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**PAYMENT POLICY ID NUMBER** 20-069

**Original Effective Date:** 01/01/2021

**Revised:** 01/01/2022

## **Virtual Visits**

**THIS PAYMENT POLICY IS NOT AN AUTHORIZATION, CERTIFICATION, EXPLANATION OF BENEFITS, A GUARANTEE OF PAYMENT, NOR DOES IT SUBSTITUTE FOR OR CONSTITUTE MEDICAL ADVICE. ALL MEDICAL DECISIONS ARE SOLELY THE RESPONSIBILITY OF THE PATIENT AND PHYSICIAN. BENEFITS ARE DETERMINED BY THE GROUP CONTRACT, MEMBER BENEFIT BOOKLET, AND/OR INDIVIDUAL SUBSCRIBER CERTIFICATE IN EFFECT AT THE TIME SERVICES WERE RENDERED. THIS PAYMENT POLICY APPLIES TO ALL LINES OF BUSINESS AND PROVIDERS OF SERVICE. IT DOES NOT ADDRESS ALL POTENTIAL ISSUES RELATED TO PAYMENT FOR SERVICES PROVIDED TO FLORIDA BLUE MEMBERS AS LEGISLATIVE MANDATES, PROVIDER CONTRACT DOCUMENTS OF THE MEMBER'S BENEFIT COVERAGE MAY SUPERSEDE THIS POLICY.**

### **DESCRIPTION:**

A Virtual Visit is an evaluation and management service or other service by a provider where patient care, treatment or services are rendered, in place of an in-person visit, through the use of real-time interactive audio and video telecommunications. Virtual Visits provide providers with the option of delivering office/outpatient care services to our members via a virtual visit when appropriate.

Effective 01/01/2021, Florida Blue will allow Virtual Visits as a covered member benefit.

A Virtual Visit does not include the provision of services solely through:

- (1) audio-only telephone;
- (2) email messages;
- (3) text messages;
- (4) facsimile transmission;
- (5) U.S. Mail or other parcel service; or
- (6) any combination thereof.

To be eligible to offer Virtual Visits, a physician practice must be in Network and deliver virtual visits consistent with the following:

- Technology
  - Use of an interactive audio and video telecommunications system that permits real-time communication between you at the distant site, and the beneficiary at the originating site.
  - Technology must comply with CMS telehealth guidelines and remain HIPAA compliant.

- A contract with a vendor partner will exist between the provider and vendor.
- Standard of Care
  - A provider has the duty to practice in a manner consistent with his or her scope of practice and the prevailing professional standard of practice for a health care professional who provides in-person health care services to Florida patients.

**REIMBURSEMENT INFORMATION:**

Virtual visits must be reported with the appropriate Current Procedural Terminology (CPT®) or Healthcare Common Procedure Coding System (HCPCS) code(s) that describes the virtual visit. Modifier -95 or -GT must be appended, indicating the use of interactive audio and video telecommunications technology. The service should also be reported using place of service code 02 or 10 to indicate the location where the member received the services through a telecommunication system.

If multiple virtual visits are performed on the same date of service, the visits should be combined into a single evaluation and management (E/M) code. If a face to face visit is performed on the same day as a virtual visit, the visits should be combined into a single E/M code. If multiple E/M codes are reported by the same practitioner on the day for the same patient, only one E/M code will be allowed.

**BILLING/CODING INFORMATION:**

**Modifiers**

<b>Modifier</b>	<b>Modifier Description</b>
95	Synchronous Telemedicine Service Rendered via Real-Time Interactive Audio and Video Telecommunications System. Synchronous telemedicine service is defined as a real-time interaction between a physician or other qualified healthcare professional and a patient who is located at a distant site from the physician or other qualified healthcare professional.
GT	Via interactive audio and video telecommunication systems

**Place of Service Codes**

<b>Place of Service Code</b>	<b>Place of Service Name</b>	<b>Place of Service Description</b>
02	Telehealth Provided Other than in Patient's Home	The location where health services and health related services are provided or received, through telecommunication technology. Patient is not located in their home when receiving health services or health related services through telecommunication technology.

Place of Service Code	Place of Service Name	Place of Service Description
10	Telehealth Provided in Patient's Home	The location where health services and health related services are provided or received, through telecommunication technology. Patient is located in their home (which is a location other than a hospital or other facility where the patient receives care in a private residence) when receiving health services or health related services through telecommunication technology.

**RELATED MEDICAL COVERAGE GUIDELINES OR PAYMENT POLICIES:**

Evaluation and Management Services by Physicians in the Same Group Practice 20-068  
 Evaluation and Management for Office or Other Outpatient Services 21-070

**REFERENCES:**

1. American Medical Association, *Current Procedural Terminology (CPT®), Professional Edition*
2. CMS Place of Service Code Set, [https://www.cms.gov/Medicare/Coding/place-of-service-codes/Place\\_of\\_Service\\_Code\\_Set](https://www.cms.gov/Medicare/Coding/place-of-service-codes/Place_of_Service_Code_Set)

**GUIDELINE UPDATE INFORMATION:**

01/01/2021	New policy established
01/21/2021	Revised: Clarified description of virtual visits.
01/01/2022	Annual Review – Place of service 10 added to “Reimbursement Information” section and Place of Service code descriptions added to “Billing/Coding Information” section.

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