

Code	Description	Medicaid FFS Rate
Laboratory Codes		
U0001	CDC lab tests for SARS-CoV-2 (COVID-19)	\$35.92
U0002	Non-CDC lab tests for SARS-CoV-2/2019-nCoV (COVID-19)	\$51.33
87635	Infectious agent detection by nucleic acid (DNA or RNA); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)	To be determined; manually price until rate is established
Physical Health Services		
	<p>MCOs should allow the providers to continue to bill their services as they are currently doing. A service provided via telehealth would be billed using one of the following modifiers. Reimbursement will not be affected by the use of modifier.</p> <p>-GQ: Telehealth store and forward (or) -GT: Interactive telecommunication (or) -95: Synchronous Telemedicine Service Rendered via Real-Time Interactive Audio and Video Telecommunications System.</p>	At the same rate as face-to-face encounters/visits.
Other Telehealth Options		
Physician Telephone Services		
99441	Telephone Evaluation and Management (E&M) service provided by a physician to an established patient, parent or guardian not originating from a related E&M service provided within the previous 7 days nor leading to an E&M service or procedure within the next 24 hours or soonest available appointment, 5-10 minutes of medical discussion.	\$55.34
99442	Same as above - 11-20 minutes of medical discussion	\$101.71
99443	Same as above - 21-30 minutes of medical discussion	\$135.63
Non-physician Telephone Services		
98966	Telephone assessment and management service provided by a qualified nonphysician health care professional to an established patient, parent or guardian not originating from a related assessment and management service provided within the previous 7 days nor leading to an assessment and management service or procedure within the next 24 hours or soonest available appointment - 5-10 minutes of medical discussion	\$12.05
98967	Same as above - 11-20 minutes of medical discussion	\$23.78

98968	Same as above - 21-30 minutes of medical discussion	\$34.88
<i>Interprofessional Consultation Codes</i>		
99451	Reported by the consultant, allowing him/her to access data/information through the electronic health record, in addition to telephone or internet - 5 minutes	\$33.25
99452	Reported by the requesting/treating physician or qualified health provider (e.g. the PCP) - 30 minutes	\$33.25
<i>Real-Time Interactive Audio/Video</i>		
99421	Non face-to-face online digital E&M service for an established patient, for up to 7 days cumulative time during the 7 days - 5-10 minutes	\$39.59
99422	Same as above - 11-20 minutes	\$65.66
99423	Same as above - 21 or more minutes	\$96.31
<i>Other Telehealth Codes – Assessing and Monitoring</i>		
G2010	Remote evaluation of recorded video and/or images submitted by an established patient (e.g., store and forward), including interpretation with follow-up with the patient within 24 business hours, not originating from a related E&M service provided within the previous 7 days nor leading to an E&M service or procedure within the next 24 hours or soonest available appointment.	\$11.52
G2012	Brief communication technology - based service (e.g., virtual check - in) by a physician or other qualified health care professional who can report E&M services, provided to an established patient, not originating from a related E&M service provided within the previous 7 days nor leading to an E&M service or procedure within the next 24 hours or soonest available appointment - 5-10 minutes of medical discussion or just "brief check-in by MD/QHP" for short, used in medical care.	\$13.03
G2061	Qualified nonphysician healthcare professional online assessment, for an established patient, for up to 7 days, cumulative time during the 7 days - 5-10 minutes.	\$10.90
G2062	Same as above - 11-20 minutes.	\$19.20
G2063	Same as above - 21 or more minutes.	\$30.07
<i>Dental Telehealth Codes</i>		

D9995	Teledentistry synchronous real-time: when the dentist and participant interact as if they were having a face-to-face service. Services that can be provided effectively telephonically without real-time video may also be covered via telehealth. The code will be reimbursed at the same rate as D0140- face-to-face limited oral evaluation (problem focused) service. Providers must continue to maintain appropriate documentation of all services provided and related to medical necessity.	\$28.94
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Telehealth Billing for Federally Qualified Health Centers (FQHCs), Rural Health Centers (RHCs), Hospital-Based RHCs (HBRHCs), and the Indian Health Services (IHS)

780	<p>Telemedicine General classification</p> <p>A telehealth service that is rendered with the patient present should be billed using the appropriate clinic visit revenue code. The telehealth service must be reported separately using revenue code 0780 and HCPCS code Q3014-Telehealth Originating Site -Facility Fee</p> <p>A service rendered through telehealth only should be billed as a single line of service using their current face-to-face encounter revenue code and HCPCS code Q3014 to identify this as a telehealth service. HSD is currently working with Fiscal Agent to accommodate the processing of this type of service to ensure accurate reimbursement.</p>	Reimbursed at the encounter/OMB rate
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Behavioral Health Telephonic Visits – Authorized Codes

90832	90833	90834	90836
90837	90838	90839	90840
90846	90847	90849	H0049
H0050	G0175	S0220	G0444
G0443	G0406	G0407	G0408
H0015	H0025	H0031	H0038
H0039	H2000	H2011	H2015
H2033	T1001	T1007	90785
90791	90792	99201	99202
99203	99204	99205	99211
99212	99213	99214	99215
99217	99218	99219	99220

90853	90863	99241	99242
99244	99245	99406	99243
99407	Rev Code 0513		
<i>Applied Behavior Analysis (ABA) Authorized codes</i>			
T1026	0362T	97156	97152
97151	97153	0373T	97155