

INFORMATIONAL LETTER NO. 2115-MC-FFS

DATE: March 11, 2020

TO: Iowa Medicaid Hospital, Physician MD, Physician DO, Podiatrist, Optometrist, Rural Health Clinic (RHC), Clinic, Community Mental Health Center (CMHC), Psychologist, Certified Nurse Midwife, Certified Registered Nurse Anesthetist (CRNA), Clinical Social Worker, Federally Qualified Health Center (FQHC), Nurse Practitioner (NP), Behavioral Health and Physician Assistant Providers, Area Education Agency (AEA), and Local Education Agency (LEA)

APPLIES TO: Managed Care (MC), Fee-for-Service (FFS)

FROM: Iowa Department of Human Services (DHS), Iowa Medicaid Enterprise (IME)

RE: Billing Services Related to Coronavirus and COVID-19

EFFECTIVE: See Specific Direction Identified in the Tables Below

The purpose of this Informational Letter is to specifically address guidance on covered services available for claims billing. The Iowa Medicaid Enterprise (IME) and Managed Care Organizations (MCOs) continues to closely monitor the guidance provided from the Centers for Medicare and Medicaid Services (CMS), Iowa Department of Public Health ([IDPH](https://idph.iowa.gov)¹), Centers for Disease Control and Prevention ([CDC](https://www.cdc.gov)²), and Johns Hopkins University [Coronavirus Resource Center](https://coronavirus.jhu.edu)³ regarding the COVID-19 outbreak caused by the novel coronavirus, SARS-COV-2. In an effort to provide up-to-date information the Department has posted information related to the Coronavirus and COVID-19 on its [website](#)⁴. Additional information will be added to the DHS website as it becomes available.

The CMS also issued COVID-19 coding guidance related to a new ICD-10-CM diagnosis code for the COVID-19, effective with the next update on October 1, 2020. See the [announcement](#)⁵ and [interim coding guidance](#)⁶ for more information.

¹ <https://idph.iowa.gov/Emerging-Health-Issues/Novel-Coronavirus>

² <https://www.cdc.gov/coronavirus/2019-ncov/index.html>

³ <https://coronavirus.jhu.edu/>

⁴ <https://dhs.iowa.gov/ime/providers/claims-and-billing/coronavirus>

⁵ <https://www.cdc.gov/nchs/data/icd/Announcement-New-ICD-code-for-coronavirus-2-20-2020.pdf>

⁶ <https://www.cdc.gov/nchs/data/icd/ICD-10-CM-Official-Coding-Gudance-Interim-Advice-coronavirus-feb-20-2020.pdf>

The tables below identify services available for provider billing. Codes that by definition are only used for *established patients* will now be available for any physician who is part of a patient's physician provider group.

| Virtual Care Services | | |
|-----------------------|--|----------------|
| Code | Description | Effective Date |
| 99451 | Interprofessional telephone/Internet/electronic health record assessment and management service provided by a consultative physician, including a written report to the patient's treating/requesting physician or other qualified health care professional, 5 minutes or more of medical consultative time. | March 6, 2020 |
| 99452 | Interprofessional telephone/Internet/electronic health record referral service(s) provided by a treating/requesting physician or other qualified health care professional, 30 minutes. | March 6, 2020 |
| 99453 | Remote monitoring of physiologic parameter(s) (e.g., weight, blood pressure, pulse oximetry, respiratory flow rate), initial; set-up and patient education on use of equipment. | March 6, 2020 |
| 99454 | Remote monitoring of physiologic parameter(s) (e.g., weight, blood pressure, pulse oximetry, respiratory flow rate), initial; device(s) supply with daily recording(s) or programmed alert(s) transmission, each 30 days. | March 6, 2020 |
| 99457 | Remote physiologic monitoring treatment management services, clinical staff/physician/other qualified health care professional time in a calendar month requiring interactive communication with the patient/caregiver during the month; first 20 minutes. | March 6, 2020 |
| 99491 | Chronic care management services, provided personally by a physician or other qualified health care professional, at least 30 minutes of physician or other qualified health care professional time, per calendar month, with the following required elements: multiple (two or more) chronic conditions expected to last at least 12 months, or until the death of the patient; chronic conditions place the patient at significant risk of death, acute exacerbation/decompensation, or functional decline; comprehensive care plan established, implemented, revised, or monitored. | March 6, 2020 |

| Virtual Care Services | | |
|-----------------------|--|----------------|
| Code | Description | Effective Date |
| G2010 | Remote evaluation of recorded video and/or images submitted by an established patient (e.g., store and forward), including interpretation with follow-up with the patient within 24 business hours, 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. | March 6, 2020 |
| G2012 | Brief communication technology-based service, e.g., virtual check-in, by a physician or other qualified health care professional who can report evaluation and management services, provided to an established patient, 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 discussion. | March 6, 2020 |
| 99421 | Online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 5-10 minutes. | March 6, 2020 |
| 99422 | Online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 11-20 minutes. | March 6, 2020 |
| 99423 | Online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 21 or more minutes. | March 6, 2020 |
| 99458 | Remote physiologic monitoring treatment management services, clinical staff/physician/other qualified health care professional time in a calendar month requiring interactive communication with the patient/caregiver during the month; each additional 20 minutes (List separately in addition to code for primary procedure. | March 6, 2020 |

The procedure codes in the tables below are existing codes and are available to use for telehealth video visits and phone visits for those without video capability. Iowa Medicaid recognizes modifier 95- Synchronous Telemedicine Service Rendered via Real-Time Interactive Audio and Video Telecommunications System, **as informational only**.

| Telehealth Related Services | |
|-----------------------------|---|
| Code | Description |
| 99202 | Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: An expanded problem focused history; An expanded problem focused examination; Straightforward medical decision making. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of low to moderate severity. Typically, 20 minutes are spent face-to-face with the patient and/or family. |
| 99203 | Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: A detailed history; A detailed examination; Medical decision making of low complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate severity. Typically, 30 minutes are spent face-to-face with the patient and/or family. |
| 99204 | Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: A comprehensive history; A comprehensive examination; Medical decision making of moderate complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Typically, 45 minutes are spent face-to-face with the patient and/or family. |
| 99205 | Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: A comprehensive history; A comprehensive examination; Medical decision making of high complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Typically, 60 minutes are spent face-to-face with the patient and/or family. |
| 99211 | Office or other outpatient visit for the evaluation and management of an established patient that may not require the presence of a physician or other qualified health care professional. Usually, the presenting problem(s) are minimal. Typically, 5 minutes are spent performing or supervising these services. |

| Telehealth Related Services | |
|------------------------------------|---|
| Code | Description |
| 99212 | Office or other outpatient visit for the evaluation and management of an established patient, which requires at least 2 of these 3 key components: A problem focused history; A problem focused examination; Straightforward medical decision making. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self-limited or minor. Typically, 10 minutes are spent face-to-face with the patient and/or family. |
| 99213 | Office or other outpatient visit for the evaluation and management of an established patient, which requires at least 2 of these 3 key components: An expanded problem focused history; An expanded problem focused examination; Medical decision making of low complexity. Counseling and coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of low to moderate severity. Typically, 15 minutes are spent face-to-face with the patient and/or family. |
| 99214 | Office or other outpatient visit for the evaluation and management of an established patient, which requires at least 2 of these 3 key components: A detailed history; A detailed examination; Medical decision making of moderate complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Typically, 25 minutes are spent face-to-face with the patient and/or family. |
| 99215 | Office or other outpatient visit for the evaluation and management of an established patient, which requires at least 2 of these 3 key components: A comprehensive history; A comprehensive examination; Medical decision making of high complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Typically, 40 minutes are spent face-to-face with the patient and/or family. |
| 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 discussion. |

| Telehealth Related Services | |
|-----------------------------|--|
| Code | Description |
| 99442 | 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; 11-20 minutes of medical discussion. |
| 99443 | 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; 21-30 minutes of medical discussion. |

CMS developed the following two new Healthcare Common Procedure Coding System (HCPCS) codes to bill for tests and track new cases of the virus. According to CMS, the Medicare claims processing systems will be able to accept these codes starting on April 1, 2020, for dates of service on or after February 4, 2020.

| Coronavirus Lab Tests | | |
|-----------------------|---------------------------------|----------------|
| Code | Description | Effective Date |
| U0001 | SARS-CoV-2 | March 6, 2020 |
| U0002 | SARS-CoV-2/2019-nCoV (COVID-19) | March 6, 2020 |

It is recognized that members may either a) be quarantined to home or b) self-quarantined due to indirect contact with the COVID-19. Therefore, the virtual care and telehealth codes in this IL have been updated to allow for a provider to deliver Telehealth services to a member if they are quarantined at home.

If you have questions, please contact the appropriate MCO or the IME Provider Services Unit at 1-800-338-7909 or email at imeproviderservices@dhs.state.ia.us