## **Telehealth Services by Payer**

Payer	Telemedicine E/M Visits, etc. *For full list see CMS or payer specifics	<u>Online</u> <u>E-Visits</u> 99421- 99423	Audio-Video Evaluations 98000 – 98007	Audio Only Evaluations 98008 – 98015	<u>Virtual</u> <u>Check-In</u> 98016	Coverage & Place of Service (POS) Notes
Aetna Commercial	$\checkmark$					POS 10 or POS 02 <u>with</u> modifier 95
Aetna Medicare	$\checkmark$					POS 10 or POS 02 <u>with</u> modifier 95
Wellpoint TennCare	$\checkmark$					POS 10 or POS 02 with <u>No Modifier 95</u> or POS where service would typically be rendered if face to face with modifier 95
Wellpoint Medicare	$\checkmark$					POS 10 or POS 02 with <u>No Modifier 95</u>
BCBS of TN Commercial & Medicare Advantage Plan	~					POS 10 or POS 02 with <u>No Modifier 95</u> or POS where service would typically be rendered if face to face with modifier 95
BlueCare, TennCare Select & Cover Kids	~					POS 10 or POS 02 with <u>No Modifier 95</u> or POS where service would typically be rendered if face to face with modifier 95
Cigna Commercial	$\checkmark$					POS 02 Only with modifier 95
Cigna Medicare (Ending)	$\checkmark$					Effective 1/1/2024 POS 10 or POS 02 with No Modifier 95
CMS Traditional Medicare	~	~	X Report E/M	X Report E/M with mod. 93	~	Effective 1/1/2024 POS 10 or POS 02 with <u>No Modifier 95</u> PHE Telehealth Flexibilities extended until March 31, 2025 CMS does NOT cover 2025 Telemedicine Codes – Report appropriate E/M equivalent through March 31, 2025
Humana Commercial (Ending)	~	$\checkmark$				POS 10 or POS 02 with <u>No Modifier 95</u> or POS where service would typically be rendered if face to face with modifier 95
Humana Medicare	~	~				POS 10 or POS 02 with <u>No Modifier 95</u> or POS where service would typically be rendered if face to face with modifier 95
Tricare East	$\checkmark$					POS 10 or POS 02 with <u>GT Modifier</u>
TriWest or Optum VA Community Care Network	~					AUTHORIZATION IS REQUIRED Effective 1/1/2024 POS 10 or POS 02 with <u>No Modifier 95</u>
UHC Commercial (Self-Funded Plans may not follow Commercial)	~	$\checkmark$	X Report E/M	X Report E/M		POS 10 or POS 02 with <u>No Modifier 95</u> UHC does NOT cover 2025 Telemedicine Codes – Report appropriate E/M equivalent
UHC Community Plan (Tenncare Medicaid)	~	$\checkmark$	X Report E/M	X Report E/M		POS 10 or POS 02 with <u>No Modifier 95</u> UHC does NOT cover 2025 Telemedicine Codes – Report appropriate E/M equivalent
UHC Medicare Advantage	~	$\checkmark$	X Report E/M	X Report E/M		POS 10 or POS 02 with <u>No Modifier 95</u> UHC does NOT cover 2025 Telemedicine Codes – Report appropriate E/M equivalent
WellCare	$\checkmark$					POS 10 or POS 02 with <u>No Modifier 95</u>

## \*\*\*Items in RED text indicate no 2025 Payer Updates – Follow 2024 Telehealth Guidelines\*\*\*

Place of Service (POS) 02: Telehealth Provided Other than in Patient's Home

Place of Service (POS) 10: Telehealth Provided in Patient's Home

Modifier 93 - Synchronous Telemedicine Service Rendered Via Telephone or Other Real-Time Interactive <u>Audio-Only</u> Telecommunications System Modifier 95 - Synchronous Telemedicine Service Rendered Via a Real-Time Interactive <u>Audio and Video</u> Telecommunications System

Note: This information is a general guide based on published payor policies available at the time of publication and is subject to change. Coverage, deductible, coinsurance, and copay is based upon payor/plan specifics and/or payor contracts. This guide is not meant to be a guarantee of reimbursement. Last updated: 2/7/2025