BCBSM Update - Telehealth billing changes and new telehealth FAQ document

May 8, 2020

We've updated telehealth documents to reflect changes for billing telehealth visits, and we created a new document, <u>Telehealth: Frequently asked questions</u> <u>for providers</u>.

You can find all of these documents in the telehealth sections of our coronavirus webpages, which are available through Provider Secured Services and on our public website at <u>bcbsm.com/coronavirus</u> (click <u>For Providers</u>).

Billing changes

We've made the following billing changes.

• **Place of service:** When billing for telehealth services during the COVID-19 pandemic, providers can temporarily include the code for the place of service in which they would normally provide the service, rather than place of service 02. Providers must include the GT or 95 modifier to ensure that cost share is waived for appropriate services.

We updated the following documents to reflect this change; see the guides for complete information.

- <u>Telehealth for medical providers</u>
- Telehealth for behavioral health providers
- <u>Telehealth procedures codes for COVID-19</u>
- **Outpatient psychiatric centers:** We revised the OPC billing instructions to request that you place the licensure level (level of care) for the rendering provider first on claims. The telemedicine modifier (GT or 95) should appear second. Then, include place of service 02. See the guide for complete information.

We updated the <u>Telehealth for behavioral health providers</u> document to reflect this change.

Telehealth: Frequently asked questions for providers We created a <u>Telehealth: Frequently asked questions for providers</u> document. This document answers general questions about telehealth and questions that are specific to telehealth visits during the COVID-19 pandemic.

BCBSM Telehealth PDF Released on April 28, 2020 CLICK HERE