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Telehealth Policy

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*Values*

Accountability • Integrity • Service Excellence • Innovation • Collaboration

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**Abstract Purpose:**

This reimbursement policy outlines Network Health's process, for all lines of business, when claims are submitted for telemedicine or telehealth services.

**Policy Detail:**

- I. Network Health will reimburse telehealth services in accordance with the Centers for Medicare and Medicaid Services (CMS).
- II. Telehealth codes are subject to change as codes are retired and new codes are developed.
- III. CMS has authorized specific originating sites as "eligible" for furnishing a telehealth service. In alignment with CMS the eligible originating sites are:
  - A. The office of a physician or practitioner
  - B. A hospital (inpatient or outpatient)
  - C. A Critical Access Hospital (CAH)
  - D. A rural health clinic (RHC)
  - E. A federally qualified health center (FQHC)
  - F. A hospital-based or critical access hospital based renal dialysis center (including satellites)
  - G. A Skilled nursing facility (SNF)
  - H. A community mental health center (CMHC)
- IV. Providers may append modifier '95/*Synchronous telemedicine service rendered via a real time interactive audio and video telecommunications system*' for services that are typically performed face-to-face, however the service was performed by an eligible practitioner via interactive audiovisual telecommunications.
- V. The distant site is where the rendering provider is located during the telehealth visit. The claim will be submitted with either Place of Service 02 or Place of Service 10.
  - A. Place of Service 02 - Telehealth provided other than in patient's home
  - B. Place of Service 10 - Telehealth provided in patient's home (effective 1/1/2022)

1. Place of Service 10 is recognized by CMS beginning January 1, 2024

- VI. Network Health will not reimburse for telehealth services submitted with modifier '*GQ/Via asynchronous telecommunications system*', because these services do not include direct in-person patient contact.
- VII. CMS has also authorized which practitioners may be reimbursed for telehealth services:
  - A. Physician
  - B. Nurse Practitioner
  - C. Physician Assistant
  - D. Nurse-midwife
  - E. Clinical nurse specialist
  - F. Clinical psychologist
  - G. Clinical social worker
  - H. Registered dietician or nutrition professional

**Definitions:**

**Telehealth:** The provision of healthcare remotely by means of telecommunications technology.

**Telemedicine:** The digital transmission of remote medical diagnosis, evaluations, and video consultations and electronic communications.

**Regulatory Citations:**

Centers for Medicare and Medicaid Services (CMS)

**Origination Date: 3/12/2020**

**Update Date: 2/24/2025**

**Next Review Date: 2/24/2026**