

The following procedure codes, when billed with the 95 modifier, are a benefit for distant-site telemedicine providers:

Procedure Codes									
90791	90792	90832	90833	90834	90836	90837	90838	90951	90952
90954	90955	90957	90958	90960	90961	99201	99202	99203	99204
99205	99211	99212	99213	99214	99215	99241	99242	99243	99244
99245	99251	99252	99253	99254	99255	99354	99355	99356	99357
G0406*	G0407*	G0408*	G0425	G0426	G0427	G0459			
*Procedure codes are limited to one service per day.									

Note: Procedure codes for behavioral health services are subject to the benefits and limitations outlined in Subsection 4.2, “Services, Benefits, Limitations” in the Behavioral Health and Case Management Services Handbook (Vol. 2, Provider Handbooks) Procedure codes 90833, 90836, and 90838 are add-on codes and must be billed with a primary E/M procedure code in order to be reimbursed.

3.2 Telemedicine Services

Telemedicine medical services are defined as health-care services delivered by a physician licensed in Texas or a health professional who acts under the delegation and supervision of a health professional licensed in Texas and within the scope of the health professional’s license to a patient at a different physical location using telecommunications or information technology.

3.2.1 Distant Site

A distant site is the location of the provider rendering the service. Distant-site telemedicine benefits include services that are performed by the following providers, who must be enrolled as a Texas Medicaid provider:

- Physician
- CNS
- NP
- PA
- CNM

A distant site provider is the physician, or PA, NP, or CNS who is supervised by and has delegated authority from a licensed Texas physician, who uses telemedicine medical services to provide health-care services to a client in Texas. Hospitals may also serve as the distant site provider.

Distant site providers must be licensed in Texas.

An out-of-state physician who is a distant site provider may provide episodic telemedicine medical services without a Texas medical license as outlined in *Texas Occupations Code* §151.056 and Title 22 *Texas Administrative Code (TAC)* §172.2(g)(4) and 172.12(f).

Distant site providers that provide mental health services must be appropriately licensed or certified in Texas, or be a qualified mental health professional-community services (QMHP-CS), as defined in 25 TAC §412.303(48).

A valid practitioner-patient relationship must exist between the distant site provider and the patient receiving telemedicine services. A valid practitioner-patient relationship exists between the distant site provider and the patient if:

- The distant site provider meets the same standard of care required for and in-person service.
- The relationship can be established through:
 - A prior in-person service.
 - A prior telemedicine medical service that meets the delivery modality requirements specified in *Texas Occupations Code* §111.005(a)(3).
 - The current telemedicine medical service.

The relationship can be established through a call coverage agreement established in accordance with Texas Medical Board (TMB) administrative rules in 22 TAC §177.20.

The distant site provider must obtain informed consent to treatment from the patient, patient's parent, or the patient's guardian prior to rendering a telemedicine medical service.

Distant site providers that communicate with clients using electronic communication methods other than phone or facsimile must provide clients with written notification of the physician's privacy practices prior to evaluation and treatment. A good faith effort must be made to obtain the client's written acknowledgment of the notice, including by email response.

A distant site provider should provide patients who receive a telemedicine medical service with guidance on the appropriate follow-up care.

Procedure codes that indicate remote (telemedicine medical services) delivery in the description do not need to be billed with the 95 modifier.

3.2.4 Documentation Requirements for Telemedicine Medical Services

Medical records must be maintained for all telemedicine medical services.

Documentation for a service provided via telemedicine must be the same as for a comparable in-person service.

If a patient has a primary care provider who is not the distant site provider and the patient or their parent or legal guardian provides consent to a release of information, a distant site provider must provide the patient's primary care provider with the following information:

- A medical record or report with an explanation of the treatment provided by the distant site provider
- The distant site provider's evaluation, analysis, or diagnosis of the patient

Unless the telemedicine medical services are rendered to a child in a school-based setting, distant site providers of mental health services are not required to provide the patient's primary care provider with a treatment summary.

For telemedicine medical services provided to a child in a school-based setting, a notification provided by the telemedicine medical services physician to the child's primary care provider must include a summary of the service, exam findings, prescribed or administered medications, and patient

INSTRUCTIONS.

8
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TELECOMMUNICATION SERVICES HANDBOOK

APRIL 2020

If the child does not have a primary care provider, the notification must be provided to the child's parent or legal guardian. In addition to providing treatment information, the notification must include a list of primary care providers from which the child's parent or legal guardian may select a primary care provider.