

Telehealth Policy and Reimbursement Fact Sheet

Updated August 14, 2023

Medicaid

1. According to [All Provider Bulletin 374](#) (July 2023), MassHealth will continue reimbursing a broad range of services via telehealth **at parity**, including services provided through live video, audio-only, or asynchronous visits. Because there is no end date, it is a policy that is likely **in perpetuity**.
2. Billing for Services Provided via Telehealth must include:
 - a. Point of Service (POS) code and a modifier; **the claim will be denied without either one listed**.
 - i. POS **10 (patient's home)** or **2 (setting other than patient's home)**
 - ii. Modifiers:
 1. 93: synchronous audio-only telehealth (replaced V3)
 2. 95: synchronous audio-video telehealth
 3. GQ: asynchronous telehealth
 4. FQ: counseling and therapy services using audio-only
 - iii. 93 is only allowed with codes listed in [Appendix T](#) of the CPT codebook; 95 is allowed only with codes listed in [Appendix P](#)
3. Bulletin 374 (July 2023) also notes MassHealth's intention to introduce coverage for remote patient monitoring (RPM) for chronic disease management. Future bulletins published [here](#) will announce scope and other details.

Medicare

4. The PHE expired on **May 11, 2023**.
5. The Consolidated Appropriations Act (CAA) of 2023 extended many of the telehealth flexibilities authorized during the PHE through **December 31, 2024**, including:
 - a. [FQHCs can act as distant site providers](#) and bill Medicare for telehealth services.
 - b. Implementation of in-person mental health telehealth requirement: in-person visit within the first 6 months of an initial telehealth visit and every 12 months thereafter (new start date = January 1, 2025).
6. CMS aligned the availability of services on the Physician Fee Schedule CY 2023 with the extension timeframe enacted by CAA of 2023.
 - a. FQHCs may provide **any** services in the [CMS List of Telehealth Services \(2023\)](#).
7. All qualifying telehealth services are billed and reimbursed with FQHC specific G code, G2025, at CY 2023 rate \$98.27.
8. Mental Health Visit Using Telehealth was made **permanent** for FQHCs after January 1, 2022 for qualifying visits under [FQHC-PPS visit codes](#) G0469 & G0470.
 - a. **Audio-only (modifier FQ)** is allowed when beneficiary is not capable of or does not consent to **audio-video (modifier 95)** technology.

Commercial Payers

9. Blue Cross Blue Shield is no longer reinstating pre-COVID reimbursement rates for primary care and chronic condition telehealth visits at 80% parity on July 1, 2023. They announced February 17, 2023, they will continue to pay for services at parity indefinitely.
10. Point32Health, parent organization of Harvard Pilgrim Health Care and Tufts Health Plan, has resumed reduced reimbursement for primary care and chronic condition telehealth visits at 80% parity effective March 1, 2023.
11. Because telehealth coverage varies by private payer:
 - a. Seek out information from the payer about:
 - i. What CPT and HCPC codes can be delivered via telehealth
 - ii. What modifiers are needed
 - iii. What is the correct POS
 - iv. Which providers are eligible
 - v. If there are any other restrictions
 - b. By Massachusetts Law, behavioral health services delivered via audio-video and audio-only shall be no less than the rate of the payment for the same service delivered in-person

Additional Resources

12. [CMS Waivers, Flexibilities, and the End of the COVID-19 Public Health Emergency](#)
13. [FQHC Physicians and Other Clinicians: CMS Flexibilities to Fight COVID-19](#)
14. [NACHC Telehealth Reimbursement Tip Sheet](#)
15. [NACHC Telehealth Documentation Tip Sheet](#)
16. [NACHC Telehealth E/M Coding Tip Sheet](#)