

Coronavirus & Telehealth Cheatsheet

Coronav	rirus & Teleheal	th Cheatsheet	Telecommunication Services		
Alla			Codes	Service Notes	
	Medicare-Approved Telehealth Serv	/ices	Virtual/E-visits		
Service Type Evaluation & Management	Evaluation & Management Other Coc 99202-99205; 99211-99215; G2211-G2212	des	G2010, G2012	 Virtual Check-ins New patient OR Established patient Physician or NPP/QHP Special rules apply 	
Prolonged E/M Services Telephone E/M Services	99354-99357; G0513-G0514 99441-99443		G2251	 Virtual Check-ins Established patient QHP provider who cannot report E/M services Special rules apply 	
		38; 99239; G0425-G0427 G0406-G0408; G0459	G2061-G2063* 99421-99423	1117	
	99291-99292; G0508-G0509; 99468-99469; 99 99341-99345; 99347-99350	9471-99472; 99475-99476	G0074	clinical psychologist) report these codes RHC/FQHC virtual communication or remote evaluation of recorded video/image	
Domiciliary, Rest Home, Custodial	99324-99328; 99334-99337			Telephone	
Advanced Care Planning Annual Wellness Visit			98966-98968	Telephone Assessment & Management Nonphysician practitioners/QHP only Established patient, parent	
Assessment/Care Planning, Cognitive Transitional Care (TCM)	99495-99496		99441-99443	Telephone E/M service	
Ophthalmology Otorhinolaryngologic Services/Procedures Psychiatry	92002; 92004; 92012; 92014 92526; 92550; 92552; 92553; 92555-92557; 92 92607-92610; 92625-92627 90785; 90791; 90792; 90832-90834; 90836-90		99457-99458	Remote Services Remote physiologic monitoring Clinical staff, physician, QHP Time based-per month Primary and add-on codes	
Cardiovascular Services	96105; 96110-96113; 96125, 96127; 96130-96 93797; 93798; 93750; G0422; G0423	:133; 96136-96139	G2250	Remote assessment of recorded video and/or images	
Neurology Services	94002-94005; 94664; G0424 95970-95972; 95983; 95984		99473	Remote monitoring BP device Calibration, education & training Data collection & physician/QHP report	
Emergency Visits	9281-99285; G0425-G0427		99493-99494	Remote psychiatric collaborative care management monitoring • Timed based-per month	
Behavioral Assessments, Counseling, & Education	96156; 96158-96159; 96160-96161; 96164-96165; 96167-96168; 99406-99407; G0108-G0109; G0420-G0421; G0296		G2066	Remote evaluation cardiovascular device, technician review	
Physical, Speech, Occupational, and Adaptive Behavior Therapy	92507; 92508; 92521-92524; 92601-92604; 96116; 96130-96133; 96136-96139; 96156-96171; 97110; 97112; 97116; 97129; 97130; 97150; 97151-97158; 97161-97168; 97530; 97535; 97542; 97750; 97755; 97760-97761; 0362T; 0373T; S9152		G9978-G9986	Continuous intraoperative neurophysiology monitoring BPCI model (Medicare-approved); remote E/M in-home E/M visit	
Nutrition Services/Therapy	97802-97804; G0270		G9868-G9870	CMMI model (Medicare-approved); analysis of remote, asynchronous images, dermatologic/ophthalmologic	
ESRD Services Radiation Treatment Management		innoviHealth, Inc. Copyright 2016-2022	G9481-G9489	CMS innovation center demonstration project (Medicare-approved); remote in-home E/M visit	
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COVID-19 ICD-10-CM Codes

POSITIVE/CONFIRMED

- Confirmed case (symptomatic, asymptomatic, or presumptive positive) (U07.1)
- Personal history of COVID-19 (Z86.16)
- Follow-up visit, post-COVID (Z09 and Z86.16)

NEGATIVE/UNCONFIRMED

- · Exposure to, actual or suspected:
 - asymptomatic (Z20.822)
 - symptomatic, test results inconclusive/unknown (Z20.822)
- Exposure (possible) ruled out (Z03.818)
- Asymptomatic (none or unsure of exposure), ruled out (Z11.59)
- Symptomatic, not confirmed (e.g., rule out, suspected, possible [code symptoms, e.g.,R05 Cough])
- Negative COVID-19 but confirmed other condition or illness (report codes for other condition or illness)
- Antibody testing encounter (non confirmatory) (Z01.84)

SCREENING (Do NOT use during pandemic; report exposure code(s) including for preoperative testing)

Screening asymptomatic individuals (Z11.52)**

MEDICAL CONDITIONS (due to/with COVID): (Sequence U07.1 first ONLY with confirmed cases)

- Acute bronchitis due to COVID-19 (U07.1 and J20.8)
- Acute respiratory distress syndrome (ARDS) (U07.1 and J80)*
- Acute respiratory failure (U07.1 and J96.0-)*
- Lower respiratory infection associated with COVID-19 (J07.1 and [J22 or J98.8, as applicable])
- · Multisystem inflammatory syndrome (MIS-C) with (plus other associated complications if applicable):
 - Current COVID infection (U07.1 and M35.81)
 - Previous COVID infection (M35.81 and B94.8)
 - COVID history, but unknown if COVID is the cause (M35.81 and Z86.16)
 - Known/suspected exposure but not current COVID infection or history of (M35.81 and Z20.822)
- Pneumonia due to COVID-19 (U07.1 and J12.82)
- Nonrespiratory manifestations (sequence U07.1 + manifestation codes)

INPATIENT HOSPITAL EXCEPTION: Hospital inpatient guideline change for COVID-only. Code only provider document or positive test results as U07.1. All "rule out, possible, probable, suspected, or inconclusive" results report as symptoms NOT U07.1.

- COVID infection
- Progressing to sepsis (see Section I.C.1.d. guidelines); In pregnancy (see Section 1.C.15.s.); In newborn (see Section I.C.16.h); In lung transplant patient (see Section I.C.19.g.3.a.)

Other Charges

Some payers allow the use of the following charges billed with telehealth services. Do NOT use these codes if the patient is in their home at the time of service.

G2025 Distant site service furnished by RHC or FQHC only

Q3014 Telehealth originating site facility fee

T1014 Telehealth transmission fee

Place of Service (POS)

During the Public Health Emergency, the POS for telehealth services is reported based on individual payer preferences. Medicare prefers the POS as the place where the service would have taken place if performed in person instead of POS 02, along with modifier 95 to identify telehealth. Medicare patients may receive telehealth services from home.



COVID-19 codes and guidelines can change rapidly. This coding cheat sheet is current as of March 7th, 2022. Visit our Resource Page and verify codes at FindACode.com for continued current information.





Post-COVID Condition

Do **NOT** report code U09.9 with an active

COVID infection. When reporting this

condition, first First code the COVID-

Chronic respiratory failure with hypoxia

· Loss of taste due to COVID (R43.8 and

related condition followed by U09.9.

due to COVID (J96.11 and U09.9)

U09.9)

Collection*

G2023 Home

99211 Office

C9803 Outpatient (hospital)

G2024 Skilled Nursing Facility

* Report with codes G2023 or G2024

Handling/Conveyance

99000 Office to laboratory

99001 Other location (not office) to laboratory

Laboratory Prorated Travel Fees

P9603 miles traveled P9604 trip charge

Testing | Other

GQ

G0

95

CS

CR

U0001 CDC test (real-time RT-PCR panel)

U0002 Non-CDC (any technique, multiple subtypes)

U0003 Nucleic-Acid (high-throughput technologies)

U0004 Any method (high-throughput technologies)

Testing | Testing labs require CLIA certification

Antibody;

COVID-19 SARS-CoV2 Specimen Collection & Testing

86769 multi-step

86408 neutralizing, screen

86409 neutralizing, titer

86328 single step (reagent strip)

86413 quantitative

Infection agent antigen detection;

87426 immunoassay

87428 immunoassay; w/flu A&B

87811 immunoassay w/visual observation

87635 nucleic acid (swab)

87636 DNA/RNA; w/flu A&B and RSV

87637 DNA/RNA; w/flu A&B

Testing | Proprietary Laboratory Analyses (PLA)

0202U BioFire® Respiratory Panel 2.1

0223U QIAstat-Dx Respiratory SARS CoV-2 Panel

0224U COVID-19 Antibody Test

Manufacturer

0225U ePlex® Respiratory Pathogen Panel 2

0226U Tru-Immune™

0240U Xpert® Xpress SARS-CoV-2/Flu/RSV (w/o RSV)

Vaccination Codes

Code Administration

0241U Xpert® Xpress SARS-CoV-2/Flu/RSV (all)

J0005 Add-on for U0003, U0004 when done within 2 days of	AstraZeneca	91302	0021A, 0022A
specimen collection	Janssen	91303	0031A, 0034A
Modifiers	Moderna (100 mcg/0.5 mL)	91301	0011A, 0012A, 0013A
Remote monitoring services are part of a	50 mcg/0.25 mL	91306	0064A
federal telemedicine demonstration project	50 mcg/0.5 mL	91309	0094A
(T) Critical Access Hospital (CAH) method II claims	Novavax	91304	0041A, 0042A
(T) Service for diagnosis/treatment of acute stroke	Pfizer (12+ yrs)	91300	0001A, 0002A, 0003A, 0004A
(T) Identifies services not subject to cost-sharing due to COVID-19 waiver	Tris-sucrose (12+ yrs)	91305	0051A, 0052A, 0053A, 0054A
Cost-Sharing waived for COVID-19 testing-	Tris-sucrose (5-11 yrs)	91307	0071A, 0072A, 0073A
related services	Tris-sucrose (6 mo-4 yrs)	91308	0081A, 0082A

Catastrophe/Disaster-Related (for Part B claims EXCEPT telehealth)

Disaster Related (condition code for insitu-DR tional billing only)

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Evaluation and Management (E/M) Codes 99201-99215 (Office and other Outpatient) changed effective January 1, 2021. Shop NOW! For this and other great ICD-10-CM / Reimbursement products, go to store.innoviHealth.com