

CODING FOR TELEMEDICINE SERVICES

With the onset of COVID-19, the Federal Government has recommended that health care professionals utilize telemedicine technologies for patient visits and has provided flexibility to do so without fear of HIPAA violations. Psychiatric outpatient services are included in these recommendations. How federal policy changes are implemented can vary by state, so please consult the guidance being issued by your state organizations and the payers you interact with to understand how these policy changes will affect you.

CMS recently announced that it would begin reimbursing for the use of telephonic codes for patient visits (CPT 99441-3). Whether you can code and be reimbursed for these services may vary by your locality and specific payers. A [helpful document](#) that lists state-specific and some payer-specific information is available in [AACAP's COVID-19 Resource Library](#). [The Center for Connected Health Policy](#) also provides frequently updated information with state-specific information.

The following psychiatric services are approved for telemedicine services by using the 95 modifier appended to the code:

90785	Psychiatric interactive complexity
90791, 90792	Psychiatric diagnostic services
90832,33,34,36,37,38	Psychotherapy services
90839,40	Crisis services
90845	Psychoanalysis
90846,47	Family therapy services
96116	Neurobehavioral status examination
99201-99205	Outpatient new patient visit
99211-99215	Office outpatient E/M visit
99231-99233	Subsequent hospital care
99354-55	Prolonged service outpatient visit
99356-57	Prolonged service inpatient

Examples of coding for telemedicine services:

Initial Outpatient Visit: 99205.95

Established Outpatient: Visit 99214.95

Psychiatric Evaluation: 90792.95

Psychotherapy with E/M: 99213.95, 90833.95

The CPT Definition of Telemedicine:

Synchronous Telemedicine Service Rendered Via a Real-Time Interactive Audio and Video Telecommunications System: Synchronous telemedicine service is defined as a **real-time** interaction between a physician or other qualified health care professional and a patient who is located at a distant site from the physician or other qualified health care professional. The totality of the communication of information exchanged between the physician or other qualified health care professional and the patient during the course of the synchronous telemedicine service must be of an amount and nature that would be sufficient to meet the key components and/or requirements of the same service when rendered via a face-to-face interaction. Modifier 95 may only be appended to the services listed in Appendix P. Appendix P is the list of CPT codes for services that are typically performed face-to-face but may be rendered via a real-time (synchronous) interactive audio and video telecommunications system.

(CPT Professional Edition 2020, Appendix P, pg. 896)

-The AACAP Coding Committee

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