



MARCH 2020

KMAP GENERAL BULLETIN 20046

Telemedicine Updates in Response to COVID-19 Emergency

Effective with dates of service on or after March 12, 2020 the following codes will be allowed for payment when provided by telemedicine/telephone, except for the codes noted for Autism services. Telephone coverage is not allowed for those services. Most of these codes are currently covered for both face-to-face and telemedicine. These updates do not change or modify the current coverage but allow for an additional delivery method. Allowed provider types and specialties will remain unchanged. Reimbursement will be the same as a face-to-face visit. Existing National Correct Coding Initiative (NCCI) edits/limitations will remain in place and are not waived with this policy.

Providers will be allowed to be reimbursed for the following codes when the originating Telemedicine site is place of service "home" (POS code 12). No payment for the Q3014 code will be made for POS 12 without the physical presence of a Provider. Telemedicine services (including telephonic contact) can be made when there is verbal consent received from the patient (to be followed up by written approval) in the medical record. Tele-video communication can only be utilized if that contact is HIPAA compliant.

Services provided by telemedicine/telephone will need to be billed with POS code 02.

Mental Health Codes –

90832	90833	90834	90836	90836
90838	90839	90840	90847	90863
*H0036	H0038	H0038 HQ	90792	

*(with all current modifiers for this code continuing for coverage in this expansion)

SUD Codes –

H0001	H0004	H0005 U5	H0006 U5	H0015 U5
H0038	H0038 HQ			

SBIRT Codes –

H0049	H0050	99408	99409
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Customer Service

- 1-800-933-6593
- 7:30 a.m. - 5:30 p.m.
Monday - Friday

DXC Technology is the fiscal agent of KMAP.



Telemedicine Updates in Response to COVID-19 Emergency continued

Autism Codes – not allowed to be delivered over the telephone

97155	97156
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Evaluation and Management Codes –

99201	99202	99203	99211	99212	99213
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As applicable to the Federally Qualified Health Center (FQHC)/Rural Health Clinic (RHC)/Indian Health Clinic (IHC), these entities will receive an encounter rate when serving as the distant site.

Effective with dates of service on and after March 12, 2020, nursing facilities will be allowed as an originating site for the provision of tele-medicine services utilizing the telemedicine originating site billing code of Q3014. The conditions/payment for billing this service, as outlined in KMAP general bulletin 18224, continue to be in effect.

At this time code, the G2012 “virtual check in” is not being allowed for coverage since some designated E&M codes are being allowed to be provided over the telephone.

Out-of-state physicians may provide telemedicine when treating patients in Kansas without a Kansas license provided the physician holds an unrestricted license in the state in which the physician practices. This does not extend to any other licensed provider.

Per Executive Order NO. 20-08: This policy will remain in force until rescinded, until May 1, 2020, or until the statewide State of Disaster Emergency proclaimed on March 12, 2020, relating to COVID-19 expires, whichever is earlier.

Note: The effective date of the policy is March 12, 2020. The implementation of State policy by the KanCare managed care organizations (MCOs) may vary from the date noted in the Kansas Medical Assistance Program (KMAP) bulletins. The KanCare Open Claims Resolution Log on the KMAP Bulletins page documents the MCO system status for policy implementation and any associate.

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