

Molina COVID Telehealth Billing Policy- Physical Health

Line of Business	Modality	Covered without Prior Auth- Molina PAR Provider	Covers COVID & Non-COVID Related Care	Cost Share if Applicable for Non-COVID Related Care	Billing Guidelines	Other Guidance (Molina Preferred Coding, etc.)
Medicaid	<u>Telemedicine</u> HIPAA Compliant Audio-Visual	Yes	Yes	N/A	HCA	<p>Bill the service code you would usually that denotes the service rendered.</p> <p>Use the place of service code that describes where the member is - 02 - Telehealth Provided Other than in Patient's Home 10 - Telehealth Provided in Patient's Home</p> <ul style="list-style-type: none"> • Add modifier 95 if the distant site is designated as a nonfacility. • Nonfacility providers must add modifier 95 to the claim to receive the nonfacility payment.
Medicaid	<u>Telehealth</u> Audio-Only/Phone	Yes	Yes	N/A	HCA	<p>Telehealth services should be submitted with appropriate service codes representing the level of work most appropriate as if the patient was seen face to face. Use modifier 93 for physical health and modifier FQ for behavioral health. See HCA's COVID-19 fee schedule for services that still require modifier CR.</p> <p>93 Synchronous Telemedicine Service Rendered Via Telephone or Other Real-Time Interactive Audio-Only Telecommunications System FQ The service was furnished using audio-only communication technology</p>

Marketplace	Telemedicine HIPAA Compliant Audio-Visual	Yes	Yes	Yes	CMS HCA Molina	<p>Telemedicine Services should be billed as follows:</p> <p>Non Facility Setting - For payment parity Providers should submit the appropriate E&M code representing the level of work most appropriate and with the same POS indicator as if the patient was seen face to face (e.g., office E&M code with POS 11) and submit with modifier 95 or modifier GT. Applicable cost share will apply except for COVID-19 testing (new COVID-19 lab codes, office/outpatient E&M's) and vaccine consultations (OIC Emergency Order 21-02)</p> <p>Facility Setting - Telemedicine services submitted with POS 02 will be paid at the facility allowable. Molina will also allow the appropriate E&M code representing the level of work most appropriate and with the same POS indicator as if the patient was seen face to face (e.g. office/outpatient E&M code with POS 19) and submit with modifier 95 or modifier GT. Applicable cost share will apply except for COVID-19 testing (new COVID-19 lab codes, office/outpatient E&M's, emergency department E&M's, emergency department revenue codes) and vaccine consultations (OIC Emergency Order 21-02).</p>
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Marketplace	Telehealth Audio-Only/Phone	Yes	Yes	Yes	CMS HCA Molina	<p>Telehealth services should be submitted with appropriate service codes representing the level of work most appropriate as if the patient was seen face to face.</p> <p>Use modifier 93 or FQ for audio only services.</p> <p>The place of service code submitted will continue to follow facility and non-facility setting payment differential.</p>
Medicare	Telemedicine HIPAA Compliant Audio-Visual	Yes	Yes	Yes	CMS	<p>Telemedicine services may be submitted with POS 02 or POS 10 and will be paid at the facility allowable regardless of location. Telemedicine claims may also be submitted with the POS code that would have been reported had the service been furnished in person and modifier 95. All Telemedicine claims that are not submitted with POS 02 or POS 10 should include modifier 95.</p>
Medicare	Telehealth Audio-Only/Phone Digital Online/Email FaceTime/Skype	Yes	Yes	Yes	CMS	<p>Telehealth services should be submitted with CMS covered online digital, online, or virtual check-in codes. Applicable cost share will apply. Do not submit modifier 93.</p>

Medicaid	<u>In Person Evaluation and Management</u>	Yes	Yes	N/A	HCA	Bill per HCA publications
Marketplace	<u>In Person Evaluation and Management</u>	Yes	Yes	Yes	N/A	Use the place of service code that describes where the service was rendered.
Medicare	<u>In Person Evaluation and Management</u>	Yes	Yes	Yes	CMS	Bill per CMS publications