

12. How should providers bill audio-only evaluation and management (E&M) codes rendered via telemedicine?

It is the IHCP's intent to allow providers to continue any service that can be reasonably provided via telemedicine. These codes should be billed as described in *IHCP Bulletin* [BT202022](#) with the place of service most relevant to the patient's location and the GT modifier. The IHCP may be providing additional guidance relating to well child visits. Look for more information in upcoming IHCP publications.

13. Can speech, physical, and occupational therapies be provided via telemedicine? If so, how should these therapies be billed?

Speech, physical, and occupational therapies can be provided via telemedicine; however, there must be a video component. [Executive Order 20-13](#) excludes these services from audio-only telemedicine. Because these services are not on *Telemedicine Services Codes*, but are IHCP covered codes, providers should bill with the place of service most relevant to the patient's location and are encouraged to use the GT modifier. Providers should keep documentation of what services were rendered via telemedicine in the patient's file. Providers should use their professional discretion when deciding what services are suitable for telemedicine.



14. Can all applied behavioral analysis (ABA) therapy codes be rendered via telemedicine?

The IHCP asks that providers use their professional discretion when determining if a service can be delivered via telemedicine. ABA codes are not excluded and, therefore, may be performed via telemedicine so long as it is clinically appropriate.

Frequently asked questions (FAQs) for managed care entities (MCEs)

15. Are the MCEs allowing providers to bill under an enrolled location if patients are being seen offsite at a temporary location?

Yes, providers should bill under an existing enrolled location.

16. Can each MCE please clarify which place of service and modifier they are requiring for telemedicine visits?

Providers should bill for services with codes listed on *Telemedicine Services Codes* as normal with the place of service 02 and modifier 95, even if the service is rendered via audio-only communication. For services not listed on *Telemedicine Services Codes*, providers should use the place of service code for the patient's location with the encouraged, but not required, GT modifier. Providers should document that the service was performed via telemedicine in the patient records and be prepared to provide those records if requested. *Telemedicine Services*