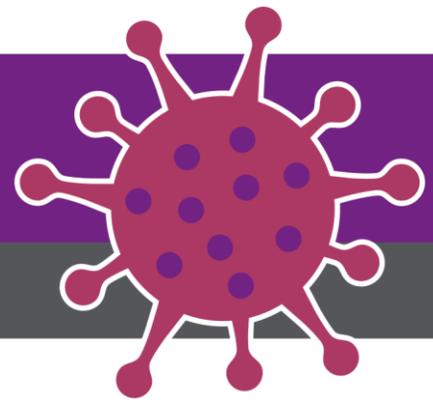


CORONAVIRUS DISEASE 2019 (COVID-19)

Zipnosis Coding & Billing Guidelines



Audience: MGPS CBO and Coding Teams:

Revision Date: 4/14/2020

Version: Version #2

E-Visit: A patient initiated online service provided to a new/established patient where a physician or APP discusses, using online communications technologies, a health issue and possible treatment or management. Code is reported for up to 7 days, cumulative time during the 7 days.

- Requires physician or APP's evaluation, assessment and management of a patient
- Not for non-evaluative electronic communication of test results, scheduling of appointments or other communication that does not include evaluation and management

Cumulative time includes: Review of the initial inquiry, review of patient records or data pertinent to assessment of the patient's problem, interaction with clinical staff focused on the patient's problem, development of management plans, including ordering prescriptions or tests, and **subsequent communication with patient through online, telephone, email or other digitally supported communication**, which does not otherwise support an separately reportable E/M service. Clinical staff time **IS NOT** included in total time.

- **Communication may be on-line only or may include telephone communication**
- **Eligible Providers:** Physicians and APPs

Reportable Codes

Asynchronous E-Visit Interaction with Patient	
CPT Codes	Description
99421	5-10 minutes, cumulative time in a 7-day period
99422	11-20 minutes, cumulative time in a 7-day period
99423	21 or more minutes, cumulative time in a 7-day period

Code Descriptor: Online digital evaluation and management service provided by a physician or APP for an established patient, for up to 7 days, cumulative time during the 7 days;

Patient Criteria:

- New & Established patients
- Cost sharing applies (Payer may waive copays/coinsurance during the COVID-19 outbreak)

Documentation Requirements

- Date of service
- Appropriate informed consent must be obtained and documented
- Review of patient’s interval history-as relevant
- History of Present Illness (HPI)
- Medical Decision Making (MDM)
- Treatment initiated
- **Amount of time in minutes. **Best practice is to document start and stop times.**

Modifiers/Billing

- Place of service (POS) code – refer to the payer
- Modifiers – refer to the payer

Code Requirements

- Refer to the MGPS Telehealth Guidelines document on the Trinity Health COVID-19 Intranet site:
 - Go to <http://www.trinity-health.org/covid19-resources>
 - Scroll down to the “Resources By Department” heading
 - Click on “Revenue Excellence”
 - Find the “MGPS Telehealth Guidelines” document under the “Telehealth” heading