

UHIN STANDARDS COMMITTEE
Version 3.1
TeleHealth Standard

UHIN Telehealth Standard is compatible with all ASC X12N HIPAA recommendations.

Purpose: This Standard provides a uniform standard of billing claims/encounters for health care delivered via telehealth.

Applicability: Applies to providers practicing delivery of health-related services via telecommunications technologies.

Detail:

Two types of telehealth technology have been identified to deliver health care:

Teleconsultation – is real time interactive audio and video conferencing delivered via a telecommunications system. This is a method to provide service, assessments and history taking to a patient at one location with the consulting provider at a separate location. A presenting provider may or may not be involved in the service.

Store and forward telehealth – is the electronic transmission of data, digitized images, video and audio for diagnosis or health management. The exchange of data and digitized images (i.e. teleradiology), is done between the referring provider and consulting provider.

Definitions:

- **Health Care Practitioner:**
 - “Physician” identifies specifically as a doctor (MD, DO)
 - “Clinician” identifies any health care provider (e.g. physician, nurse, physician assistant, therapist etc.)

Claims/Encounters

1. Three types of delivery/service from a health care provider have been identified:
 - Consulting
 - Referring
 - Presenting –same as or employee of the referring provider who presents the patient to the consulting provider.
2. The billing provider will bill using customary HCPCS codes, with the addition of a modifier.
3. The CMS 1500 form will be used with the following CMS 1500 box requirements:
 - a. **Box 24B – Place of Service**
Place of service is the physical location where services were rendered (e.g. 11 (office), 12 (home), 21 (inpatient), or 22 (outpatient) etc.). Use CMS Place of Service Standard Codes (see <http://www.hcfa.gov/medicaid/poshome.htm>. for the complete code list)
 - b. **Box 24D – Procedures, Services or Supplies and appropriate modifiers**
For Procedures, Services or Supplies and appropriate modifiers, use standard HCPCS/CPT codes.

Two modifiers will be used to identify what types of telehealth services were given.

- GT – Via interactive audio and video telecommunication systems (interactive)

- GQ – Via a-synchronous telecommunication systems (batch)
- c. **Box 25 – Federal Tax ID**
Federal Tax ID or SSN of provider who receives reimbursement. Do not use any spaces or dashes.
- d. **Box 33 – Billing Provider Name, Address, Zip Code and Phone Number**
Information for the provider who receives reimbursement. This Address may be the address affiliated to the payers contract address. Output the name of the reimbursement provider.

Implementation Issues:

1. UHIN will continue to stay informed of national telehealth issues and to provide recommendations and information to the national discussion for standardizing telehealth as appropriate.
2. Payers, and providers have made necessary modifications to recognize telehealth modifiers in their systems.
3. Payers that pay for Telehealth services will assist in educating the provider community about this UHIN Standard

History: (MM/DD/YY)

	Original	A* 1	V3	V3.1
ORIGINATION DATE	10/14/98	03/03	2/2009	4/8/2015
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* A = Amendment