



Provider Notice

This notice serves as a reminder of a May 2014 Virginia Department of Medical Assistance Services (DMAS) Medicaid memo that provided you updates about telemedicine coverage and billing. In response to the memo and applicable changes, Magellan implemented system updates on July 1, 2014 which were retroactively effective April 1, 2014.

Please refer to the May 13, 2014 Medicaid memo to obtain specific rules in regard to who can bill, who can be reimbursed and equipment specifics. This memo can be found at:

<https://www.virginiamedicaid.dmas.virginia.gov/wps/portal/MedicaidMemostoProviders>

Please note there is no special reimbursement for services provided via telemedicine. The reimbursement is the standard rate for the billed therapy service, with a GT modifier being mandatory. Billing with the GT modifier informs Magellan the services were delivered via telemedicine.

The following codes are considered appropriate for telemedicine:

90791,90792,90832,90833,90834,90836,90837,90838,90846,90847,90853,(99201-99215),(99221-99223)
(99231-99233),H0036,Q3014.

The following code (H0050) should be billed with a primary modifier of HM, HN, HO or HQ, followed by secondary modifier GT.

Please note effective April 1, 2014 the following codes are not considered for reimbursement: 99408, 99409.

Frequently asked questions:

Q: How is telemedicine rendered?

A: The Medicaid member is located with a provider at the "originating" site, while the "remote" provider renders services via audio/video connection.

Q: What is an originating site?

A: The originating site where a Medicaid member can be located includes: Offices of Psychiatrists, Licensed Clinical Psychologist, Licensed Clinical Social Worker, Licensed Professional, Counselor, Licensed Marriage and Family Therapist, Licensed Substance Abuse Practitioner, Rural Health Clinics, Federally Qualified Health Centers, Hospital's including State operated Mental Health facilities, Private Psychiatric Hospitals, Long Stay Rehabilitation Facilities, Community Services Boards and Mental Health Clinics.

Q: How does the originating provider bill?

A: The originating site provider bills Q3014 with GT modifier. This is the only procedure code the originating site can bill and receive reimbursement for from Magellan.

For any questions about this memo, member eligibility, claims or authorizations please contact us at: 1-800-424-4046.