## CTRC Digital Health Payment Guide DOOR 1 | August 2024



### **CODING BASICS**

#### **Digital Health Modifiers**

Both the Centers for Medicare & Medicaid Services (CMS) and the CPT® Editorial Panel created modifiers that are added to in-person service codes to designate when the service is delivered via telehealth (either two-way interactive video or two-way interactive audio-only). *Note:* The AMA CPT Editorial Panel created stand-alone audio-only service codes in 2023. The CMS has decided not to adopt these new telehealth codes. Instead, modifiers will continue to be added to in-person services codes. ¹ Consult payer policy to learn which modifier is accepted.

- CPT modifier 95: This is used to designate that the service was provided via interactive videoconference. Modifier 95 is only for codes that are listed in Appendix P of the CPT manual. There is considerable overlap between situations for using GT and 95. <sup>2</sup>
- **CPT modifier 93:** This designates that the service was provided via audio-only interaction. Modifier 93 is a synchronous telemedicine service via telephone or other real-time interactive audio-only telecommunications system. Synchronous telemedicine service is defined as a real-time interaction between a physician or other qualified health care professional and a patient located at a distant site from the physician or other qualified health care professional. <sup>3 4</sup>
- **CMS GT modifier:** This was created for remote services. The GT modifier remains relevant for certain settings and scenarios, particularly within rural health systems and Critical Access Hospitals (CAHs). <sup>5</sup>
- Modifier GQ: This is used for telehealth services delivered via an asynchronous telecommunications system. Asynchronous telemedicine means that medical care is provided via image and video but not in real-time, such as store-and-forward. For example, a patient may undergo a service recorded as a video or captured as an image, and the provider evaluates it later.

There is an additional modifier that identifies a provider type:

• **Modifier FQ:** This designates that a service was provided as part of a federally qualified health center (FQHC) or rural health clinic (RHC) visit. <sup>6</sup>

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#### References

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