



**To: Keystone First and Keystone First Community HealthChoices Providers**

**Date: March 13, 2020**

**Re: Telemedicine Services**

To facilitate and ensure that our Members and Participants continue to receive needed health care services during the Novel Coronavirus (COVID-19) pandemic, Keystone First and Keystone First CHC (the “Plan”) will cover telemedicine. Telemedicine is defined by CMS as “the delivery of health care services or consultations while the patient is at an originating site and the licensed health care provider is at a distant site”.

**Effective with dates of service March 13, 2020 through June 12, 2020 the Plan will allow payment for providers who meet the Department of Human Services criteria for Telemedicine services as follows:**

*Interactive audio and video telecommunications that permit real-time communication between the distant site physician or practitioner and the member. The services must be of sufficient audio and visual fidelity and clarity as to be functionally equivalent to a face-to-face encounter.*

Provider’s services shall consist of the evaluation and management problem-focused history, problem-focused examination and straightforward medical decision-making. The presenting problems are expected to be of a minor, self-limited nature or of low-to-moderate severity; however, in the event further evaluation and/or further medical management is required beyond the capability of Provider and its staff (including for life-threatening conditions or in circumstances posing an immediate threat to a vital physiologic (function), patients will be referred in accordance with their medical needs. Without limiting the foregoing, Provider shall at all times maintain appropriate arrangements for prompt referral of Members and Participants who present in need of Emergency Services.

Provider’s compensation will be at the contracted rate in the Keystone First HealthChoices and/or Keystone First Community HealthChoices Provider Agreement(s) for the following codes:\*

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|--------------------------------------|--------------------------------------|
| 99201 OFFICE VISIT, NEW PT LEVEL I   | 99211 OFFICE VISIT, EST PT LEVEL I   |
| 99202 OFFICE VISIT, NEW PT LEVEL II  | 99212 OFFICE VISIT, EST PT LEVEL II  |
| 99203 OFFICE VISIT, NEW PT LEVEL III | 99213 OFFICE VISIT, EST PT LEVEL III |
| 99204 OFFICE VISIT, NEW PT LEVEL IV  | 99214 OFFICE VISIT, EST PT LEVEL IV  |
| 99205 OFFICE VISIT, NEW PT LEVEL V   | 99215 OFFICE VISIT, EST PT LEVEL V   |

Place of Service (POS) 02 and modifier GT must be appended to the E&M code(s) listed above.

\*Please note - this payment is not billable above capitation.

Thank you for your partnership and care of our Members and Participants as we work together through this challenging health situation. If you have any questions, please contact your Provider Account Executive.