

# SOUTH CAROLINA OFFICE OF RURAL HEALTH

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## Medicare Tele-Services during Public Health Emergency

### General

- This guidance is valid for the period of the COVID-19 Public Health Emergency. Once the emergency is over, we will not be allowed to continue serving as the distant site. We are still working to pass the RHC Modernization Act.
- For all of the changes below, Medicare Administrative Contractors will automatically reprocess claims starting **July 1<sup>st</sup>, 2020** (no resubmission necessary)
- After March 1<sup>st</sup> 2020, If tele-communication services are related to COVID testing/evaluation/treatment, copays and deductibles are waived for Medicare Beneficiaries. **Use the CS modifier** (in addition to other modifiers listed below) to indicate coinsurance was waived to receive full payment.
- Rural Health Clinics can now provide distant telehealth services from **any location including the providers home.**
- Rural Health Clinics can bill for telehealth with the **patient's home** as the originating site effective **March 6<sup>th</sup>, 2020.**

### Telehealth Services – New and Established Patients **All Billed using G2025**

<https://scorh.net/wp-content/uploads/2020/04/Covered-Telehealth-Services-for-PHE-effective-March-1-2020-updated.pdf>

Examples of services allowed as Telehealth per CMS ([link to all services](#))

- Telehealth E/M services – 99201 -99205 (New) and 99211 – 99215 (Established)
- Annual Wellness Visits – G0438 (New) and G0439 (Subsequent)
- Telephonic E/M services – 99441-99443 (At least 5 minutes of E/M by physician or qualified healthcare professional no related to E/M service provided within previous 7 days.)

January 27, 2020 to June 30, 2020 – Payment at **All-Inclusive Rate**

Revenue Code	HCPSC Code	Modifiers
052X	G2025	CG (required) 95 (optional)

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July 1<sup>st</sup> through end of PHE – Payment of **\$92.03. No CG Modifier**

Revenue Code	HCPCS Code	Modifiers
052X	G205	95 (optional)

**Virtual Communication Services** – Established patients only

- **All** the following virtual communication services will be billed under **G0071 (Virtual Communication Services)**. Do **not** use a CG modifier!
- Use the **CS** modifier if related to COVID to waive patient cost sharing
- During the PHE, for services after March 1<sup>st</sup>, 2020, G0071 will pay **\$24.76** instead of the current \$13.53

Virtual Check Ins - Bill under G0071 – No CG Modifier

- G2010 -Remote evaluation of recorded video and/or images submitted by an established patient with **interpretation** and **follow-up** within **24 business hours** not related to an E/M service provided over the past 7 calendar days
- G2012 – Brief communication (5 minutes or greater) by **telephone** or other technology based service provided to an established patient not originating from a related E/M service provided over the past 7 calendar days

Online Digital Evaluation and Management – Bill under G0071 – No CG Modifier

- Online digital evaluation and management services are non-face-to-face, **patient-initiated**, digital communications **using a secure patient portal**.
- CPT code 99421 (5-10 minutes over a 7-day period)
- CPT code 99422 (11-20 minutes over a 7-day period)
- CPT code 99423 (21 minutes or more over a 7-day period)

**Cost Reporting**

- Costs for furnishing distant site telehealth services will not be used to determine the RHC AIR or the FQHC PPS rates but must be reported on the appropriate cost report form. RHCs must report both originating and distant site telehealth costs on Form CMS-222-17 on line 79 of the Worksheet A, in the section titled “Cost Other Than RHC Services.”