

MEDI-CAL

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Interactive Synchronous Audio/Video Telehealth and Audio-Only Telehealth

Indian Health Services

Indian Health Services (IHS)-MOA clinics may be reimbursed for up to three visits a day for one recipient if one is a medical visit, a mental health visit, and an ambulatory/dental visit. Services rendered via digital health must be IHS-MOA covered services. For a list of services covered by IHS-MOA, along with billing and procedure codes, view this resource from the [California Department of Health Care Services](#).

An IHS-MOA clinic encounter is defined as:

- A face-to-face encounter provided in the Tribal facility between a patient and the health professional of the clinic or the center.
- A synchronous audio-only or asynchronous modality encounter which takes place between a patient and the health professional of the clinic or center.

Source: [DHCS Provider Manual](#)

Established Patient

A Medi-Cal eligible recipient who meets one or more of the following conditions:

- The patient has a health record with the IHS-MOA clinic that was created or updated during a visit that occurred in the clinic. The patient's health record must have been created or updated within the previous three years.
- The patient is homeless and has an established health record that was created from a visit occurring within the last three years that was provided within or outside of the IHS-MOA clinic. All consent for telehealth services for these patients must be documented.

- The patient is assigned to the IHS-MOA clinic by their Managed Care Plan (MCP) pursuant to a written agreement between the plan and the IHS-MOA clinic.

Source: [DHCS Provider Manual](#)

Originating Site and Transmission Charges

IHS-MOA clinics are not eligible to bill an originating site fee or transmission charges. The costs of these services should be included in the IHS-MOA rate.

Source: [DHCS Provider Manual](#)

Telehealth Interactive Audio-Video

Table 1. Medi-Cal IHS Telehealth Interactive Audio-Video Codes and Coverage Requirements

Focus Area	CPT/HCPC Codes	Modifiers	Coverage Requirements
Medical Services	*	95	Any telehealth service must be an IHS-MOA covered service. Services provided through synchronous telehealth for an established patient are subject to the same program restrictions, limitations and coverage that exist when the service is provided in-person.
Behavioral Health	T1015	AG, AJ, HR, AH	

* When billing for health services provided via telehealth, use the same CPT or HCPCS codes that would be used for in-person services with the correct modifier attached.

Source: [DHCS IHS-MOA Billing Codes](#)

Telehealth Audio-Only

Table 2. Medi-Cal IHS Telehealth Audio-Only Codes and Coverage Requirements

Focus Area	CPT/ HCPCS Codes	Modifiers	Coverage Requirements
Medical Services	*	93	A patient may not be established using audio-only unless the visit is related to a sensitive service or if the patient requests audio only or does not have access to video.
Telephonic Evaluation Discussion	G0071		Telephone evaluation discussion of five minutes or more between a billable IHS practitioner and established patient.
Behavioral Health Services	T1015	SC	Billing codes must be consistent with the level of care provided.

* When billing for health services provided via telehealth, use the same CPT or HCPCS codes that would be used for in-person services.

Source: [DHCS IHS-MOA Billing Codes](#)