



POLICY INFORMATION			
Policy Number:	POL-PP- 109 Telehealth	Original Effective Date:	7/1/2019
Version Number:	025	Revision Date:	7/1/2025
Policy Status:	Active	Next Revision Date:	7/1/2026

NOTICE

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Blue KC reserves the right to review and revise these policies when necessary. When there is an update, we will publish the most current policy to: <https://providers.bluekc.com/ContactUs/PaymentPolicies>.

PROVIDER/ENTITY IMPACTED					
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PROFESSIONAL	FACILITY	DME	AMBULATORY SURGERY	LAB	OTHER

LINES OF BUSINESS IMPACTED						
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
COMMERCIAL	BLUE MEDICARE ADVANTAGE	ACA QHP¹	SMALL GROUP ACA	JAA²	FEP³	DENTAL

¹ ACA QHP: Affordable Care Act Qualified Health Plan for Individual/Family ² JAA: Joint Administrative Account ³ FEP: Federal Employee Program

Disclaimer

Blue KC has developed Provider Payment Policies to provide guidance on payment methodologies as they pertain to submitted claims. These policies are written following industry standard recommendations from sources such as:

- Current Procedural Terminology
- Centers for Medicare and Medicaid
- American Medical Association
- National Correct Coding Initiative
- Other professional organizations and societies

Coverage of any service is determined by date of service, a member's eligibility and benefit limits for the service or services rendered, all terms of the Provider Service Agreement, and other standards of coding rules and guidelines.

Final payment is subject to the application of claims adjudication and edits common to the industry.

For confirmation of which services may be eligible for coverage and description of when medical services are considered medically necessary, not medically necessary, or investigational, please contact:

- Blue KC Provider Hotline for Commercial lines of Business 816-395-3929
- Affordable Care Act Provider Hotline 866-859-3822
- Blue Medicare Advantage Provider Hotline 866-508-7140

In the event of a conflict between any policies, the Member's coverage document will govern.



Description/Application

Telehealth refers to the delivery of healthcare services, using technology like video conferencing or remote monitoring, to patients in a location different from where the provider is located. Telehealth enables healthcare access for individuals who may face geographic barriers, mobility limitations, or other challenges. It also promotes efficient use of healthcare resources and improves patient engagement.

Policy

New for 2025

Audio-only telephone services, CPT codes 99441-99443, have been deleted and replaced with 98008 – 98015. Blue KC will accept both the new 2025 telehealth codes 98000 – 98016 and office visit codes 99202-99215 for telehealth evaluation and management services with the correct telehealth place of service code 02 or 10.

Telehealth CPT codes

Blue KC does follow the Medicare List of Approved Telehealth Services

To be considered for reimbursement a telehealth service must appear on the Medicare list of approved telehealth services.

Modifiers 95, GT, GQ and G0 are not required to identify Telehealth services but are accepted as informational only if reported on claims with eligible Telehealth services.

Distant site practitioners who can provide and receive payment for covered telehealth services (subject to state law) are:

- Physicians
- Nurse practitioners (NPS)
- Physician assistants (PAs)
- Nurse-midwives
- Clinical nurse specialists (CNSs)
- Certified registered nurse anesthetists
- Clinical psychologists (CPs) and clinical social workers (CSW's)
- Registered dietitians or nutrition professionals

Documentation requirements for telehealth service are the same as a face-to-face encounter.

Best practice suggests that documentation should also include a statement that the service was provided through telehealth, both the location of the patient and the provider and the names and roles of any other persons participating in the telehealth service.



Originating Site

The originating site is the location where the patient is located and receives medical services through a telecommunications system.

HCPCS code Q3014 (Telehealth originating site), and revenue code 0780 (Telehealth general classification, used to bill for facility fees associated with telehealth originating site) are considered mutually exclusive to other telehealth services and are not separately reimbursable.

Blue KC will not reimburse telehealth services for non-direct patient services (Lab, immunizations, drug injections etc.)

Coding

[CMS List of Approved Telehealth Services](#)

References and Resources

Blue KC Provider Reference Guide
Centers for Medicare and Medicaid Services
American Medical Association

Related Documents

POL-PP-236 CPT Evaluation and Management Guidelines

Revision History

Date	Summary of Revisions
7/1/2019	Initial version
11/6/2019	Additional telehealth services added, 99201-99215, 99231-99233, 99307-99310, G0420-G0421, G0108-G0109, 96150 – 96154, 90832-90838, 90791 – 90792, 90951, 90952, 90954, 90955, 90957, 90958, 90960, 90961, 90963, 90964, 90965, 90966, 90967, 90968, 90970, G0270, 97802-97804, 96116, G0463, G0437, 99046, 90947, G0396, G0397, G0442, G0443, G0444, G0445, G0446, G0447, 99495, 99496, 99497, 99498, 90845, 90846, 90847, 99354, 99355, 99356, 99357, G0438, G0439, G0296, 90785, 96160, 96161, G0506, 90839, 90840, G0513, 60514 3/16/20, additional temporary telehealth codes added, due to COVID-19 pandemic, 99341, 99342, 99344, 99345, 99347, 99348, 93949, 99441, 99442, 99443 3/20/20, the following codes were added after receiving instruction by President Trump for additional Related Policies Policy History telehealth services during the COVID 19 pandemic; 99421, 99422, 99423, 98966, 98967, 98968, 96164, 96165, 96167, 96168, 97155, 97156, 97157, G2010, G2012, G2061, G2062, G2063. New 2020 Health behavior and Intervention codes 96156 – 96159 have also been added.
3/27/2020	Removed codes 99441-99443, 98966-98968. Added beginning and end dates to the use of COVID 19 special telehealth codes March 9th – June 30, 2020. Added to provider telephonic visits to use codes 99201-99215 for the allowable to be the same as in-person office visit. Added “these visits would be at no member cost share” to G2010- G012, 99241-99243, G2061-G2063, 97155-97157, and verbiage “Behavioral health provider telephonic (call) therapy visits – In order for the allowable to be the same as an in-person therapy visit, you must use the in- person therapy visit code and place of service 02 for telehealth. These therapy visits would be at no member cost share” and “Physical, Occupational or



	Speech Therapy virtual (video) therapy visits – You must use place of service 02 for telehealth. These therapy visits are subject to member therapy cost share.”
6/12/2020	The end date of COVID telehealth codes extended to 7/25/2020.
12/4/2020	Added, Blue KC will not reimburse telehealth services for non-direct patient services (Lab, immunizations, drug injections etc.).
1/20/2021	Changed through date of COVID telehealth to “When the public health emergency is declared over.”
7/1/2021	Annual Review - Added modifiers 95, G0, GT, and GQ, added Place of Service 02 – Telehealth is the location where health services and health related services are provided or received through a telecommunication system.
4/27/2022	Added place of service 10, telehealth provided in patient’s home
7/1/2022	Annual review, added under COVID 19 Providers who usually provide services in the office should use POS 11 (not POS 02) for their telehealth services during the COVID-19 PHE. Modifier 95 should be appended to these office codes to identify them as telehealth.
4/4/2023	Updated cost share information post PHE. Added extended telehealth access through 12/31/2024.
7/1/2023	Added, Blue KC follows CMS list of approved telehealth services and the lines of business the policy applies to.
3/14/2024	Added new expanded CMS telehealth guidelines for 2024
7/1/2024	Annual review, formatting changes and post covid language.
8/26/2024	Added The below listed modifiers are required on telehealth services to specify the type of technology used
9/24/2024	Removed language saying telehealth modifiers are required on telehealth services
1/1/2025	Added new telehealth office/outpatient codes 98000-98015. Removed guidelines ending in 2024.
4/25/2025	Clarified Blue KC does follow the Medicare List of Approved Telehealth Services with the exception of codes 98000-98015 which Medicare has chosen not to adopt
5/1/2025	Added Blue KC will allow new telehealth codes 98000-98016 or office visit codes 99202-99215 for telehealth evaluation and management services.
7/1/2025	Annual review, revenue code 0780 Telemedicine – General classification added as mutually exclusive to other telehealth services and not separately reimbursable