

## Services Delivered via Telemedicine

Reimbursement Policies

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### Policy

Oscar reimburses providers for medically necessary, covered services delivered via telemedicine or telehealth subject to federal and state regulatory restrictions.

This policy describes reimbursement for services delivered via telemedicine or telehealth, which occur when the physician or other qualified health care professional and the patient are not at the same site. Examples of such services are those that are delivered over the Internet or using other communication devices.

### Definitions

See applicable state law for applicable definitions related to provision of services via telehealth or telemedicine.

### Reimbursement Guidelines

Oscar reimburses services offered via telehealth or telemedicine in accordance with applicable state law and the Member's Evidence of Coverage (Policy).

Providers shall be:

- Validly licensed, certified, or registered to provide such services as required by applicable state law;
- Subject to regulation by the appropriate State licensing board or professional regulatory entity;
- In compliance with existing requirements requiring the maintenance of liability insurance; and,
- In compliance with applicable data security, patient confidentiality, and privacy regulations. A secured electronic channel is required to be utilized by a telemedicine provider. All transactions and data communication must be in compliance with the Health Insurance Portability and Accountability Act (HIPAA).

For all lines of business, Oscar will consider for reimbursement Telehealth services which are recognized by the Centers for Medicare and Medicaid Services (CMS) and appended with modifiers GT or GQ, as well as services appended with modifier 95.

Therefore, in accordance with CMS, Oscar will not separately reimburse for telehealth codes 98000-98015. Telehealth services should be reported with an appropriate office/outpatient E&M code representing the patient status (new vs. established), the level of complexity of the visit performed, and a modifier to describe how the telehealth service was carried out (such as a code from range 99202-99215 with a modifier from below).

Oscar requires one of the following modifiers to be reported when performing a service via Telehealth to indicate the type of technology used and to identify the service as Telehealth. Oscar will consider reimbursement for a procedure code/modifier combination using these modifiers only when the modifier has been used appropriately.

Please see below for examples of referenced codes:

### Coding Definitions

POS	Description
02	Telemedicine

Modifier	Description
GT	Services offered via Interactive Audio and Video Telecommunications systems.
GQ	Services offered via Asynchronous Telecommunications systems
95	Services offered via Synchronous interactive audio and video telecommunications systems

Categories of services that may be covered when provided telehealth or telemedicine include, but are not limited to, the below codes.

Code	Description
99201	Problem focused exam and history and straightforward MDM.
99202	Expanded exam and history and straightforward MDM.
99203	Detailed exam and history and low MDM.
99204	Comprehensive exam and history and moderate MDM.
99205	Complex exam and history and high MDM.
99211	Problem focused exam and history and straightforward MDM.
99212	Expanded exam and history and straightforward MDM.
99213	Detailed exam and history and low MDM.
99214	Comprehensive exam and history and moderate MDM.
99215	Complex exam and history and high MDM.

99421	Online digital evaluation and management service for up to 7 days, cumulative time during the 7 days; 5-10 minutes
99422	Online digital evaluation and management service for up to 7 days, cumulative time during the 7 days; 11-20 minutes
99423	Online digital evaluation and management service for up to 7 days, cumulative time during the 7 days; 21 or more minutes

\*MDM=Medical Decision Making

### Publication History

Date	Action/Description
8/20/2019	Approval and inclusion in Oscar Provider Manual
9/29/2020	Revised to include new codes
3/27/2025	Updated to include guidance on new 2025 telehealth codes and remove deleted telephone codes