



May 19, 2020

MEDICARE COVERAGE FOR TELEPHONE-ONLY SERVICES

CMS has confirmed that the Medicare program will now cover audio-only telephone evaluation and management (E/M) services during the COVID-19 public health emergency. Payments will be retroactive to March 1, 2020 and will be increased to match standard fees for similarly-timed office and outpatient visits. Claims for telephone services that were previously denied or paid at the lower rate will be automatically reprocessed.

This new rule will permit reimbursement for E/M telephone codes 99441, 99442, and 99443:

99441 - Telephone evaluation and management service by a physician or other qualified health care professional who may report evaluation and management services provided 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 decision

99442 - 11-20 minutes of medical discussion

99443 - 21-30 minutes of medical discussion

These codes may be billed along with the traditional psychotherapy add-on codes (i.e., 90833 for a 30 minute session, 90836 for a 45 minute session and 90838 for a 60 minute session). However, as the telephone codes are time-based and not based on documentation of elements, we strongly suggest that when billing with an add-on code psychiatrists limit their use to 99441, which requires a minimum of five minutes of medical discussion. Codes 99442 and 99443 performed in connection with a psychotherapy add-on code will require longer than usual face-to-face time with the patient. If you plan to provide telephone (audio-only) services, you must use telephone service code 99441 in place of the traditional E/M code for office or outpatient visits (99212 or 99213).

Reimbursement will also be provided for the following CPT[®] codes provided via telephone:

- 90785 (interactive complexity)
- 90792 (psychiatric diagnostic evaluation)
- 90839 and 90840 (psychotherapy for crisis)
- 90845 (psychoanalysis)
- 90846 (family psychotherapy without the patient present)
- 90847 (family psychotherapy with the patient present)
- 90853 (group psychotherapy)

In addition, although not customarily required in connection with an E/M code, we recommend documentation of start and stop times for telephone sessions in order to confirm the time spent with the patient.

Please keep in mind that this new coverage is for services provided via telephone only and should only be used during the pendency of the public health emergency. Telemedicine services provided via two-way audio-video technology should continue to be billed using the traditional E/M codes (e.g., 99212 or 99213) plus a psychotherapy add-on code. With respect to both telephone-only services and telemedicine services, the claim should be accompanied by modifier 95 (or other modifier required by the individual carrier). In addition, for such services provided during the public health emergency that otherwise would have been provided in an office or outpatient setting, continue to use Place of Service Code 11 until the emergency has ended.

To view the new fee schedules for telephone services please [click here](#).

For additional information, please see the APA page devoted to Telepsychiatry and COVID-19, which can be accessed by [clicking here](#).



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