

# PROVIDER TELEHEALTH GUIDELINES

Important information for the COVID-19 public health emergency.

This notice applies to all fully insured lines of business (LOB) including Commercial and Individual (ACA), ETF, Medicare Advantage and BadgerCare Plus.

- Quartz will follow CMS guidelines for Medicare and Commercial lines of business, including ETF and Individual (ACA).
- We will follow Wisconsin DHS guidelines for BadgerCare Plus claims. Please see links below to CMS and DHS coverage guidelines.
- Self-funded groups will be making their own benefit decisions in accordance with their specific plan policies.

Please check back frequently as this information may change.

**Note:** Evaluation and Management codes should be based on medical decision-making or billed as time-based. Medical recorded documentation for all services should reflect medical necessity for all telehealth services.

## Types of Telemedicine Visits

**Telehealth:** Use of interactive audio and video telecommunications system that permits real-time communication between the provider site and patient's home.

**Virtual Check-In (Including Telephone):** Brief, technology-based communication initiated by patient. May include use of audio/visual equipment, but it is not required.

- Telephone, audio/video, secure text messaging, email, or portal.
- Captured video or images sent to a physician for evaluation.

**E-Visits:** Non-face-to-face patient-initiated written communication between an established patient and provider through a provider portal or some other secure platform.

**Online Digital Evaluation and Management:** Pictures or recordings taken with a device such as a cell phone sent to the provider for evaluation and decision making for assessment and management.

## Billing Guidelines

Commercial and Medicare Advantage, follow CMS guidelines:

- Quartz will waive cost-sharing for all CPT identified "telehealth" codes and also for [telehealth codes published by CMS for fee-for-service Medicare](#).
- [CMS Fact Sheet](#).

BadgerCare

- Follow WI DHS [ForwardHealth billing guidelines](#).
- [ForwardHealth flow chart](#).

## Billing Indicators

**Note:** Must include at least one of the indicators below on all telehealth claim submissions.

<b>Modifiers</b>	95 - Telemedicine Service CR – Catastrophe/Disaster Related CS – Subject to cost sharing waiver for testing related services for COVID-19 GT - Via Interactive Audio and Video Telecommunication System GQ - Via Asynchronous Telecommunication System G0 - Telehealth Services for Diagnosis Evaluation or Treatment of Symptoms of an Acute Stroke
<b>Traditional True Telehealth Services</b>	POS 02
<b>Historically in-person services now provided via telehealth</b>	POS should equal what it would have been for in-person with modifier 95 to indicate provided by telehealth
<b>Condition Code (UB)</b>	DR – Disaster Related