Global Commitment Register

December 12, 2023

GCR 23-104 FINAL

Telehealth Coding

Policy Summary:

The Vermont Medicaid program updated telehealth coding to align with Current Procedural Terminology (CPT), and Healthcare Common Procedure Coding System (HCPCS).

Changes include:

- Place of Services Codes
 - o New—Place of Service code 10 Telehealth Provided in Patient's Home.
 - Revised—Place of Service code 02 Telehealth Provided Other than in Patient's Home.
- Modifier V3 changed to Modifier 93
 - New—Current Procedural Terminology Code Modifier 93 for Telemedicine services delivered via audio-only telecommunications. Modifier 93 replaces the use of modifier V3 that was established by Vermont Medicaid during the Public Health Emergency. Modifier V3 will be accepted until January 1, 2024.

Effective January 1, 2024, place of service and modifier guidance given during the public health emergency period is no longer applicable. The place of service codes and modifiers listed above are active and can be used now. Vermont Medicaid follows Medicare place of service guidelines, and HCPS and CPT modifiers as indicated in the Vermont Medicaid General Billing and Forms Manual, see additional information below.

Effective Date:

January 1, 2024

Authority/Legal Basis:

Medicaid State Plan

Population Affected:

All Medicaid

Fiscal Impact: This change is expected to be budget neutral.



Public Comment Period:

The public comment period ended December 6, 2023. <u>A copy of comments received, and the state response can be found here.</u>

Additional Information:

Vermont Medicaid General Billing and Forms Manual

Health Care Administrative Rule 3.101 Telehealth

Vermont Medicaid Telehealth Webpage

