

**ACR Telehealth Coding Reference**

The ACR developed this quick reference guide to help rheumatology practices and rheumatology professionals navigate telehealth coding and billing requirements. We will continue to monitor and update any coding and billing changes from CMS and third-party payers as it becomes available.

PAYER	Face-to-Face Audio & Visual Visits	Virtual Check-in/Telephone Visits	eVisit/Portal Communication	Place of Service (POS)/Modifiers
<b>Medicare</b>	99201-99205: new patients 99211-99215: established patients	<p><b>G2012: E/M via telephone, video or image; 5-10mins</b></p> <ul style="list-style-type: none"><li>*new and established patients</li><li>*provider discusses new or established problem with patient</li><li>*medical problem cannot be related to visit 7 days prior</li><li>*cannot lead to visit within 24hrs or soonest available appt</li><li>*patient must verbally consent and documented in patient records</li><li>*no specific documentation requirements for discussion</li><li>*patient record must reflect duration of call</li><li>*patient has cost sharing and no frequency limitations</li><li>*provider may respond to the patient's concern by telephone, audio/video, secure text messaging, email, or use of a patient portal</li></ul> <p><b>G2010: Remote evaluation of recorded video and/or images submitted by the patient</b></p> <ul style="list-style-type: none"><li>*established patient only</li><li>*interpretation with follow-up with the patient within 24 business hours</li><li>*medical problem cannot be related to visit 7 days prior</li><li>*cannot lead to visit within 24hrs or soonest available appt</li></ul> <p>99441: E/M via telephone (non face-to-face); 5-10 mins 99442: E/M via telephone, (non face-to-face); 11-20 mins 99443: E/M via telephone, (non-face-to-face); 21-30 mins</p> <p>98966: Telephone assessment; 5-10 mins 98967: Telephone assessment; 11-20 mins 98968: Telephone assessment; 21-30 mins</p>	<p>99421: digital E/M 5-10mins 99422: digital E/M 11-22mins 99423: digital E/M 21+mins</p> <ul style="list-style-type: none"><li>*Established patient</li><li>*provider responds to patient portal question(s) and reviews record/data pertinent for assessment</li><li>*medical problem cannot be related to visit 7 days prior</li><li>*patient must verbally consent and documented in patient records</li><li>*no specific documentation requirements for E/M</li><li>*patient required to initiate service</li><li>*patient has cost sharing and no frequency limits</li><li>*cannot bill on same day with any other office visit</li></ul>	POS: 11  Modifier - 95: should be applied to claim lines for services furnished    As of May 1, for audio-only (99441-99443): POS: 11 No modifier required
<b>Medicare Advantage</b>	99201-99205: new patients 99211-99215: established patients	<p><b>G2012: E/M via telephone, video or image; 5-10mins</b></p> <ul style="list-style-type: none"><li>*new and established patients</li><li>*provider discusses new or established problem with patient</li><li>*medical problem cannot be related to visit 7 days prior</li><li>*cannot lead to visit within 24hrs or soonest available appt</li><li>*patient must verbally consent and documented in patient records</li><li>*no specific documentation requirements for discussion</li><li>*patient record must reflect duration of call</li><li>*patient has cost sharing and no frequency limitations</li><li>*provider may respond to the patient's concern by telephone, audio/video, secure text messaging, email, or use of a patient portal</li></ul> <p><b>G2010: Remote evaluation of recorded video and/or images submitted by the patient</b></p> <ul style="list-style-type: none"><li>*established patient only</li><li>*interpretation with follow-up with the patient within 24 business hours</li><li>*medical problem cannot be related to visit 7 days prior</li><li>*cannot lead to visit within 24hrs or soonest available appt</li></ul> <p>99441: E/M via telephone (non face-to-face); 5-10 mins 99442: E/M via telephone, (non face-to-face); 11-20 mins 99443: E/M via telephone, (non-face-to-face); 21-30 mins</p> <p>98966: Telephone assessment; 5-10 mins 98967: Telephone assessment; 11-20 mins 98968: Telephone assessment; 21-30 mins</p>	<p>99421: digital E/M 5-10mins 99422: digital E/M 11-22mins 99423: digital E/M 21+mins</p> <ul style="list-style-type: none"><li>*Established patient</li><li>*provider responds to patient portal question(s) and reviews record/data pertinent for assessment</li><li>*medical problem cannot be related to visit 7 days prior</li><li>*patient must verbally consent and documented in patient records</li><li>*no specific documentation requirements for E/M</li><li>*patient required to initiate service</li><li>*patient has cost sharing and no frequency limits</li><li>*cannot bill on same day with any other office visit</li></ul>	POS: 11  Modifier - 95: should be applied to claim lines for services furnished
<b>Medicaid</b>	99201-99205: new patients 99211-99215: established patients	<p>99441: E/M via telephone (non face-to-face); 5-10 mins 99442: E/M via telephone, (non face-to-face); 11-20 mins 99443: E/M via telephone, (non-face-to-face); 21-30 mins</p> <p>98966: Telephone assessment; 5-10 mins 98967: Telephone assessment; 11-20 mins 98968: Telephone assessment; 21-30 mins</p> <ul style="list-style-type: none"><li>*established patient only</li><li>*provider discusses new or established problem with patient</li><li>*medical problem cannot be related to visit 7 days prior</li><li>*cannot lead to visit within 24hrs or soonest available appt</li><li>*patient must verbally consent and documented in patient records</li><li>*no specific documentation requirements for discussion</li><li>*patient record must reflect duration of call</li><li>*patient has cost sharing and no frequency limitations</li><li>*provider may respond to the patient's concern by telephone, audio/video, secure text messaging, email, or use of a patient portal</li></ul>	<p>99421: digital E/M 5-10mins 99422: digital E/M 11-22mins 99423: digital E/M 21+mins</p> <ul style="list-style-type: none"><li>*Established patient</li><li>*provider responds to patient portal question(s) and reviews record/data pertinent for assessment</li><li>*medical problem cannot be related to visit 7 days prior</li><li>*patient must verbally consent and documented in patient records</li><li>*no specific documentation requirements for E/M</li><li>*patient required to initiate service</li><li>*patient has cost sharing and no frequency limits</li><li>*cannot bill on same day with any other office visit</li></ul>	POS: 11 Modifiers: GT or GQ for codes recognized by CMS 95 for codes recognized by AMA Appendix P

PAYER	Face-to-Face Audio & Visual or Audio only Visits	Modifiers
Aetna	99201-99205: new patients 99211-99215: established patients	POS: 02 Modifier -95: for synchronous interactive audio and video telecommunications system required on all claim lines
Anthem	99201-99205: new patients 99211-99215: established patients	POS: 02 Modifier: 95 or GT required on all claim lines
BCBS	99201-99205: new patients 99211-99215: established patients	POS: 02 or 11 Modifier: GT/GQ or 95 required on all claim lines Review the ACR <a href="#">Commercial Payer Telehealth Policies</a> for detailed billing information on individual state Blue plans.
Cigna	99201-99205: new patients 99211-99215: established patients	POS: 11 Modifier: GQ, GT or 95 required on all claim lines
Humana	99201-99205: new patients 99211-99215: established patients	POS: 11
UHC	99201-99205: new patients 99211-99215: established patients	POS: 11 Modifiers: 95 required on all claim lines

Review the ACR [Commercial Payer Telehealth Policies](#) for detailed billing information on individual payer plans.

PAYER	PT/OT Visits	eVisit/Portal Communication
Medicare	<p><b>Physical Therapy</b>  <b>97161:</b> PT evaluation – low complexity  <b>97162:</b> PT evaluation- moderate complexity  <b>97163:</b> PT evaluation – high complexity  <b>97164:</b> PT re-evaluation  <b>97110:</b> Therapeutic procedure, one or more areas (each 15mins)  <b>97112:</b> Therapeutic procedure; neuromuscular re-education of movement, one or more areas, each 15 mins  <b>97116:</b> Gait training  <b>97530:</b> Therapeutic activities, (each 15mins)  <b>97535:</b> Self-care/home management training, each 15 minutes</p> <p><b>Occupational Therapy</b>  <b>97165:</b> OT evaluation -low complexity  <b>97166:</b> OT evaluation – moderate complexity  <b>97167:</b> OT evaluation – high complexity  <b>97168:</b> OT re-evaluation  <b>97110:</b> Therapeutic procedure, one or more areas, each 15 minutes  <b>97112:</b> Therapeutic procedure; neuromuscular re-education of movement, one or more areas, each 15 mins  <b>97530:</b> Therapeutic activities, each 15 mins  <b>97535:</b> Self-care/home management training, each 15 mins</p>	<p><b>G2061:</b> Qualified nonphysician healthcare professional online assessment and management services, for an established patient, for up to seven days, cumulative time during the 7 days; 5-10 mins</p> <p><b>G2062:</b> Qualified nonphysician healthcare professional online assessment and management services, for an established patient, for up to seven days, cumulative time during the 7 days; 11-20 mins</p> <p><b>G2063:</b> Qualified nonphysician healthcare professional online assessment and management services, for an established patient, for up to seven days, cumulative time during the 7 days; 21 or more mins</p>
Medicare Advantage	<p><b>Physical Therapy</b>  <b>97161:</b> PT evaluation – low complexity  <b>97162:</b> PT evaluation- moderate complexity  <b>97163:</b> PT evaluation – high complexity  <b>97164:</b> PT re-evaluation  <b>97110:</b> Therapeutic procedure, one or more areas (each 15mins)  <b>97112:</b> Therapeutic procedure; neuromuscular re-education of movement, one or more areas, each 15 mins  <b>97116:</b> Gait training  <b>97530:</b> Therapeutic activities, (each 15mins)  <b>97535:</b> Self-care/home management training, each 15 minutes</p> <p><b>Occupational Therapy</b>  <b>97165:</b> OT evaluation -low complexity  <b>97166:</b> OT evaluation – moderate complexity  <b>97167:</b> OT evaluation – high complexity  <b>97168:</b> OT re-evaluation  <b>97110:</b> Therapeutic procedure, one or more areas, each 15 minutes  <b>97112:</b> Therapeutic procedure; neuromuscular re-education of movement, one or more areas, each 15 mins  <b>97530:</b> Therapeutic activities, each 15 mins  <b>97535:</b> Self-care/home management training, each 15 mins</p>	<p><b>G2061:</b> Qualified nonphysician healthcare professional online assessment and management services, for an established patient, for up to seven days, cumulative time during the 7 days; 5-10 mins</p> <p><b>G2062:</b> Qualified nonphysician healthcare professional online assessment and management services, for an established patient, for up to seven days, cumulative time during the 7 days; 11-20 mins</p> <p><b>G2063:</b> Qualified nonphysician healthcare professional online assessment and management services, for an established patient, for up to seven days, cumulative time during the 7 days; 21 or more mins</p>
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Commercial UHC	<p><b>Physical Therapy</b>  <b>97161:</b> PT evaluation – low complexity  <b>97162:</b> PT evaluation- moderate complexity  <b>97163:</b> PT evaluation – high complexity  <b>97164:</b> PT re-evaluation  <b>97110:</b> Therapeutic procedure, one or more areas (each 15mins)  <b>97112:</b> Therapeutic procedure; neuromuscular re-education of movement, one or more areas, each 15 mins  <b>97116:</b> Gait training  <b>97530:</b> Therapeutic activities, (each 15mins)  <b>97535:</b> Self-care/home management training, each 15 minutes</p> <p><b>Occupational Therapy</b>  <b>97165:</b> OT evaluation -low complexity  <b>97166:</b> OT evaluation – moderate complexity  <b>97167:</b> OT evaluation – high complexity  <b>97168:</b> OT re-evaluation  <b>97110:</b> Therapeutic procedure, one or more areas, each 15 minutes  <b>97112:</b> Therapeutic procedure; neuromuscular re-education of movement, one or more areas, each 15 mins  <b>97530:</b> Therapeutic activities, each 15 mins  <b>97535:</b> Self-care/home management training, each 15 mins</p>	<p><b>G2061:</b> Qualified nonphysician healthcare professional online assessment and management services, for an established patient, for up to seven days, cumulative time during the 7 days; 5-10 mins</p> <p><b>G2062:</b> Qualified nonphysician healthcare professional online assessment and management services, for an established patient, for up to seven days, cumulative time during the 7 days; 11-20 mins</p> <p><b>G2063:</b> Qualified nonphysician healthcare professional online assessment and management services, for an established patient, for up to seven days, cumulative time during the 7 days; 21 or more mins</p>