

Proper Billing for Telehealth Services Claims

June 10, 2020

CMS received a high volume of paper CMS-1500 claim forms for telehealth services with dates of service during the PHE that they have to reject because they are improperly coded with two different POS codes on one claim (example 11-office, 02-telehealth).

The CMS-1500 paper claim form cannot contain more than one POS. This rule does not apply to electronic (837) claims.

The PHE is effective for services performed on and after 3/1/2020. At this time, there is no end date to the PHE.

If you are offering telehealth services as part of the PHE, those claims should be submitted with the POS from where the face-to-face service is normally performed (e.g., office POS 11, hospital POS 21) and include modifier 95 to identify this as a telehealth service during the PHE; this is the preferred method for submission.

If you are offering telehealth services as you would under normal circumstances, you may continue to bill your POS as 02 and include modifier 95 to identify that the service was provided during the PHE; which will be paid at the facility fee schedule rate.