

# Telehealth Services

- Telehealth services are provided remotely via an interactive real time telecommunications system (video + audio)
- Documentation requirements
  - Patient location
  - Provider location
  - Services rendered via telehealth/video visit
- Typically, the CPT code reported is the same for telehealth as for an on-site service.
  - Documentation requirements for the service reported are the same for a telehealth service as if the service were rendered in the office/on-site
  - For example, an outpatient E/M service level 99213 may be reported when provided via telehealth or on-site. Regardless of mode of communication, documentation must include 2/3 key components: Expanded problem focused history, expanded problem focused exam, low complexity medical decision making.
- In order to indicate the service was rendered via telehealth, append the GT modifier upon charge submission
- During the COVID-19 Public Health Emergency, payer guidelines vary widely on services that may be reported via telehealth. Many services that were not previously reimbursable when provided via telehealth are during the PHE. Contact [CovidCodingHelp@iuhealth.org](mailto:CovidCodingHelp@iuhealth.org) with any telehealth or COVID related coding questions.
  - Note: Many of the loosened guidelines surrounding telehealth are only effective as long as the PHE is in effect. If you plan to continue to provide services via telehealth post-PHE, please reach out for updated guidance at that time.

