

CBC 2020 - 2021 Telehealth Services Code List

|        | Description                       |
|--------|-----------------------------------|
| 77427* | Radiation tx management X5        |
| 90785  | Psytx complex interactive         |
| 90791  | Psych diagnostic evaluation       |
| 90792  | Psych diag eval w/med srvc        |
| 90832  | Psytx pt&/family 30 minutes       |
| 90833  | Psytx pt&/fam w/e&m 30 min        |
| 90834  | Psytx pt&/family 45 minutes       |
| 90836  | Psytx pt&/fam w/e&m 45 min        |
| 90837  | Psytx pt&/family 60 minutes       |
| 90838  | Psytx pt&/fam w/e&m 60 min        |
| 90839  | Psytx crisis initial 60 min       |
| 90840  | Psytx crisis ea addl 30 min       |
| 90845  | Psychoanalysis                    |
| 90846  | Family psytx w/o patient          |
| 90847  | Family psytx w/patient            |
| 90853* | Group psychotherapy               |
| 90875* | Psychophysiological therapy       |
| 90951  | Esrdserv 4 visits p mo <2yr       |
| 90952  | Esrdserv 2-3 vsts p mo <2yr       |
| 90953* | Esrdserv 1 visit p mo <2yr        |
| 90954  | Esrdserv 4 vsts p mo 2-11         |
| 90955  | Esrdsrv 2-3 vsts p mo 2-11        |
| 90956* | Esrdsrv 1 visit p mo 2-11         |
| 90957  | Esrdsrv 4 vsts p mo 12-19         |
| 90958  | Esrdsrv 2-3 vsts p mo 12-19       |
| 90959* | Esrdserv 1 vst p mo 12-19         |
| 90960  | Esrdsrv 4 visits p mo 20+         |
| 90961  | Esrdsrv 2-3 vsts p mo 20+         |
| 90962* | Esrdserv 1 visit p mo 20+         |
| 90963  | Esrdserv home pt serv p mo <2yrs  |
| 90964  | Esrdserv home pt serv p mo 2-11   |
| 90965  | Esrdserv home pt serv p mo 12-19  |
| 90966  | Esrdserv home pt serv p mo 20+    |
| 90967  | Esrdserv home pt serv p day <2    |
| 90968  | Esrdserv home pt serv p day 2-11  |
| 90969  | Esrdserv home pt serv p day 12-19 |
| 90970  | Esrdserv home pt serv p day 20+   |
| 92002* | Eye exam new patient              |
| 92004* | Eye exam new patient              |
| 92012* | Eye exam establish patient        |
| 92014* | Eye exam&tx estab pt 1/>vst       |
| 92507* | Speech/hearing therapy            |
| 92508* | Speech/hearing therapy            |
| 92521* | Evaluation of speech fluenc       |
| 92522* | Evaluation speech production      |

92523\* Speech sound lang comprehen  
92524\* Behavral qualit analys voic  
92526\*\*\*\*\* Oral function therapy  
92550\*\*\*\*\* Tympanometry & reflex thresh  
92552\*\*\*\*\* Pure tone audiometry air  
92553\*\*\*\*\* Audiometry air & bone  
92555\*\*\*\*\* Speech threshold audiometry  
92556\*\*\*\*\* Speech audiometry complete  
92557\*\*\*\*\* Comprehensive hearing test  
92563\*\*\*\*\* Tone decay hearing test  
92565\*\*\*\*\* Stenger test pure tone  
92567\*\*\*\*\* Tympanometry  
92568\*\*\*\*\* Acoustic refl threshold tst  
92570\*\*\*\*\* Acoustic immitance testing  
92587\*\*\*\*\* Evoked auditory test limited  
92601\* Cochlear implt f/up exam <7  
92602\* Reprogram cochlear implt <7  
92603\* Cochlear implt f/up exam 7/>  
92604\* Reprogram cochlear implt 7/>  
92607\*\*\*\*\* Ex for speech device rx 1hr  
92608\*\*\*\*\* Ex for speech device rx addl  
92609\*\*\*\*\* Use of speech device service  
92610\*\*\*\*\* Evaluate swallowing function  
92625\*\*\*\*\* Tinnitus assessment  
92626\*\*\*\*\* Eval aud funcj 1st hour  
92627\*\*\*\*\* Eval aud funcj ea addl 15  
93750\*\* Interrogation of ventricular assist device, in person  
93797\*\* Cardiac rehabilitation  
93798\*\* Cardiac rehab w/ ECG monitor  
94002\* Vent mgmt inpat init day  
94003\* Vent mgmt inpat subq day  
94004\* Vent mgmt nf per day  
94005\* Home vent mgmt supervision  
94664\* Evaluate pt use of inhaler  
95970\*\* Analysis implant neuro pulse generator w/o prgrmg  
95971\*\* Analysis simple spinal cord/peripheral nerve neuro stimulator w/prgrm  
95972\*\* Analysis complex spinal cord/peripheral nerve neuro stimulator w/prgrm  
95983\*\* Analysis brain neuro stimulator prgrmg 15 min  
95984\*\* Analysis brain neuro stimulator prgrmg Addl 15 min  
96105\*\*\*\*\* Assessment of aphasia  
96110\* Developmental screen w/score  
96112\* Devel tst phys/qhp 1st hr  
96113\* Devel tst phys/qhp ea addl  
96116 Neurobehavioral status exam  
96121\* Nubhvl xm phy/qhp ea addl hr  
96125\*\*\*\*\* Cognitive test by hc pro  
96127\* Brief emotional/behav assmt

96130\* Psycl tst eval phys/qhp 1st  
 96131\* Psycl tst eval phys/qhp ea  
 96132\* Nrpsyc tst eval phys/qhp 1st  
 96133\* Nrpsyc tst eval phys/qhp ea  
 96136\* Psycl/nrpsyc tst phy/qhp 1s  
 96137\* Psycl/nrpsyc tst phy/qhp ea  
 96138\* Psycl/nrpsyc tech 1st  
 96139\* Psycl/nrpsyc tst tech ea  
 96156\* Hlth bhv assmt/reassessment  
 96158\* Hlth bhv ivntj indiv 1st 30  
 96159\* Hlth bhv ivntj indiv ea addl  
 96160 Pt-focused hlth risk assmt  
 96161 Caregiver health risk assmt  
 96164\* Hlth bhv ivntj grp 1st 30  
 96165\* Hlth bhv ivntj grp ea addl  
 96167\* Hlth bhv ivntj fam 1st 30  
 96168\* Hlth bhv ivntj fam ea addl  
 96170\* Hlth bhv ivntj fam wo pt 1st  
 96171\* Hlth bhv ivntj fam w/o pt ea  
 97110\* Therapeutic exercises  
 97112\* Neuromusulcar reeducation  
 97116\* Gait training therapy  
 97129\*\*\*\*\* Ther ivntj 1st 15 min  
 97130\*\*\*\*\* Ther ivntj ea addl 15 min  
 97150\* Group therapeutic procedures  
 97151\* Behavior id assessment by phys/qhp ea 15 min  
 97152\* Bhv id suprt assmt by 1 tech  
 97153\* Adaptive behavior tx by protocol tech ea 15 min  
 97154\* Group adaptive bhv tx by protocol tech ea 15 min  
 97155\* Adapt bhv tx prtcl modificaj phys/qhp ea 15 min  
 97156\* Family adapt bhv tx gdn phys/qhp ea 15 min  
 97157\* Multiple fam group bhv tx gdn phys/qhp ea 15 min  
 97158\* Grp adapt bhv prtcl modifcaj phys/qhp ea 15 min  
 97161\* PT Eval low complex 20 min  
 97162\* PT Eval mod complex 30 min  
 97163\* PT Eval high complex 45 min  
 97164\* PT re-eval est plan care  
 97165\* OT eval low complex 30 min  
 97166\* OT eval mod complen 45 min  
 97167\* OT eval high complex 60 min  
 97168\* OT re-eval est plan care  
 97530\* Therapeutic activities  
 97535\* Self care mngment training  
 97542\* Wheelchair mngment training  
 97750\* Physical Performance Test  
 97755\* Assistive Technology Assess  
 97760\* Orthotic mgmt&traing 1st en

|        |                             |
|--------|-----------------------------|
| 97761* | Prosthetic traing 1st enc   |
| 97802  | Medical nutrition indiv in  |
| 97803  | Med nutrition indiv subseq  |
| 97804  | Medical nutrition group     |
| 99201  | Office/outpatient visit new |
| 99202  | Office/outpatient visit new |
| 99203  | Office/outpatient visit new |
| 99204  | Office/outpatient visit new |
| 99205  | Office/outpatient visit new |
| 99211  | Office/outpatient visit est |
| 99212  | Office/outpatient visit est |
| 99213  | Office/outpatient visit est |
| 99214  | Office/outpatient visit est |
| 99215  | Office/outpatient visit est |
| 99217* | Observation care discharge  |
| 99218* | Initial observation care    |
| 99219* | Initial observation care    |
| 99220* | Initial observation care    |
| 99221* | Initial hospital care       |
| 99222* | Initial hospital care       |
| 99223* | Initial hospital care       |
| 99224* | Subsequent observation care |
| 99225* | Subsequent observation care |
| 99226* | Subsequent observation care |
| 99231  | Subsequent hospital care    |
| 99232  | Subsequent hospital care    |
| 99233  | Subsequent hospital care    |
| 99234* | Obser/hosp same date        |
| 99235* | Obser/hosp same date        |
| 99236* | Obser/hosp same date        |
| 99238* | Hospital discharge day      |
| 99239* | Hospital discharge day      |
| 99281* | Emergency dept visit        |
| 99282* | Emergency dept visit        |
| 99283* | Emergency dept visit        |
| 99284* | Emergency dept visit        |
| 99285* | Emergency dept visit        |
| 99291* | Critical care first hour    |
| 99292* | Critical care addl 30 min   |
| 99304* | Nursing facility care init  |
| 99305* | Nursing facility care init  |
| 99306* | Nursing facility care init  |
| 99307  | Nursing fac care subseq     |
| 99308  | Nursing fac care subseq     |
| 99309  | Nursing fac care subseq     |
| 99310  | Nursing fac care subseq     |
| 99315* | Nursing fac discharge day   |

|           |  |
|-----------|--|
| 99316*    | Nursing fac discharge day                        |
| 99324*    | Domicil/r-home visit new pat                     |
| 99325*    | Domicil/r-home visit new pat                     |
| 99326*    | Domicil/r-home visit new pat                     |
| 99327*    | Domicil/r-home visit new pa                      |
| 99328*    | Domicil/r-home visit new pa                      |
| 99334*    | Domicil/r-home visit est pa                      |
| 99335*    | Domicil/r-home visit est pa                      |
| 99336*    | Domicil/r-home visit est pa                      |
| 99337*    | Domicil/r-home visit est pa                      |
| 99341*    | Home visit new patient                           |
| 99342*    | Home visit new patient                           |
| 99343*    | Home visit new patient                           |
| 99344*    | Home visit new patient                           |
| 99345*    | Home visit new patient                           |
| 99347*    | Home visit est patient                           |
| 99348*    | Home visit est patient                           |
| 99349*    | Home visit est patient                           |
| 99350*    | Home visit est patient                           |
| 99354     | Prolonged service office                         |
| 99355     | Prolonged service office                         |
| 99356     | Prolonged service inpatient                      |
| 99357     | Prolonged service inpatient                      |
| 99406     | Behav chng smoking 3-10 min                      |
| 99407     | Behav chng smoking > 10 min                      |
| 99417**** | Prolong outpt/office visit                       |
| 99468*    | Neonate crit care initail                        |
| 99469*    | Neonate crit care subsq                          |
| 99471*    | Ped critical care initial                        |
| 99472*    | Ped critical care subsq                          |
| 99473*    | Self-meas bp pt educaj/trai                      |
| 99475*    | Ped crit care age 2-5 init                       |
| 99476*    | Ped crit care age 2-5 subsq                      |
| 99477*    | Init day hosp neonate care                       |
| 99478*    | Ic lbw inf < 1500 gm subsq                       |
| 99479*    | Ic lbw inf 1500-2500 g subs                      |
| 99480*    | Ic inf pbw 2501-5000 g subs                      |
| 99483*    | Assmt & care pln cog imp                         |
| 99495     | Trans care mgmt 14 day disch                     |
| 99496     | Trans care mgmt 7 day disch                      |
| 99497     | Advncd care plan 30 min                          |
| 99498     | Advncd are plan addl 30 min                      |
| 0362T*    | Behavior id support assmt ea 15 min tech time    |
| 0373T*    | Adapt bhv tx prtcl modificaj ea 15 min tech time |
| G0108     | Diab manage trn per indiv                        |
| G0109     | Diab manage trn ind/group                        |
| G0270     | Mnt subs tx for change dx                        |

G0296 Visit to determ ldct elig  
 G0396 Alcohol/subs interv 15-30mn  
 G0397 Alcohol/subs interv >30 min  
 G0406 Inpt/tele follow up 15  
 G0407 Inpt/tele follow up 25  
 G0408 Inpt/tele follow up 35  
 G0410\* Grp psych partial hosp 45-50  
 G0420 Ed svc ckd ind per session  
 G0421 Ed svc ckd grp per session  
 G0422\*\* Intensive cardiac rehab w/exercise  
 G0423\*\* Intensive cardiac rehab no exercise  
 G0424\*\* Pulmonary rehab w exercise  
 G0425\* Inpt/ed teleconsult30  
 G0426\* Inpt/ed teleconsult50  
 G0427\* Inpt/ed teleconsult70  
 G0438 Ppps, initial visit  
 G0439 Ppps, subseq visit  
 G0442 Annual alcohol screen 15 min  
 G0443 Brief alcohol misuse counsel  
 G0444 Depression screen annual  
 G0445 High inten beh couns std 30m  
 G0446 Intens behave ther cardio dx  
 G0447 Behavior counsel obesity 15m  
 G0459 Telehealth inpt pharm mgmt  
 G0506 Comp asses care plan ccm svc  
 G0508\* Crit care telehea consult 60  
 G0509\* Crit care telehea consult 50  
 G0513 Prolong prev svcs, first 30m  
 G0514 Prolong prev svcs, addl 30m  
 G2086 Off base opioid tx first m  
 G2087 Off base opioid tx, sub m  
 G2088 Off opioid tx month add 30  
 G2212\*\*\* Prolong outpt/office visit  
 G9685\* Acute nursing facility care  
 S9152\* Speech therapy, re-eval

|                            |
|----------------------------|
| Prolong outpt/office visit |
|----------------------------|

| CBC Telemedicine Services - Temporary Codes  |   |
|--|---|
| Telemedicine services are not restricted by the telehealth modifiers or place of service |   |
| Procedure Code   | Description                                     |
| 98966*   | Nonphysician telephone assessment 5-10 min      |
| 98967*   | Nonphysician telephone assessment 11-20 min     |
| 98968*   | Nonphysician telephone assessment 21-30 min     |
| 99091*   | Collj & interpj physiol data min 30 min ea 30 d |
| 99421*   | On line dig e/m svc 5-10 min                    |
| 99422*   | On line dig e/m svc 11-20 min                   |

|        |   |
|--------|---|
| 99423* | On line dig e/m svc 21+ min                     |
| 99441* | Phys/qhp telephone evaluation 5-10 min          |
| 99442* | Phys/qhp telephone evaluation 11-20 min         |
| 99443* | Phys/qhp telephone evaluation 21-30 min         |
| 99453* | Rem mntr physiol param 1st set up pt educaj eqp |
| 99454* | Rem mntr physiol param 1st dev supply ea 30 d   |
| 99457* | Remote physiologic monitoring 20 min+ per month |
| 99458* | Rem physiol mntr ea addl 20                     |
| 99474* | Self-meas bp 2 readg bid 30d                    |
| 99493* | Sbsq psychiatric collab care mgmt 1st 60 mins   |
| 99494* | 1st/sbsq psych collab care mgmt ea addl 30 mins |
| G2010* | Remote image submit by pt                       |
| G2012* | Brief check in by md/qhp                        |
| G2061* | Qual non prof hcp onl e pt 7d ct dr 7d;5-10m    |
| G2062* | Qual non prof hcp ol e pt 7d ct dr 7d;11-20m    |
| G2063* | Qual non prof hcp onl e pt 7d ct dr 7d;21/>m    |

\* Note: Due to the COVID-19 pandemic, Capital BlueCross is temporarily modifying the list of covered Telehealth Services. Capital will continue to evaluate the on-going impact of the COVID-19 pandemic and, if warranted, adjust the time-period and our current list of covered Telehealth Services. Any temporary codes that were added to the list are denoted with an asterisk (\*).

\*\* Temporary codes with two asterisk (\*\*) added effective 10/14/2020 and forward.

\*\*\* Temporary codes with three asterisk (\*\*\*) added effective 1/1/2021 and forward.

\*\*\*\* Temporary codes with four asterisk (\*\*\*\*) Commerical only effective 1/1/2021 and forward

\*\*\*\*\* Temporary codes with five asterick (\*\*\*\*\* ) added effective 3/1/2021 and forward













orward