as would normally be done for an in-person visit, and also append either modifier 95 or GT.	https://providernews.anthem.com /kentucky/article/information- from-anthem-for-care-providers- about-covid-19-7	4/22/2020
Anthem BCBS - Maine	For 90 days effective March 17, 2020, Anthem will waive member cost shares for telehealth visits for physical therapy for visits coded with Place of Service (POS) "02" and modifier 95 or GT: Physical therapy (PT) evaluation codes 97161, 97162, 97163 and 97164. PT treatment codes 97110, 97112, 97530 and 97535. PT codes that require equipment and/or direct physical hands-on interaction and therefore are not appropriate via telehealth	https://providernews.anthem.com /maine/article/information-from- anthem-for-care-providers-about- covid-19-updated-march-19- 2020-1	4/22/2020

	include: 97010-97028, 97032-97039, 97113-97124, 97139-97150, 97533 and 97537-97546. For telehealth services rendered by a facility provider, report the CPT/HCPCS code with the applicable revenue code as would normally be done for an in-person visit, and also append either modifier 95 or GT.		
Anthem BCBS - Missouri	For 90 days effective March 17, 2020, Anthem will waive member cost shares for telehealth visits for physical therapy for visits coded with Place of Service (POS) "02" and modifier 95 or GT: Physical therapy (PT) evaluation codes 97161, 97162, 97163 and 97164. PT treatment codes 97110, 97112, 97530 and 97535. PT codes that require equipment and/or direct physical hands-on interaction and therefore are not appropriate via telehealth include: 97010-97028, 97032-97039, 97113-97124, 97139-97150, 97533 and 97537-97546. For telehealth services rendered by a facility provider, report the CPT/HCPCS code with the applicable revenue code as would normally be done for an in-person visit, and also append either modifier 95 or GT.	https://anthempc-attachments- prod.s3.us-west- 2.amazonaws.com/pdf/articles/Inf ormation%20from%20Anthem%2 Ofor%20Ca%20- %20mo4425.pdf	4/22/2020
Anthem BCBS – New Hampshire	For 90 days effective March 17, 2020, Anthem will waive member cost shares for telehealth visits for physical therapy for visits coded with Place of Service (POS) "02" and modifier 95 or GT: Physical therapy (PT) evaluation codes 97161, 97162, 97163 and 97164. PT treatment codes 97110, 97112, 97530 and 97535. PT codes that require equipment and/or direct physical hands-on interaction and therefore are not appropriate via telehealth include: 97010-97028, 97032-97039, 97113-97124, 97139-97150, 97533 and 97537-97546. For telehealth services rendered by a facility provider, report the CPT/HCPCS code with the applicable revenue code as would normally be done for an in-person visit, and also append either modifier 95 or GT.	https://providernews.anthem.com /new- hampshire/article/information- from-anthem-for-care-providers- about-covid-19-updated-march- 19-2020-2	4/22/2020

Anthem BCBS - Nevada	For 90 days effective March 17, 2020, Anthem will waive member cost shares for telehealth visits for physical therapy for visits coded with Place of Service (POS) "02" and modifier 95 or GT: Physical therapy (PT) evaluation codes 97161, 97162, 97163 and 97164. PT treatment codes 97110, 97112, 97530 and 97535. PT codes that require equipment and/or direct physical hands-on interaction and therefore are not appropriate via telehealth include: 97010-97028, 97032-97039, 97113-97124, 97139-97150, 97533 and 97537-97546. For telehealth services rendered by a facility provider, report the CPT/HCPCS code with the applicable revenue code as would normally be done for an in-person visit, and also append either modifier 95 or GT.	https://providernews.anthem.com /nevada/article/information-from- anthem-for-care-providers-about- covid-19-updated-march-19-2020	4/22/2020
Anthem BCBS – Texas	Effective March 10: Providers of telemedicine/telehealth may include, but are not necessarily limited to: physical, occupational and speech therapists; 2-way, live interactive telephone communication and digital video consultations. BCBSTX will reimburse providers for medically necessary services delivered via telemedicine and billed on claims with appropriate modifiers (95, GT, GQ) and Place of Service 02 in accordance with the member's benefits for covered services.	https://www.bcbstx.com/provider/ pdf/tx_using_telemed_telehealth _covid19.pdf	4/22/2020
Anthem BCBS - Ohio	For 90 days effective March 17, 2020, Anthem will waive member cost shares for telehealth visits for physical therapy for visits coded with Place of Service (POS) "02" and modifier 95 or GT: Physical therapy (PT) evaluation codes 97161, 97162, 97163 and 97164. PT treatment codes 97110, 97112, 97530 and 97535. PT codes that require equipment and/or direct physical hands-on interaction and therefore are not appropriate via telehealth include: 97010-97028, 97032-97039, 97113-97124, 97139-97150, 97533 and 97537-97546. For telehealth services rendered by a facility provider, report the CPT/HCPCS code with the applicable revenue code as would normally be	https://providernews.anthem.com /ohio/article/information-from- anthem-for-care-providers-about- covid-19-9	4/22/2020

	done for an in-person visit, and also append either modifier 95 or GT.		
Anthem BCBS - Virginia	For 90 days effective March 17, 2020, Anthem will waive member cost shares for telehealth visits for physical therapy for visits coded with Place of Service (POS) "02" and modifier 95 or GT: Physical therapy (PT) evaluation codes 97161, 97162, 97163 and 97164. PT treatment codes 97110, 97112, 97530 and 97535. PT codes that require equipment and/or direct physical hands-on interaction and therefore are not appropriate via telehealth include: 97010-97028, 97032-97039, 97113-97124, 97139-97150, 97533 and 97537-97546. For telehealth services rendered by a facility provider, report the CPT/HCPCS code with the applicable revenue code as would normally be done for an in-person visit, and also append either modifier 95 or GT.	https://providernews.anthem.com/vir ginia/article/information-from- anthem-for-care-providers-about- covid-19-2	4/22/2020
Anthem BCBS - WI	Coverage of telehealth therapy evaluation only; does not include treatment. Claims should be billed with POS code 02, Modifier 95 or GT, and the appropriate CPT code. Anthem will cover the initial evaluation, which should be provided through a certified telehealth platform including video and audio. 4/1/2020: added PT/OT treatment codes 97110, 97112, 97530, and 97535	https://providernews.anthem.com/wi sconsin/article/information-from- anthem-for-care-providers-about- covid-19-10	4/15/2020
	4/15/2020: For 90 days effective March 17, 2020, Anthem will waive member cost sharing (copays, coinsurance, deductibles) for telehealth visits for the following for visits coded with POS "02" and modifier 95 or GT: PT evaluation codes 97161, 97162, 97163, and 97164 and PT treatment codes 97110, 97112, 97530, and 97535. PT codes that require equipment and/or direct physical hands-on interaction and therefore are not appropriate via telehealth include: 97010-97028, 97032-97039, 97113-97124, 97139-97150, 97533, and 97537-97546. Payment parity at contracted rates. For telehealth services rendered by a facility provider, report the		

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	CPT/HCPCS code with the applicable revenue code as would normally be done for an in-person visit, and also append either modifier 95 or GT.		
Arise Health Plans (WPS Solutions)	Eligible provider includes PT. Telehealth services must be submitted with POS 02 and appropriate corresponding modifier.	https://secure.wecareforwisconsin.co m/documents/Providers/Coverage% 20Policy%20Bulletins/Telehealth%2 0Telemedicine%20COVID- 19%20Temporary.pdf (see pages 2- 3)	3/23/2020
Avera Health Plans	Expanded telehealth codes, includes PT/OT/SLP, will be permitted during the period March 17-June 30. Expansion period will be evaluated in early June for potential extension, and code list may be subject to additional updates.	https://www.averahealthplans.com/in surance/providers/covid-resources/. For list of expanded codes go to https://www.averahealthplans.com/a pp/files/public/1607/COVID- TeleHealth-Codes.pdf	3/17/2020
BCBS- Alabama	As of April 3: BCBSAL added the following treatment codes: 97110, 97112, 97530, 97535 for Blue Advantage and commercial BCBS plans. PT/OT/SLP must be performed with audio AND visual technology. All Alabama Blue, new or established patients. BCBSAL-preferred physical therapy, occupational, and speech providers. Information on billing and documentation coming soon. Max therapy limits apply to telehealth services as they would in person.	https://providers.bcbsal.org/portal/do cuments/10226/306297/Telehealth+ Billing+Guide/b92b12c5-585f-471c- 5921-72465c49b16f	3/25/2020; Updated 4/3/2020
BCBS – Arkansas	PT telehealth covered; temporary changes apply exclusively to members of Arkansas Blue Cross and Health Advantage fully insured health plans. The changes are retroactive to April 1 and will be in effect through at least May 15, 2020, and could be extended after that, if circumstances warrant. Only the following codes will be reimbursed for telemedicine. Telephonic codes do not apply: PT— 97161, 97162, 97163, 97164, 97110, 97112, 97116, 97535	https://www.arkansasbluecross.com/ providers/medical- providers/providers-news	4/15/2020
BCBS – Kansas	Due to the public health emergency, BCBSKS is temporarily permitting hospital-based PT providers to bill for services provided virtually. To be eligible for coverage, it must be medically reasonable for such services to be provided using real- time, two-way audio and/or audio/visual communications. These services should be billed to BCBSKS with Revenue Code 0780. Therapists should report the CPT or HCPCS	https://www.bcbsks.com/CustomerS ervice/Providers/news/2020/2020- 03-20_telehealth-services- temporarily-expanded.shtml	4/14/2020

BCBS- Louisiana	code for services as if the patient presented at the hospital. No member cost share will be applied when services are billed with Revenue Code 0780.This expansion is effective April 13-May 31, 2020. At that time, BCBSKS will reevaluate the situation for a possible extension. Any credentialed network physical, occupational, or speech therapist can provide limited telehealth encounters to replace office visits. Therapy providers must adhere to telehealth guidelines. Therapy providers filing claims for telehealth should use standard office billing practices and CPT codes along with POS code 11 and Modifier GT or 95. Telehealth therapy services are limited to the following CPT codes: 97161, 97162, 97164, 97110, 97112, 97116, 97530, 97535, 97165, 97166, 97168, 92507, 92521, 92523, 92524, 92610, 96105, 92522, 92526. Claims will be paid using standard	https://files.constantcontact.com/de2 417c8101/b9f6ab6c-436f-43bd-98af- 55c581b03f6d.pdf	3/20/2020
	Claims will be paid using standard member cost shares.		
BCBS- Massachusetts	Reimburses contracted health care providers for covered, medically necessary telehealth (telemedicine) services. When you provide any telephonic services, do not bill the specific telephonic CPT codes. Bill all covered services that you render either by telehealth/video or telephone as if you are performing a face-to-face service using the codes that are currently on your fee schedule. You must use one of the following telehealth modifiers listed (GT, 95, G0, and GQ) and POS 02.	https://provider.bluecrossma.com/Pr oviderHome/portal/home/news/news /office-support (Click on COVID19 latest news)	3/19/2020
BCBS- Minnesota	Due to COVID 19 pandemic certain codes are temporarily added to the policy with a start date of 2/4/2020 for the duration of the national public health emergency. See the policy for list of codes.	https://www.bluecrossmn.com/health y/public/portalcomponents/PublicCo ntentServlet?contentId=P11GA_123 32836	2/4/2020
BCBS – Montana	Licensed therapy providers may perform covered medically necessary therapy services via telemedicine.	https://www.bcbsmt.com/provider/ed ucation-and- reference/news?lid=k8cxumar	4/7/2020
BCBS- Nebraska	A provider may bill therapy codes or telehealth codes and must use the modifier 95 and POS 02 for reimbursement. All codes will be covered at 100% of the provider's existing fee schedule.	https://www.nebraskablue.com/Provi ders/Alerts-and-Updates/Happening- Now	3/27/2020

BCBS – New		https://www.bobopm.com/provider/re	1/22/2020
Mexico	Providers submitting claims for telemedicine services using these codes must append with modifier 95. For now, ABA, physical therapy and other therapy services are not eligible for zero cost share.	https://www.bcbsnm.com/provider/ne ws/2020_03_30.html	4/22/2020
BCBS-North Carolina	Eligible providers: Providers performing and billing telehealth services must be eligible to independently perform and bill the equivalent face-to-face service.	https://www.bluecrossnc.com/sites/d efault/files/document/attachment/ser vices/public/pdfs/medicalpolicy/teleh ealth.pdf	3/18/2020
BCBS-Rhode Island	Temporary/Emergency Order: Allows PTs to file for clinically appropriate and medically necessary services using telemedicine/telehealth or telephonic services. Payment for telemedicine/telehealth or telephone- only encounters at 100% of the in- office allowable amount for any clinically appropriate services. Will temporarily waive the requirement, referenced in the Telemedicine/ Telehealth Services policy, that virtual encounter be performed on a HIPAA- compliant secure electronic communication platform. Services may be provided via the following non-HIPAA-compliant secure electronic communication applications that allow for video chats: Apple FaceTime/Facebook Messenger video chat/Google Hangouts video/Skype. The Modifier CR: Catastrophe/ Disaster Related is required in combination with services rendered. The following POS indicator is required for all telemedicine/ telehealth or telephone services: POS 02: Telehealth: The location where health services and health related services are provided or received, through telehealth telecommunication technology.	https://www.bcbsri.com/providers/sit es/providers/files/policies/2020/03/20 20%20Telemedicine%20Telehealth %20and%20Telephone%20Services %20-%20Temporary%20Policy%20- %20Effective%203.18.20%20- %20Update%203.27.pdf	3/27/2020
BCBS-South Carolina	In conjunction with the temporary expansion, PT/OT/SLP visits may be filed with certain criteria and modifier - 95. The following codes may be filed to reflect the services provided: 92507, 92521-92526, 97110, 97112, 97129, 97130, 97161-97168 and 97530. Providers will also need to submit an application for telehealth coverage. 4/1/2020: BCBS South Carolina updates Telehealth: Interim review related to expanded services during	https://web.southcarolinablues.com/ UserFiles/scblues/Documents/Provid ers/Medical%20Policies/Medical%20 Policy%20Updates_March%202020. pdf https://web.southcarolinablues.com/ UserFiles/scblues/Documents/Provid ers/Medical%20Policies/Medical%20 Policy%20Updates_March%202020. pdf	4/15/2020

	the COVID-19 pandemic to add	https://web.southcarolinablues.com/	
	codes 97168, 97110, 97112, and	UserFiles/scblues/Documents/Provid	
	97530.	ers/Medical%20Policies/Medical%20	
	In response to the recent coronavirus	Policy%20Updates_March%202020.	
	(COVID-19) outbreak, BCBS	pdf	
	reimbursement for all services		
	delivered through telehealth that meet		
	the coverage criteria in the policy.		
	The expansion supports the diagnosis		
	and treatment of COVID-19 as well as		
	minimizes unnecessary exposure to		
	individuals needing medical care for		
	other conditions. Reimbursement for		
	the expanded set of services		
	delivered through telehealth will be in		
	place for 30 days, starting March 16,		
	2020, and then will be reevaluated for		
	possible extension. Effective		
	04/09/2020, the expansion of		
	telehealth services has been		
	extended to 05/16/2020, with		
	reevaluation for possible extension on		
	or before 05/16/2020.		
	4/22/2020: Home health services and		
	hospice services: Effective		
	immediately 04-16-2020 a temporary		
	expansion of home health services		
	and hospice services will allow these		
	services to be provided via telehealth		
	when filed with a 95 modifier subject		
	to the member's benefits and		
	limitations during the COVID-19		
	pandemic : 99341¬99350, G0151-		
	G0155, G0159 G0162,		
	S9127¬S9131, G0299,		
	G0300,Q5001, S9123, S9124, T1030,		
	T1031, 92507, 92521¬92526, 97110,		
	97112, 97129, 97130, 97161¬97168		
	and 97530. Provider will also need to		
	submit an application for telehealth		
	coverage. Interim review to add		
	expanded telehealth coverage for		
	pediatric preventive medicine		
	services during the pandemic		
	4/22/2020: Preventive Pediatric:		
	interim review to remove U9 modifier		
	requirement for preventive pediatric		
	visit telehealth expansion for the		
	pandemic; replaced it with a		
	requirement to file modifier 95 with		
	those services. In conjunction with the		
	temporary expansion, speech,		
	physical and occupational therapy		
	visits may be filed with the above		
	criteria and modifier ¬95. The		
	following codes may be filed to reflect		
	the services provided: 92507,		
	92521¬92526, 97110, 97112, 97129,		
	97130, 97161¬97168 and 97530.		

	Providers will also need to submit an application for telehealth coverage."		
BCBS-Vermont	Temporary/Emergency Order: The list of eligible services includes physical and occupational therapy service. Go to link provided for list of eligible codes.	http://www.bcbsvt.com/wps/wcm/con nect/464cc2a8-c8df-46db-8934- e67d9c7fe39e/cpp-27-temporary-pt- ot-st-telemedicine-policy- 03.20.20.pdf?MOD=AJPERES	3/27/2020
Blue Shield- California	Providers who are contracted with Blue Shield should use the same billing codes for all professional and ancillary services for non-hands-on services, using the correct CPT codes, clearly documenting the services provided, and indicating an "02" for POS. Examples of common CPT codes that fall into this category: PT – 97110 OT – 97530 SP – 92507 Guidelines for ancillary services that can be offered remotely are also available from the CPT 2020 Professional Edition, AMA, Chicago 2020, page 40.	https://www.blueshieldca.com/bsca/b sc/wcm/connect/provider/provider_c ontent_en/guidelines_resources/tele health-virtual-care	3/23/2020
CareSource (OH, GA, KY, WV, IN)	All participating providers are eligible to render services to members following the fact sheet published by CMS in an effort to expand the telehealth benefit on a temporary and emergency basis under the 1135 waiver authority and Coronavirus Preparedness and Response Supplemental Appropriations Act	https://www.caresource.com/docume nts/oh-multi-p-83132-covid-19- temporary-telehealth-services-all- mp-oh-ma-oh-d-snp/	3/6/2020
CIGNA	 Updated 4/21/2020 PT providers can deliver virtual care for any service that is on their current fee schedule. The previous guidance that CMS also had to cover the service virtually was removed. PT providers will be reimbursed at their face-to-face rates when they submit claims for virtual services with a GQ, GT, or 95 modifier and a face-to-face place of service code (e.g. POS 11). Covered codes are now:97161-97168, 97110, 97112, 97116, 97535, 97750, 97755, 97760, 97761, 92521-92524, 92507 For providers billing services on a UB-04 claim form can provide those services virtually. The provider should bill as normal on the UB-04 claim with the appropriate revenue and 	https://static.cigna.com/assets/chcp/r esourceLibrary/medicalResourcesLis t/medicalDoingBusinessWithCigna/m edicalDbwcCOVID-19.html To keep up to date with rapidly changing information, please visit CignaforHCP.com often for the latest COVID-19 billing guidelines, FAQs, and important information. Click the COVID-19 banner across the top of the page.	4/9/2020

	 procedure code, and also append the GQ, GT, or 95 modifier. No specific software program is required at this time. Maintain current medical necessity review criteria for virtual care. State and federal mandates, and customer benefit plan designs may supersede any guidelines. 		
Emblem Health	List of codes allowed for telehealth services 4-3-2020. Page 11 - Temporary Payment Policy: Supplemental Telehealth Guidelines Physical therapy. For commercial and Medicare PT/OT/SLP provider visits, interactive real-time audio/video technology must be used. Append modifier GT or 95 to claims using the normal place of service where services are usually rendered.	https://protect- us.mimecast.com/s/tXxICIYXQNc29 WD5sGL- ER?domain=emblemhealth.com	4/15/2020
Empire BCBS	Commercial health plans. Medicare and Medicaid plans are included unless otherwise required under State and/or Federal mandates. Please review the Medicare and Medicaid specific sites noted above for details about these plans. What codes would be appropriate to consider for telemedicine (live video + audio via app) and telehealth (telephonic with video capability) for physical therapy. During the emergency period, Empire will waive member cost shares for telemedicine and telehealth visits for physical therapy for visits coded with Place of Service (POS) code 02 and modifier "95" or "GT": Physical therapy (PT) evaluation codes 97161, 97162, 97163 and 97164. Treatment codes 97110, 97112, 97530 and 97535. PT codes that require equipment and/or direct physical hands-on interaction and therefore are not appropriate via telehealth include: 97010-97028, 97032-97039, 97113-97124, 97139-97150, 97533 and 97537-97546.	https://providernews.empireblue.com /article/information-from-empire-for- care-providers-about-covid-19- updated-april-22-2020	4/22/2020
Excellus BCBS	Physical therapists: Teletherapy must meet the criteria set forth in our corporate medical policy. You can bill a non-MD phone only or non-MD video visit if you have a secure HIPAA-compliant portal.	https://provider.excellusbcbs.com/	3/17/2020
Geisinger Health Plan	Coverage of e-visit policy that includes PT.	https://www.geisinger.org/patient- care/for-professionals/telemedicine	3/20/2020

Hawaii Medical Service Association	 On April 1 HMSA's telehealth services were expanded to include therapy services, retroactive to dates of service beginning March 1 through the duration of the public health emergency. HMSA will temporarily allow physical therapists to bill for these services: All levels (CPT 97161-97168; 97110, 97112, 97116, 97535, 97750, 97755, 97760, 97761, 92521-92524, 92507). Clinicians can also provide virtual check-in services (HCPCS G2010, G2012) to new and established patients. Virtual check-in services were previously limited to established patients. Licensed clinical physical therapists can provide e-visits (HCPCS G2061-G2063). Telephone assessment and management service provided by a qualified nonphysician health care 	https://prc.hmsa.com/s/article/Coron avirus-Disease-2019-COVID-19	4/8/2020
Health Alliance Plan of Michigan (HAP)	professional (CPT 98966-98968). Expanded telehealth services to PT/OT/SLP services are covered. Applies to all Medicare Advantage, HAP/AHL commercial and individual product members. HAP Empowered/Medicaid members	https://portal.hap.org/bam/viewPolicy .do?id=22837	4/15/2020
HealthPartners	continue to follow MDHHS directives. Physical Therapy, Occupational Therapy, and Speech Therapy services have been added as coverage of telephone and video visits and updated reimbursement. Bill using physical therapy CPT codes (97010-97763) with the POS Code 2. 4/22/2020: As of 4/8/2020 901 COVID-19 Update The service is rendered by one of the following provider types: •01: Inpatient Facility – ONLY for Specialty Code 183 (Hospital Based Medical Clinic) •17: Therapist – ONLY for Specialty Codes 176 (Physical Therapy/Early Intervention). Guidance issued by the Office of Child Development and Early Learning applies to these provider specialty types and may include requirements in addition to those included in this Ops Memo.	https://www.healthpartners.com/ucm /groups/public/@hp/@public/docume nts/documents/entry_222832.pdf (see pages 3-4) https://www.healthpartners.com/ucm /groups/public/@hp/@public/docume nts/documents/entry_223042.pdf	4/6/2020

Highmark BCBS (PA, WV, OH) Highmark Medicare	Expanded coverage for telemedicine medical and reimbursement policies for a limited time to permit and pay for more telehealth providers, services and modalities 3/31/2020: added 3 additional treatment codes: 97110, 97112. 97116 In alignment with the U.S. Department of Health and Human	Main link: https://hbcbs.highmarkprc.com/ COVID-19/Telemedicine-and-Virtual- <u>Visits</u> Link to coding: (Scroll to physical medicine/therapy) <u>https://content.hig</u> <u>hmarkprc.com/Files/NewsletterNotic</u> <u>es/SpecialBulletins/hmk-temp- telemed-code-list.pdf</u> <u>https://content.highmarkprc.com/File</u> s/NewsletterNotices/SpecialBulletins	3/31/2020 3/31/2020
Advantage	Services' Office of Civil Rights (OCR)'s and The Centers for Medicaid and Medicare Services (CMS)'s guidelines for telemedicine during the COVID19 national public health emergency (PHE), Highmark considers the certain procedure codes eligible for reimbursement for dates of services from March 13 through June 13, 2020	/hmk-temp-telemed-code-list.pdf	
Horizon BCBS Medicare Advantage	Expanded list of telehealth CPT codes to include PMR codes.	https://www.horizonblue.com/sites/d efault/files/2020- 04/MA_Code_List.pdf (see page 3)	4/1/2020
Humana	PT/OT/SLP are eligible for other virtual services, such as virtual check- ins (G2010 and G2012), e-visits (G2061-G2063), and telephone evaluation and management (E/M) services (98966-98968). For further information, refer to Humana policy, state regulations, and applicable state-specific rules.	https://www.humana.com/provider/c oronavirus/telemedicine	4/13/2020
Independence Blue Cross	Expanding telemedicine to include: Physical therapy, occupational therapy, and speech therapy visits (via video)	https://news.ibx.com/independence- expands-telemedicine-coverage- during-covid-19-outbreak/	3/20/2020
Independence Blue Cross Medicare Advantage	Physical / Occupational Therapy 97110, 97112, 97116, 97129, 97130, 97161, 97162, 97163, 97164, 97165, 97166, 97167, 97168, 97530, 97533, 97535, 97750, 97755, 97760, 97761 MODIFIERS: 95, GT Revenue Code: 0420 PT - General	http://medpolicy.ibx.com/policies/Me dAdvMPI.nsf/f945eb8b38bc56ac852 5695e0068df6b/cec37902e3afc8368 5258549006f9d6f!OpenDocument	4/14/2020
Kaiser Permanente- Mid Atlantic States	Allows telephone and video visits provided by PTs.		3/20/2020
Kaiser Permanente- Southern California	Allows telephone and video visits provided by PTs.		3/20/2020
Medica	List includes 92507, 92521-92523, 97161, 97164, 97165-97168. *Prior authorization not required.* Double check individual client/patient	https://www.medica.com/- /media/documents/provider/provider- alerts/2020/provider-alert-	4/22/2020

Medical Mutual	insurance plans for coverage guidelines. At this time all insurers must adhere with Governor's mandate. Interactive telephonic and audio-video. During the current state of emergency in Ohio, Medical Mutual will allow PT/OT/SLP visits to be conducted via telehealth (telemedicine) when an audio and visual encounter are included. Telephonic-only visits will NOT be covered.	03262020.pdf?la=en&hash=547970 CE0306F1A6E80B692BDDAE1580 List of codes: https://www.medica.com/~/m edia/Documents/Provider/Emergenc y-Telemedicine-Services-Code-List https://www.medmutual.com/- /media/MedMutual/Files/Providers/C OVID19-PROVIDER-FAQ32020- FINAL.ashx (See Appendix A)	4/15/2020
Moda Health	Expanded services to add PM&R service that uses telecommunication systems between a provider and a patient. Codes 97110, 97112, 97116, 97161-97168, 97535, 97750, 97755, 97760, 97761.	https://www.modahealth.com/pdfs/rei mburse/RPM073_COVID- 19TelehealthExpansion.pdf (see page 11)	4/3/2020
Network Health Plans	All telehealth services for CMS- approved providers and covered services are covered at a \$0 copayment, including MDLIVE. NHP will not cover Medicare telehealth visits for providers who are not allowed to bill for telehealth services for Medicare members; e-visits coverage only.	https://networkhealth.com/coronavirus- s-medicare.html	4/15/2020
Peoples Health	Will reimburse PT/OT/SLP telehealth services provided by qualified health care professionals when rendered using interactive audio/video technology. State laws and regulations apply. Benefits will be processed in accordance with the patient's plan.	https://www.peopleshealth.com/provi ders/covid-19-updates-for-providers/	
Premera BC - Alaska and Washington	Allowing telehealth for physical therapy CPT 97000 series at the contracted rates along with the appropriate modifiers GT; modifier 95, with POS 02.	https://www.premera.com/wa/provid er/coronavirus-faq/ and www.evicore.com	4/22/2020
Providence Health Plan	For dates of service on or after March 6, 2020, through June 30, 2020, or until further notice, these additional codes for PT/OT/SLP will be covered as telehealth services: CPT codes 92507, 92526, 92609, 97110, 97112, 97129, 97130, 97161, 97162, 97163, 97530, 97535 may be used to report two-way video services performed by PT/OT/SLP for services within that practitioner's scope of license.	https://healthplans.providence.org/~/ media/Files/Providence%20HP/pdfs/ providers/Documents/670%20Teleh ealth%20Services%20DURING%20 COVID19%20CRISIS.pdf	3/6/2020

Regence Blue Shield of OR, UT, ID, WA - select counties	The health plan included PTs in telehealth coverage. Use 97000 codes for billing.	https://www.regence.com/provider/lib rary/whats-new/covid-19#temporary- updates-to-telehealth	4/3/2020
Sanford Health Plan	Covered Telehealth Services: Telehealth coverage extends to the following services at no cost to member: PT evaluation Excluded Telehealth Services: Telehealth coverage does not cover Physical therapy (PT).	https://www.sanfordhealthplan.org/- /media/files/documents/providers/ne wsletters/svhp-2860-flyer-fast-facts- newsletter-march-2020-8_5x11.pdf	4/15/2020
United Healthcare/ Optum	 4/6/2020: UnitedHealthcare will reimburse eligible codes on a CMS 1500 form, using POS code that would have been reported had the services been furnished in person, along with a 95 modifier; or on a UB04 form with revenue code 780. UnitedHealthcare will reimburse physical, occupational, and speech therapy telehealth services provided by qualified health care professionals when rendered using interactive audio/video technology. State laws and regulations apply. Benefits will be processed in accordance with the member's plan. This change is effective immediately for dates of service March 18 through June 18, 2020. PTs can use their typical billing codes when submitted with a POS code 02 and modifier 95. Codes listed below. 97161 Physical therapy evaluation - low complexity 97162 Physical therapy evaluation - noderate complexity 97163 Physical therapy evaluation - high complexity 97164 Physical therapy re- evaluation 97110 Therapeutic procedure, one or more areas, each 15 minutes 97110 Therapeutic activities, one- to-one patient contact, each 15 minutes 97112 Therapeutic procedure, one or more areas, each 15 minutes 97535 Self-care/home management training, each 15 minutes. 4/15/2020: Cost sharing will be waived for in-network telehealth services for PT/OT/SLP services for Medicare Advantage, Medicaid, 	https://www.uhcprovider.com/en/res ource-library/news/Novel- Coronavirus-COVID-19/covid19- telehealth-services/covid19- telehealth-pt-ot-st.html	4/13/2020

	individual and fully insured Group		[]
	Market health plan members, with opt-in available for self-funded employers.		
UPMC	Virtual telehealth services for PT/OT/SLP: E-Visits are currently allowed using the following codes G2061, G2062, G2063 for a very limited number of medical conditions.	https://embed.widencdn.net/pdf/plus/ upmc/22cs5qhtzm/Appendix-A- Covid-Benefits-and-Cost-Sharing.pdf	3/20/2020
Vantage Health Plan	PT, OT, and SLP visits performed through telemedicine must be in lieu of a face-to-face visit for an established patient with an existing plan of care. PT and OT: Bill these telemedicine visits with CPT 97110 (therapeutic exercise) with the appropriate modifier GP or GO. We will allow up to three PT and three OT units per week per patient. These claims must be billed with a POS code of 02 instead of POS 11. Vantage will pay these telemedicine claims at the current allowables with NO patient cost share. The telemedicine guidelines 1(d) through 1(g) listed in Vantage Provider Notice #1 dated 3/13/20 also apply to PT/OT/SLP providers.	https://www.vantagehealthplan.com/ documents/Physicians/VantageProvi dersCOVID19Update.pdf?q=637207 591001817595	3/30/2020
Wellmark BCBS (IA and SD)	Providers should bill the appropriate CPT codes for the services provided (see the link for codes). Telehealth allowed, use POS 2 and 1500 form POS 02 (do not include a modifier or claim will be denied); on a UB04 use GT modifier and include a comment in the free form section of the claim (in the electronic 837 facility, the required comment should be placed in a claim level note Loop 2300 NTE NTE01 = ADD, & NTE02 = telehealth). 4/22/2020. Other cost shares; include coinsurance and deductibles. Therefore, Wellmark will be waiving copays, coinsurance and deductibles for virtual visits with dates of service from March 16 to June 16, 2020. Wellmark will pay the allowed amount for telehealth services in full. Services that are not a covered benefit, not medically necessary, experimental or investigational are excluded from the member's copay or other cost-shares that are being waived. This is only applicable to in-network providers.	https://www.wellmark.com/Provider/ CommunicationAndResources/COVI D-19/Telehealth.aspx	4/22/2020