



Telehealth Services and Codes

The table below includes current (as of Jun 2022) telehealth codes that are found on the full [CMS List of Telehealth Services](#) and are also on the qualifying list of services for FQHC’s listed on the [Specific Payment Codes for the Federally Qualified Health Center Prospective Payment System \(FQHC PPS\)](#).

Service and Code Category Descriptions

- **Category 1 and 2 codes** (black normal font in table below) are on the permanent CMS list of telehealth services (updated annually).
- **Category 3 codes** (blue font in table below) were added in the Calendar Year 2021 Physician Fee Schedule Final Rule and will remain on the list of telehealth services at least through Dec 31, 2023.
- **Interim Service (in italics in the table below) codes** are added only on an interim basis and will not be available after the end of the public health emergency (PHE).

See your CPT® Professional codebook for full descriptions and additional requirements. None of the content herein can be construed as billing advice. If you have feedback, suggestions or corrections, please let us know at info@NRTRC.org

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Service	CPT/HCPCS Code(s)	
Evaluation & Management (E/M) Visits - Outpatient		
Office or other outpatient visits for new patients (99202-99205) and established patients (99211-99215).	99202 99203 99204 99205	99212 99213 99214 99215
<i>Telephone E/M service by a physician or other qualified health care professional who may report E/M services provided to an established patient, parent, or guardian not originating from a related E/M service provided within the previous 7 days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment.</i> <i>While not on the qualifying list, this option is available to FQHCs.</i>		99441 99442 99443
<i>Home visit for the E/M of a new patient, counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient’s and/or family’s needs.</i>		99341 99342 99343 99344 99345

Service	CPT/HCPCS Code(s)
Level 1 (99334) or Level 2 (99335) established patient domiciliary, rest home, or custodial care visit AND Level 1 (99347) or Level 2 (99348) established patient home visit The CY 2021 PFS FR (p. 84505) states that “the patient’s home cannot serve as an originating site” and that “because the home is not generally a permissible telehealth originating site, these services could be billed when furnished as telehealth services only for treatment of a SUD or co-occurring mental health disorder,” citing the SUPPORT Act.	99334 99335 99347 99348
Home visit for the E/M of an established patient, requiring specific: 99349 - usually, the presenting problem(s) are moderate to high severity. Typically, 40 min are spent face-to-face with the patient and/or family, 99350 - usually, the presenting problem(s) are of moderate to high severity . The patient may be unstable or may have developed a significant new problem requiring immediate physician attention. Typically, 60 min are spent face-to-face with the patient and/or family.	99349 99350
Post-Discharge Services	
Transitional care management (TCM) services with moderate medical decision complexity (face-to-face visit within 14 days of discharge) (99495) and with high medical decision complexity (face-to-face visit within seven days of discharge) (99496). Transitional Care Management Services . CMS. July 2021.	99495 99496
Patient Self-Management, Education, Wellness and Lifestyle Changes	
Individual and group medical nutrition therapy	G0270 97802 97803
Individual and group diabetes self-management training (DSMT) services, with a minimum of 1 hour of in-person instruction furnished in the initial year training period to ensure effective injection training	G0108
Smoking cessation services	99406 99407
Annual alcohol misuse screening, 15 min (G0442) and brief face-to-face behavioral counseling for alcohol misuse, 15 min (G0444)	G0442 G0443
Annual depression screening, 15 min: Screening for Depression in Adults . CMS. Updated March 2012.	G0444
High-intensity behavioral counseling to prevent sexually transmitted infection; face-to-face, individual, includes education, skills training and guidance on how to change sexual behavior; performed semi-annually, 30 min	G0445
Annual, face-to-face intensive behavioral therapy for cardiovascular disease, individual, 15 min	G0446
Face-to-face behavioral counseling for obesity, 15 min	G0447
Annual Wellness Visit, includes a personalized prevention plan of service (PPPS) first visit (G0438) and subsequent visit (G0439) Medicare Annual Wellness Visits . CMS. Accessed June 2022.	G0438 G0439
Advance Care Planning, 30 min: Advance Care Planning Fact Sheet . CMS. Updated 2020.	99497
Counseling visit to discuss need for lung cancer screening using low dose CT scan (LDCT) (service is for eligibility determination and shared decision making. For a decision tree and lung cancer screening guidelines across organizations, see Lung Cancer Screening Guidelines Implementation in Primary Care: A Call to Action . Ann Fam Med. 2020.	G0296