

# COVID-19 Telehealth Reference Guide for Participating Network Providers

## COVID-19 Telehealth Introduction

COVID-19 continues to impact communities in the Mid-Atlantic region, and throughout the United States and world. We appreciate your partnership as we continue to address the spread of the virus; and for providing prompt and compassionate care to Kaiser Permanente members and patients.

During this challenging time, we are committed to:

- Keeping you informed as the situation evolves; and
- Providing answers to the questions we are receiving from you.

We have received numerous questions regarding telehealth services. The guidance we receive from each state regulator and Medicaid programs within the Mid-Atlantic region continues to evolve – and we are working to keep you informed of benefit updates we are making to ensure that Kaiser Permanente members have easy access to the care they need.

**This document is intended to guide provider use and billing of telehealth services during the COVID-19 nationwide public health emergency only and is subject to change. The flexibilities granted to provide telehealth service will end on June 30<sup>th</sup>, 2020 or upon future notice.**

## General Information on Telehealth for Providers

**Telemedicine service is the use of interactive audio, video, or other telecommunications or electronic technology by a licensed health care provider to deliver a health care service within the scope of practice of the health care provider at a site other than the site at which the patient is located.**

When delivering services via telehealth, all providers:

- Are required to adhere to the same standards of clinical practice and record keeping that apply to covered services provided during office visits;
- Must assure the same rights to confidentiality and security provided during office visits and when providing face-to-face services;
- Must ensure the patient's informed consent to the use of telehealth and advise members of any relevant privacy considerations.

Where access to audio/visual technology is not available, and the above criteria can still be met, the use of audio-only technology during the public health emergency is permitted for both MD and VA Medicaid programs.

## Who Can Provide Care via Telehealth

New flexibility has been afforded to health care providers to provide care remotely within their scope of practice. We recommend that if you have questions about the permissibility of certain providers to provide telehealth services during the COVID-19 nationwide public health emergency, you refer to your local certifying, licensing or credentialing body to confirm permissibility.

# COVID-19 Telehealth Reference Guide for Participating Network Providers

## Telehealth Visits and Authorization

**There is no need to seek additional authorization to provide COVID-19-associated screening, diagnosis or testing to our members.**

Additionally, we appreciate your efforts to help mitigate the spread of COVID-19 in the community by encouraging the use of telehealth visits for other types of services, where clinically appropriate and technology is available. To reduce administrative burdens, you may convert authorized office visits to telehealth visits without seeking additional authorization from Kaiser Permanente.<sup>1</sup> If your practice has telemedicine capabilities, proceed with visits and bill us normally. Coding information is also provided in this reference guide.

Please ensure that you request a visual verification of members' Kaiser Permanente Identification Cards during telehealth visits, just as you would in-person in your medical office setting. All members (Commercial, Individual and Family, Medicare and Medicaid) are covered for telehealth visits. While most members receive no-charge for telehealth visits, please use Online Affiliate to confirm the cost sharing for High Deductible Health Plan/HSA-qualified members who must first meet their deductible for telehealth visits unrelated to COVID-19 diagnosis and testing.

*<sup>1</sup>Providers must still seek authorization for new services and non-COVID-19-related care, except where regulators have issued orders suspending or modifying the requirements. This policy may be revised or updated, as appropriate, based on the rapidly changing environment.*

## Telehealth Visit Coding, Claims Submission and Reimbursement

**Providers should update systems and procedures to enable the use of modifiers GT (via interactive audio and video telecommunications system) or GQ (via synchronous telecommunications system), or telehealth place of service (POS code 02) when billing for services delivered via telehealth. If billing on a UB04, please append the modifier to the HCPCS code. Reimbursement for telehealth services will be provided at the same rate as face-to-face visits. Please see [Appendix A: Kaiser Permanente Eligible Telehealth Service Codes](#) for further guidance.**

### **For Eligible Telehealth Visits Provided to Commercial or Medicare Members**

Please use POS (place of service) 02 when submitting your professional services claims for these encounters. Modifier 95 is equally accepted for telehealth services on a professional services claim form (CMS 1500).

### **For Eligible Telehealth Visits Provided to Maryland or Virginia Medicaid Members**

Professional services provided via Telehealth should be identified with a GT (via interactive audio and video telecommunications system) or GQ (via synchronous telecommunications system) modifier, as appropriate, and are billed using the usual place of service code that would be appropriate as if it were a non-telehealth claim on a professional services claim form (CMS 1500).

# COVID-19 Telehealth Reference Guide for Participating Network Providers

## Guidance from Medicare and Medicaid Programs about Telehealth Services During the COVID-19 State of Emergency

Medicare and both MD and VA Medicaid programs have issued specific guidance regarding telehealth services including coding/billing, waivers for originating site, telehealth and behavioral health as well as telehealth care provided from a hospital setting. For more information, please refer directly to this guidance for regional Medicaid programs.

### Medicare:

- [Telehealth Frequently Asked Questions](#) (Issued March 17, 2020)

### MD Medicaid:

- [COVID-19 Provider Updates](#)

### VA Medicaid:

- [COVID-19 Provider information](#)
- [COVID-19 Provider Flexibilities Related to COVID-19](#) (Issued: March 19, 2020)

## Coding for Telehealth Services Using an Institutional Claim Form (UB04 Claim Form)

For providers that are *unable to submit a professional CMS 1500 claim form*, and use institutional billing form, may submit claims for professional services with modifier 95 appended to eligible HCPCS/CPT on the institutional billing (UB claim forms) to submit claims for services that were:

- Performed remotely using real-time audio-visual telehealth technology or telephonic/audio-only when video technology is not available to the patient;
- Performed by a licensed, certified or otherwise qualified professional practicing within their scope of practice; and
- Where same standard of practice and documentation for the service or visit were maintained.

Claim Form	CMS 1500		UB04 (Per Extenuating Circumstances Noted Above)
	Place of Service Code	Modifier Options	HCPCS (Modifier)
Commercial	02	GT, GQ, 95	HCPCS (GT, GQ or 95)
Medicare	02		HCPCS (95)
VA Medicaid	Usual Place of Service Code	GT, GQ, 95	HCPCS (GT, GQ or 95)
MD Medicaid	Usual Place of Service Code	GT, GQ, 95	HCPCS (GT, GQ or 95)

## COVID-19 Telehealth Visit Care Notes

Kaiser Permanente also encourages providers to provide members with a written clinical summary of COVID-19 screening, diagnosis, testing and treatment results that members can then share with their Kaiser Permanente care team, as appropriate.

# COVID-19 Telehealth Reference Guide for Participating Network Providers

## Member and Patient Costs for COVID-19 Testing and Treatment

---

**Do not collect cost sharing for COVID-19 screening, diagnosis or testing from our members. Most members also receive \$0 cost sharing for COVID-19 treatment services.<sup>2</sup>**

We believe that cost should not be a barrier to care for our members who require medically-necessary or physician-ordered screening, testing, or treatment for COVID-19.

Effective March 5, 2020, Kaiser Permanente advised it will not charge member cost-sharing (co-pays, deductibles and/or coinsurance) for all medically necessary screening, diagnosis, testing for COVID-19. This includes the care that your facility or practice provides to our members, during both office visits and via telehealth. As of March 19<sup>th</sup>, 2020, member cost sharing is waived for outpatient and inpatient treatment for COVID-19 provided in office visits, inpatient hospital, emergency department, urgent care, and in the home, among other care settings.

*<sup>2</sup>All members who belong to groups who self-fund their KP health insurance plans will have \$0 member cost sharing for screening, testing and diagnosis. However, some self-funded groups will subject members to regular plan cost sharing for treatment of COVID-19. Member liability will be detailed in the Explanation of Payment that you will receive for processed claims.*

### **Cost-Sharing Waiver Discontinuation**

Providers will be notified by letter, in the same manner as for this communication, when the COVID-19 cost sharing waiver discontinues. The update will also be posted to Kaiser Permanente of the Mid-Atlantic States' Community Provider Portal (CPP) at [providers.kp.org/mas](https://providers.kp.org/mas). You are encouraged to visit the CPP for ongoing updates and information about this initiative.

### **Special Exception for Virginia Medicaid Members**

Additionally, there is a temporary cost-sharing exception for Virginia Medicaid members. Effective March 16, 2020, the Virginia Department of Medical Assistance Services directed all Medicaid Fee-for-Service Providers and Medicaid Managed Care Organizations, of which Kaiser Permanente is a participating provider, to eliminate cost sharing for all visits and services, including those unrelated to COVID-19 care, as of March 16, 2020.

## COVID-19 Telehealth Visits that Lead to Emergency Admissions

---

Kaiser Permanente does not require prior authorization for emergency admissions for COVID-19 treatment. Please notify our appointment and advice line at 703-359-7878 or 800-777-7904 (711 TTY) of the decision to admit our members as soon as possible.

# COVID-19 Telehealth Reference Guide for Participating Network Providers

## Appendix A: Kaiser Permanente Eligible Telehealth Service Code Guidance

Please see below table for service codes considered eligible to be performed via telehealth technology, when delivered by licensed or certified providers practicing within their scope of practice. Kaiser Permanente is extending this flexibility to aid in providing care to Kaiser Permanente members during the COVID-19 state of emergency. The guidance provided below is temporary and will expire on June 30, 2020 unless otherwise communicated.

List of Permissible Telehealth Procedures			
77427	90791	90792	90832
90833	90834	90836	90837
90838	90839	90840	90845
90846	90847	90853	90863
90951	90952	90953	90954
90955	90957	90958	90959
90960	90961	90962	90963
90964	90965	90966	90967
90968	90969	90970	92526
92227	92228	93228	93229
93268	92507	92521	92522
92523	92524	93270	93271
93272	93298	96040	96116
96121	96130	96131	96132
96133	96136	96137	96138
96139	96156	96159	96160
96161	96164	96165	96167
96168	97110	97112	97116
97151	97155	97156	97157
97161	97162	97163	97164
97165	97166	97167	97168
97530	97535	97750	97755
97760	97761	97802	97803
97804	98960	98961	98962
98966	98967	98968	99091
99201	99202	99203	99204
99205	99211	99212	99213
99214	99215	99217	99218
99219	99220	99221	99222
99223	99224	99225	99226
99231	99232	99233	99234
99235	99236	99238	99239
99241	99242	99243	99244
99245	99251	99252	99253
99254	99255	99281	99282
99283	99284	99285	99291

# COVID-19 Telehealth Reference Guide for Participating Network Providers

99292	99304	99305	99306
99307	99308	99309	99310
99315	99316	99327	99328
99334	99335	99336	99337
99341	99342	99343	99344
99345	99347	99348	99349
99350	99354	99355	99356
99357	99381	99382	99383
99384	99385	99386	99387
99391	99392	99393	99394
99395	99396	99397	99401
99402	99403	99404	99406
99407	99408	99409	99441
99442	99443	99446	99447
99448	99449	99451	99452
99453	99454	99457	99458
99468	99469	99471	99472
99473	99475	99476	99477
99478	99479	99480	99483
99495	99496	99497	99498
G0108	G0109	G0270	G0296
G0396	G0397	G0406	G0407
G0408	G0420	G0421	G0425
G0426	G0427	G0438	G0439
G0442	G0443	G0444	G0445
G0446	G0447	G0459	G0506
G0508	G0509	G0513	G0514
G2010	G2012	G2061	G2062
G2063	G2086	G2087	G2088
Q3014			

## Telehealth Platforms

**Providers that do not currently have the means to conduct telemedicine may use a commercially-available platform to perform telemedicine visits.**

The Office for Civil Rights at the Department of Health and Human Services (HHS) is responsible for enforcing certain regulations issued under the Health Insurance Portability and Accountability Act of 1996 (HIPAA), as amended by the Health Information Technology for Economic and Clinical Health (HITECH) Act, to protect the privacy and security of protected health information, namely the HIPAA Privacy, Security and Breach Notification Rules.

During the COVID-19 nationwide public health emergency, health care providers subject to HIPAA Rules may seek to communicate with patients and provide telehealth services through remote communications technologies. Some of these technologies, and the manner in which they are used by HIPAA health care providers, may not fully comply with the requirements of the HIPAA Rules.

# COVID-19 Telehealth Reference Guide for Participating Network Providers

OCR will exercise its enforcement discretion and will not impose penalties for noncompliance with the regulatory requirements under the HIPAA Rules against covered health care providers in connection with the good faith provision of telehealth during the COVID-19 nationwide public health emergency.

[Click here](#) for more information on HIPAA enforcement during the nationwide COVID-19 nationwide public health emergency. Additionally, frequently asked questions (FAQs) are also available. To view the FAQ document, [click here](#).

Kaiser Permanente advises against the use of the following platforms to provide telehealth services as they are considered vulnerable to exposure of the conversations conducted while using them:

- Amazon Alexa;
- Apple HomePod;
- Facebook;
- Discord;
- Instagram or Instagram Live;
- Reddit;
- Signal;
- Snapchat;
- Telegram;
- Twitch;
- Twitter;
- Viber;
- WeChat;
- WebEx; and
- WhatsApp.

Additionally, providers should enable available encryption and privacy modes when using telehealth applications.

## **Conclusion**

---

Please visit [kp.org](https://kp.org) and the CPP at [providers.kp.org/mas](https://providers.kp.org/mas) for continued updates regarding Kaiser Permanente's response to the COVID-19 nationwide public health emergency.

If you have additional questions, please contact your account manager.