

Appendix A



Updated: 1/18/2022

Telehealth Code Description	Code	Modifier Needed
Radiation treatment management, 5 treatments	77427	
Interactive complexity code	90785	GT
Psychiatric diagnostic evaluation	90791	GT
Psychiatric diagnostic evaluation with medical services	90792	GT
Psychotherapy, 30 minutes with patient and/or family member	90832	GT
Psychotherapy, 30 minutes with patient and/or family member when performed with an E/M service	90833	GT
Psychotherapy, 45 minutes with patient and/or family member	90834	GT
Psychotherapy, 45 minutes with patient and/or family member when performed with an E/M service	90836	GT
Psychotherapy, 60 minutes with patient and/or family member.	90837	GT
Psychotherapy, 60 minutes with patient and/or family member when performed with an E/M service	90838	GT
Psychotherapy for crisis, first 60 minutes	90839	GT
Psychotherapy for crisis (each additional 30 minutes) - list separately in addition to primary service CPT code.	90840	GT
Family Psychotherapy (without the patient present)	90846	GT
Family Psychotherapy (with the patient present)	90847	GT
Multiple-family group psychotherapy	90849	GT
Group psychotherapy	90853	GT
Consultation with family - Explanation of psychiatric, medical examinations, procedures, and data to other than patient.	90887	GT
End-stage renal disease (ESRD) related services monthly	90951-90962	
End-Stage Renal Disease (ESRD)-related services for home dialysis per full month	90963-90967	
End-Stage Renal Disease (ESRD)-related services for dialysis less than a full month of service, per day	90968-90970	
Eye Exam New Patient	92002-92004	
Eye Exam Established Patient	92012-92014	
Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	92507	
Treatment of speech, language, voice, communication, and/or auditory processing disorder; group, 2 or more individuals	92508	

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Evaluation of speech fluency	92521	
Evaluation of speech sound production	92522	
Evaluation of speech sound production; with evaluation of language comprehension and expression	92523	
Behavioral and qualitative analysis of voice and resonance	92524	
Treatment of swallowing dysfunction and/or oral function for feeding	92526	
Tympanometry and reflex threshold measurements	92550	
Pure tone audiometry (threshold); air only	92552	
Pure tone audiometry (threshold); air and bone	92553	
Speech audiometry threshold;	92555	
Speech audiometry threshold; with speech recognition	92556	
Comprehensive audiometry threshold evaluation and speech recognition (92553 and 92556 combined)	92557	
Tone decay test	92563	
Stenger test, pure tone	92565	
Tympanometry (impedance testing)	92567	
Acoustic reflex testing, threshold	92568	
Acoustic immittance testing, includes tympanometry (impedance testing), acoustic reflex threshold testing, and acoustic reflex decay testing	92570	
Distortion product evoked otoacoustic emissions; limited evaluation (to confirm the presence or absence of hearing disorder, 3-6 frequencies) or transient evoked otoacoustic emissions, with interpretation and report	92587	
Hearing aid examination and selection; monaural	92590	
Hearing aid examination and selection; binaural	92591	
Diagnostic analysis of cochlear implant, patient younger than 7 years of age; with programming	92601	
Diagnostic analysis of cochlear implant, patient younger than 7 years of age; subsequent reprogramming	92602	
Diagnostic analysis of cochlear implant, age 7 years or older; with programming	92603	
Diagnostic analysis of cochlear implant, age 7 years or older; subsequent reprogramming	92604	
Evaluation for prescription for speech-generating augmentative and alternative communication device, face-to-face with the patient; first hour	92607	
Evaluation for prescription for speech-generating augmentative and alternative communication device, face-to-face with the patient; each additional 30 minutes (List separately in addition to code for primary procedure)	92608	

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Therapeutic services for the use of speech-generating device, including programming and modification	92609	
Evaluation of oral and pharyngeal swallowing function	92610	
Evaluation of auditory function for surgically implanted device(s) candidacy or postoperative status of a surgically implanted device(s); first hour	92626	
Evaluation of auditory function for surgically implanted device(s) candidacy or postoperative status of a surgically implanted device(s); each additional 15 minutes (List separately in addition to code for primary procedure)	92627	
Auditory rehabilitation; prelingual hearing loss	92630	
Interrogation of ventricular assist device (VAD), in person, with physician or other qualified health care professional analysis of device parameters (eg, drivelines, alarms, power surges), review of device function (eg, flow and volume status, septum status, recovery), with programming, if performed, and report	93750	
Physician or other qualified health care professional services for outpatient cardiac rehabilitation; without continuous ECG monitoring (per session)	93797	
Physician or other qualified health care professional services for outpatient cardiac rehabilitation; with continuous ECG monitoring (per session)	93798	
Ventilation assist and management, initiation of pressure or volume preset ventilators for assisted or controlled breathing	94002-94004	
Home ventilator management care plan oversight of a patient (patient not present) in home, domiciliary or rest home (eg, assisted living) requiring review of status, review of laboratories and other studies and revision of orders and respiratory care plan (as appropriate), within a calendar month, 30 minutes or more	94005	
Demonstration and/or evaluation of patient utilization of an aerosol generator, nebulizer, metered dose inhaler or IPPB device	94664	
Electronic analysis of implanted neurostimulator pulse generator/transmitter	95970-95972	
Electronic analysis of implanted neurostimulator pulse generator/transmitter (eg, contact group[s], interleaving, amplitude, pulse width, frequency [Hz], on/off cycling, burst, magnet mode, dose lockout, patient selectable parameters, responsive neurostimulation, detection algorithms, closed loop parameters, and passive parameters) by physician or other qualified health care professional; with brain neurostimulator pulse generator/transmitter programming, first 15 minutes face-to-face time with physician or other qualified health care professional	95983	

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Electronic analysis of implanted neurostimulator pulse generator/transmitter (eg, contact group[s], interleaving, amplitude, pulse width, frequency [Hz], on/off cycling, burst, magnet mode, dose lockout, patient selectable parameters, responsive neurostimulation, detection algorithms, closed loop parameters, and passive parameters) by physician or other qualified health care professional; with brain neurostimulator pulse generator/transmitter programming, each additional 15 minutes face-to-face time with physician or other qualified health care professional (List separately in addition to code for primary procedure)	95984	
Developmental screening (eg, developmental milestone survey, speech and language delay screen), with scoring and documentation, per standardized instrument	96110	
Developmental test administration (including assessment of fine and/or gross motor, language, cognitive level, social, memory and/or executive functions by standardized developmental instruments when performed), by physician or other qualified health care professional, with interpretation and report; first hour	96112	
Developmental test administration (including assessment of fine and/or gross motor, language, cognitive level, social, memory and/or executive functions by standardized developmental instruments when performed), by physician or other qualified health care professional, with interpretation and report; each additional 30 minutes (List separately in addition to code for primary procedure)	96113	
Neurobehavioral status examination	96116	
Neurobehavioral status exam (clinical assessment of thinking, reasoning and judgment, [eg, acquired knowledge, attention, language, memory, planning and problem solving, and visual spatial abilities]), by physician or other qualified health care professional, both face-to-face time with the patient and time interpreting test results and preparing the report; each additional hour	96121	
Standardized cognitive performance testing (eg, Ross Information Processing Assessment) per hour of a qualified health care professional's time, both face-to-face time administering tests to the patient and time interpreting these test results and preparing the report	96125	
Brief emotional/behavioral assessment (eg, depression inventory, attention-deficit/hyperactivity disorder [ADHD] scale), with scoring and documentation, per standardized instrument	96127	
Psychological testing evaluation services by physician or other qualified health care professional, including integration of patient data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report, and interactive feedback to the patient, family member(s) or caregiver(s), when performed; first hour	96130	GT

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Psychological testing evaluation services by physician or other qualified health care professional, including integration of patient data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report, and interactive feedback to the patient, family member(s) or caregiver(s), when performed; each additional hour	96131	GT
Neuropsychological testing, interpretation, and report by psychologist or physician, first 60 minutes	96132	GT
Neuropsychological testing, interpretation, and report by psychologist or physician, additional 60 minutes	96133	GT
Psychological or neuropsychological test administration and scoring by physician or other qualified health care professional, two or more tests, any method; first 30 minutes	96136	GT
Psychological or neuropsychological test administration and scoring by physician or other qualified health care professional, two or more tests, any method; each additional 30 minutes	96137	GT
Administration of patient-focused health risk assessment instrument (eg, health hazard appraisal) with scoring and documentation, per standardized instrument	96160	
Administration of caregiver-focused health risk assessment instrument (eg, depression inventory) for the benefit of the patient, with scoring and documentation, per standardized instrument	96161	
Therapeutic procedure, 1 or more areas, each 15 minutes	97110	
Therapeutic procedure, 1 or more areas, each 15 minutes	97112	
Therapeutic procedure, 1 or more areas, each 15 minutes; gait training	97116	
Therapeutic interventions that focus on cognitive function (eg, attention, memory, reasoning, executive function, problem solving, and/or pragmatic functioning) and compensatory strategies to manage the performance of an activity (eg, managing time or schedules, initiating, organizing, and sequencing tasks), direct (one-on-one) patient contact; initial 15 minutes	97129	
Therapeutic interventions that focus on cognitive function (eg, attention, memory, reasoning, executive function, problem solving, and/or pragmatic functioning) and compensatory strategies to manage the performance of an activity (eg, managing time or schedules, initiating, organizing, and sequencing tasks), direct (one-on-one) patient contact; each additional 15 minutes	97130	
Therapeutic procedure(s), group (2 or more individuals)	97150	

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Behavior identification assessment, administered by a physician or other qualified health care professional, each 15 minutes	97151	GT
Behavior identification-supporting assessment, administered by one technician, each 15 minutes	97152	GT
Behavior treatment by protocol administered by technician, each 15 minutes	97153	GT
Group behavior treatment by protocol administered by technician, each 15 minutes, per recipient	97154	GT
Behavior treatment with protocol modification administered by physician or other qualified health care professional, each 15 minutes	97155	GT
Family behavior treatment guidance administered by qualified health care professional, each 15 minutes, single family	97156	GT
Family behavior treatment guidance administered by qualified health care professional, 15 minutes, per family	97157	GT
Group adaptive behavior treatment with protocol modification, administered by physician or other qualified health care professional, face-to-face with multiple patients, each 15 minutes	97158	
Physical therapy evaluation	97161-97163	
Re-evaluation of physical therapy established plan of care	97164	
Occupational therapy evaluation	97165-97167	
Re-evaluation of occupational therapy established plan of care	97168	
Therapeutic activities, direct (one-on-one) patient contact (use of dynamic activities to improve functional performance), each 15 minutes	97530	
Self-care/home management training	97535	
Wheelchair management (eg, assessment, fitting, training), each 15 minutes	97542	
Physical performance test or measurement	97750	
Assistive technology assessment (eg, to restore, augment or compensate for existing function, optimize functional tasks and/or maximize environmental accessibility), direct one-on-one contact, with written report, each 15 minutes	97755	
Orthotic(s) management and training (including assessment and fitting when not otherwise reported), upper extremity(ies), lower extremity(ies) and/or trunk, initial orthotic(s) encounter, each 15 minutes	97760	

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Prosthetic(s) training, upper and/or lower extremity(ies), initial prosthetic(s) encounter, each 15 minutes	97761	
Medical nutrition therapy; initial assessment and intervention, individual, face-to-face with the patient, each 15 minutes	97802	
Medical nutrition therapy; re-assessment and intervention, individual, face-to-face with the patient, each 15 minutes	97803	
Medical nutrition therapy; group (2 or more individual(s)), each 30 minutes	97804	
Telephone assessment and management service provided by a qualified nonphysician health care professional to an established patient, parent, or guardian not originating from a related assessment and management service provided within the previous 7 days nor leading to an assessment and management service or procedure within the next 24 hours or soonest available appointment	98966-98968	
Qualified nonphysician health care professional online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days	98970-98972	
Office or other outpatient visits	99201 - 99215	
Observation care discharge day management	99217	
Initial Observation Care	99218 - 99220	
Initial Hospital Care	99221 - 99222	
Subsequent Observation Care	99224 - 99226	
Subsequent hospital care services	99231 - 99233	
Observation Hospital Same Day	99234 - 99236	
Emergency Department visits	99281 - 99285	
Critical Care Services	99291 - 99292	
Nursing Facility Initial Care	99304 - 99306	
Subsequent nursing facility care services	99307 - 99310	
Nursing Facility Discharge Day	99315-99316	
Domiciliary / Rest Home new patient	99324-99326	
Domiciliary / Rest Home new patient	99327-99328	
Domiciliary / Rest Home Established Patient	99334-99337	
Home Visit New Patient	99341-99345	
Home Visit Established Patient	99347-99350	
Prolonged service in the office or other outpatient setting requiring direct patient contact beyond the usual service; first hour	99354	
Prolonged service in the office or other outpatient setting requiring direct patient contact beyond the usual service; each additional 30 minutes	99355	

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Prolonged service in the inpatient or observation setting requiring unit/floor time beyond the usual service; first hour (list separately in addition to code for inpatient evaluation and management service)	99356	
Prolonged service in the inpatient or observation setting requiring unit/floor time beyond the usual service; each additional 30 minutes (list separately in addition to code for prolonged service)	99357	
Medical team conference with patient and/or family, and nonphysician health care professionals, 30 minutes or more	99366	GT
Medical team conference with nonphysician health care professionals, 30 minutes or more	99368	GT
Initial Preventive Medicine Services	99381 - 99387	
Periodic Preventive Medicine Services	99391 - 99397	
Smoking and tobacco use cessation counseling visit; intermediate, greater than 3 minutes up to 10 minutes	99406	
Smoking and tobacco use cessation counseling visit; intensive, greater than 10 minutes	99407	
Alcohol and/or substance (other than tobacco) abuse structured screening (eg, AUDIT, DAST), and brief intervention (SBI) services; 15 to 30 minutes	99408	
Online digital evaluation and management service, for an established patient, for up to 7 days	99421-99423	
Telephone evaluation and management service by a physician or other qualified health care professional who may report evaluation and management services provided to an established patient, parent, or guardian not originating from a related E/M service provided within the previous 7 days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment:	99441-99443	
Interprofessional telephone/Internet/electronic health record assessment and management service provided by a consultative physician, including a verbal and written report to the patient's treating/requesting physician or other qualified health care professional;	99446-99449	
Interprofessional telephone/Internet/electronic health record assessment and management service provided by a consultative physician, including a written report to the patient's treating/requesting physician or other qualified health care professional, 5 minutes or more of medical consultative time	99451	
Interprofessional telephone/Internet/electronic health record referral service(s) provided by a treating/requesting physician or other qualified health care professional, 30 minutes	99452	
Initial care, per day, for evaluation and management of normal newborn infant seen in other than hospital or birthing center.	99461	

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Initial inpatient neonatal critical care, per day, for the evaluation and management of a critically ill neonate, 28 days of age or younger	99468	
Subsequent inpatient neonatal critical care, per day, for the evaluation and management of a critically ill neonate, 28 days of age or younger	99469	
Initial inpatient pediatric critical care, per day, for the evaluation and management of a critically ill infant or young child, 29 days through 24 months of age	99471	
Subsequent inpatient pediatric critical care, per day, for the evaluation and management of a critically ill infant or young child, 29 days through 24 months of age	99472	
Self-measured blood pressure using a device validated for clinical accuracy; patient education/training and device calibration	99473	
Initial inpatient pediatric critical care, per day, for the evaluation and management of a critically ill infant or young child, 2 through 5 years of age	99475	
Subsequent inpatient pediatric critical care, per day, for the evaluation and management of a critically ill infant or young child, 2 through 5 years of age	99476	
Initial hospital care, per day, for the evaluation and management of the neonate, 28 days of age or younger, who requires intensive observation, frequent interventions, and other intensive care services	99477	
Subsequent intensive care, per day, for the evaluation and management of the recovering very low birth weight infant (present body weight less than 1500 grams)	99478	
Subsequent intensive care, per day, for the evaluation and management of the recovering low birth weight infant (present body weight of 1500-2500 grams)	99479	
Subsequent intensive care, per day, for the evaluation and management of the recovering infant (present body weight of 2501-5000 grams)	99480	
Assmt & care pln pt cog imp	99483	
Transitional care management services with moderate medical decision complexity	99495	
Transitional care management services with high medical decision complexity	99496	
Advance Care Planning, 30 minutes	99497	
Advance Care Planning, additional 30 minutes	99498	

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Individual and group diabetes self-management training services	G0108-G0109	
Training and educational services related to the care and treatment of patient's disabling mental health problems per session (45 minutes or more)	G0177	GT
Medical nutrition therapy: reassessment and subsequent intervention(s) following second referral in same year for change in diagnosis, medical condition or treatment regimen (including additional hours needed for renal disease), individual, face-to-face with the patient, each 15 minutes	G0270	
Counseling visit to discuss need for lung cancer screening using low dose CT scan (LDCT) (service is for eligibility determination and shared decision making	G0296	
Alcohol and/or substance (other than tobacco) abuse structured assessment and intervention services	G0396, G0397	
Follow-up inpatient telehealth consultations furnished to beneficiaries in hospitals or SNFs	G0406–G0408	
Social work and psychological services, directly relating to and/or furthering the patient's rehabilitation goals, each 15 minutes, face-to-face; individual	G0410	
Individual and group kidney disease education services	G0420-G0421	
Intensive cardiac rehab	G0422-G0423	
Pulmonary Rehab	G0424	
Telehealth consultations, emergency department or initial inpatient	G0425-G0427	
Smoking cessation services	G0436, G0437	
Annual Wellness Visit, includes a personalized prevention plan of service (PPPS) first visit	G0438	
Annual Wellness Visit, includes a personalized prevention plan of service (PPPS) subsequent visit	G0439	
Annual alcohol misuse screening, 15 minutes	G0442	
Brief face-to-face behavioral counseling for alcohol misuse, 15 minutes	G0443	
Annual depression screening, 15 minutes	G0444	

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High-intensity behavioral counseling to prevent sexually transmitted infection; face-to-face, individual, include: education, skills training and guidance on how to change sexual behavior; performed semi-annually, 30 minutes	G0445	
Annual, face-to-face intensive behavioral therapy for cardiovascular disease, individual, 15 minutes	G0446	
Face-to-face behavioral counseling for obesity, 15 minutes	G0447	
Telehealth Pharmacologic Management	G0459	
Comprehensive assessment of and care planning for patients requiring chronic care management	G0506	
Telehealth Consultation, Critical Care, initial, physicians typically spend 60 minutes communicating with the patient and providers via telehealth	G0508	
Telehealth Consultation, Critical Care, subsequent, physicians typically spend 50 minutes communicating with the patient and providers via telehealth	G0509	
Prolonged preventive services	G0513, G0514	
Remote evaluation of recorded video and/or images submitted by an established patient	G2010	
Payment for a telehealth distant site service furnished by a Rural Health Clinic (RHC) or Federally Qualified Health Center (FQHC) only	G2025	
Qualified nonphysician health care professional online assessment and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 5-10 minutes	G2061	
Qualified nonphysician health care professional online assessment and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 11-20 minutes	G2062	
Qualified nonphysician qualified health care professional assessment and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 21 or more minutes	G2063	
Office-based treatment for opioid use disorder, including development of the treatment plan, care coordination, individual therapy and group therapy and counseling; at least 70 minutes in the first calendar month	G2086	
Office-based treatment for opioid use disorder, including care coordination, individual therapy and group therapy and counseling; at least 60 minutes in a subsequent calendar month	G2087	
Office-based treatment for opioid use disorder, including care coordination, individual therapy and group therapy and counseling; each additional 30 minutes beyond the first 120 minutes (list separately in addition to code for primary procedure)	G2088	
Prolonged office or other outpatient evaluation and management service(s) beyond the maximum required time of the primary procedure which has been selected using total time on the date of the primary service; each additional 15 minutes by the physician or qualified healthcare professional, with or without direct patient contact	G2212	

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Alcohol and/or drug assessment	H0001	GT
Behavioral health screening to determine eligibility for admission to treatment program	H0002	GT
Behavioral health counseling and therapy, per 15 minutes	H0004	GT
Alcohol and/or drug services; group counseling by a clinician	H0005	GT
Alcohol and/or drug services; case management	H0006	GT
Alcohol and/or drug services; Intensive outpatient (treatment program that operates at least 3 hours/day and at least 3 days/week and is based on an individualized treatment plan).	H0015	GT
Alcohol and/or drug services; medical/somatic	H0016	GT
Mental health assessment, by non-physician.	H0031	GT
Mental health service plan development by non-physician.	H0032	GT
Medication training and support, per 15 minutes.	H0034	GT
Community psychiatric supportive treatment, face-to-face, per 15 minutes.	H0036	GT
Self-help/peer services, per 15 min	H0038	GT
Assertive community treatment, face-to-face, per 15 minutes	H0039	GT
Home Based and Behavioral Habilitation 60 minutes. Modifier HW is used, along with HK, only when an individual has been approved for the HCBS 1915 (i) plan.	H0046	GT
Mental health assessment, by non-physician with CANS.	H2000	GT
Skills training and development, per 15 min	H2014	GT
Psychosocial rehabilitation services, per diem	H2018	GT
Supported Employment, per 15 min	H2023	GT
Activity therapy, per 15 min	H2032	GT
Alcohol and/or substance abuse services, family/couple counseling	T1006	GT
Sign language or oral interpretive services, per 15 minutes	T1013	GT
Case management, each 15 minutes	T1016	GT
Screening to determine the appropriateness of consideration of an individual for participation in a specified program, project or treatment protocol, per encounter	T1023	GT
Preadmission screening and resident review (PASSR) Level I identification screening, per screen	T2010	GT
Preadmission screening and resident review (PASSR) Level II evaluation, per evaluation	T2011	GT