

## II. Telephonic Reimbursement Overview

Payment for telephonic encounters for health care and health care support services will be supported in six different payment pathways utilizing the usual provider billing structure. See the table below for the billing pathways available for telephonic encounters during the COVID-19 State of Emergency by both FFS and Managed Care\*: **Chart Changes in Bold 3/23/20**

Billing Lane	Telephonic Service	Applicable Providers	Fee or Rate	Historical Setting	Rate Code or Procedure	Notes:
Lane 1	Evaluation and Management Services	Physicians, NPs, PAs, Midwives, Dentists, RNs	Fee Schedule	Office	CPT Procedure Codes “99211”, “99441”, “99442”, and “99443” “D9991” - Dentists	New or established patients. Append GQ modifier for 99211 only
Lane 2	Assessment and Patient Management	All other practitioners billing fee schedule (e.g., Psychologist)	Fee Schedule	Office	Any existing Procedure Codes for services appropriate to be delivered by telephone. Append modifier GQ for tracking purposes.	Billable by Medicaid enrolled providers. New or established patients.
Lane 3	Offsite Evaluation and Management Services (non-FQHC)	Physicians, NPs, PAs, Midwives	Rate	Clinic or Other (e.g., amb surg, day program)	Rate Code “7961” for non-SBHC Rate Code “7962” for SBHC	New or established patients.
Lane 4	Offsite Evaluation and Management Services (FQHC)	Physicians, NPs, PAs, Midwives	Rate	Clinic	Rate Code “4012” for non-SBHC Rate Code “4015” for SBHC	New or established patients.
Lane 5	Assessment and Patient Management	Other practitioners (e.g., Social Workers, dietitians, <b>home care aides, RNs, therapists and other home care workers</b> )	Rate	Clinic or other <b>Includes FQHCs, Day Programs and Home Care Providers</b>	<b>Non-SBHC:</b> <ul style="list-style-type: none"> <li>Rate Code “7963” (for telephone 5 – 10 minutes)</li> <li>Rate Code “7964” (for telephonic 11 – 20 minutes)</li> <li>Rate Code “7965” (for telephonic 21 – 30 minutes)</li> </ul> <b>SBHC:</b> <ul style="list-style-type: none"> <li>Rate code “7966” (for telephone 5 – 10 minutes)</li> <li>Rate code “7967” (for telephonic 11 – 20 minutes)</li> <li>Rate code “7968” (for telephonic 21 – 30 minutes)</li> </ul>	Broadly billable by a wide range of provider types <b>including FQHCs, Day Programs and Home Care (e.g., aide supervision, aid orientation, medication adherence, patient check-ins). However, see LHCSA/CHHA assessments and RN visits which get billed under existing rates in Lane 6).</b>  New or established patients.  Report NPI of supervising physician as Attending.
Lane 6	Other Services (not eligible to bill one of the above categories)	All provider types (e.g., <b>Home Care</b> , ADHC programs, health home, <b>HCBS</b> , peers)	Rate	All other as appropriate	All appropriate rate codes as long as appropriate to delivery by telephone	Covers all Medicaid services not covered above. <b>Includes LHCSA and CHHA assessments, evaluations and RN visits.</b>

\*Managed care plans may have separate detailed billing guidance but will cover all services appropriate to deliver through telehealth/telephonic means to properly care for the member during the State of Emergency. Further detail on FFS code coverage is provided below including links to specialized guidance for mental health, substance abuse and OPWDD services.