COVID-19 Telehealth & Coding Updates

In response to the COVID-19 public health emergency, the Centers for Medicare and Medicaid Services (CMS) has waived certain Medicare telehealth regulations to protect the health of the elderly and people with disabilities. As part of The Telehealth Services During Certain Emergency Periods Act of 2020, passed by Congress and signed into law, Medicare will cover and pay for telehealth services provided to all beneficiaries. The expanded telehealth-related services are not restricted to coronavirus-related care and cover all care and conditions using current telehealth CPT codes. Previously, telehealth was covered only for patients with certain conditions and those living in rural areas. The waiver will allow Medicare beneficiaries to continue to receive medical care without risking exposure in physician offices, hospitals, and other settings. Following is a summary of key provisions:

- While the waiver requires that patients have an existing relationship with the qualified telehealth provider, CMS will not be conducting audits to determine if this is the case.
- Qualified telehealth providers are defined as physicians, nurse practitioners, physician assistants, and certified nurse midwives. Other non-physician practitioners may provide telehealth services within their scope of practice and as defined under Medicare law.
- CMS requires that telehealth services have audio and video capabilities to allow for real-time, two-way communication. The waiver allows phones with audio and video capabilities (e.g., Skype, FaceTime) to be used during this public health emergency. Potential penalties for HIPAA violations that occur during good faith efforts to provide patient care will not be enforced during this time.
- Services covered under telehealth include evaluation and management services, mental health counseling, and preventive health screenings.
- The Department of Health and Human Services is giving discretion to health care providers to reduce or waive co-payments and deductibles for telehealth services.
- Telehealth services should be billed with place of service code 02-Telehealth and with the appropriate CPT code.
- The dates of service are retroactive to March 6, 2020 through the duration of the COVID-19 public health emergency.

Additional details about the telehealth waiver can be found via CMS:

- Press Release
- Fact Sheet
- FAQs

Medicare providers can continue to provide care via previously-approved Virtual Check-Ins and E-visits as well. All three types of virtual services are summarized below.
Additionally, a new CPT code has been created for novel coronavirus testing offered by hospitals, health systems, and laboratories in the United States. Code 87635 (Infectious agent detection by nucleic acid (DNA or RNA); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), amplified probe technique) became effective March 13, 2020.


NASS will continue to monitor the COVID-19 public health emergency and provide new information as it becomes available. In the meantime if you have any questions, please contact Allison Waxler, Director of Regulatory Affairs at awaxler@spine.org or Trip Stanford, Director of Advocacy at tstanford@spine.org.