

**Payment and
Coding Policy
Alerts – COVID-19
PUBLIC HEALTH
EMERGENCY
UPDATE**

OCTOBER 2, 2020

This is an urgent update to Providence Health Plan's Payment and Coding Policy Alerts. The focus of this update is to communicate coding guidelines and policy changes during the COVID-19 public health emergency.

**CODING AND POLICY UPDATES FOR COVID-19 PUBLIC HEALTH EMERGENCY
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<p>CPT CODE 99072</p>	<p>The AMA published CPT code 99072 effective 9/8/20 for providers to report costs related to personal protective equipment, other supplies, and clinical staff time required for screening patients during the COVID-19 pandemic.</p> <p><i>CPT code 99072: Additional supplies, materials, and clinical staff time over and above those usually included in an office visit or other nonfacility service(s), when performed during a Public Health Emergency, as defined by law, due to respiratory-transmitted infectious disease</i></p> <p>PHP added CPT code 99072 to Payment Policy 13.0 (Bundled or Adjunct Services) based on the same rationale used to support denial of CPT code 99070 “Supplies and materials (except spectacles), provided by the physician or other qualified health care professional over and above those usually included with the office visit or other services rendered.” Supplies are considered part of the practice expense for an office visit, which is accounted for in the relative value unit (RVU) assigned to the code. CMS also considers CPT code 99070 to be a bundled service.</p> <p>In addition, the code descriptions for office visits do not include staff time “usually included” with the codes, so there is no way to determine how much time is “over and above” the usual time.</p>
<p>BILLING GLOBAL OB CODES WHEN SOME SERVICES ARE PERFORMED BY TELEHEALTH</p>	<p>Payment Policy 07.0 (Global Payment for Obstetrical Care During COVID-19 Public Health Emergency) was updated to show that global OB codes, including CPT codes 59425 and 59426 for antepartum care, should not be billed with modifier GT or modifier 95 (telehealth), even if some of the visits were performed by telehealth.</p> <p>The updated section of the policy states: “Do not add modifier GT or 95 to codes for global obstetrical care, even when a portion of the service was performed by telephone or two-way video. Because the codes for global obstetrical care (including CPT codes 59425 and 59426) encompass multiple services that will include at least one face-to-face visit, the codes may be billed as if all visits were performed as face-to-face visits. Use modifier GT or 95 only when billing individual Evaluation and Management (E&M) services separately from the codes for global obstetrical care. See Payment Policies 67.0.A, 67.0.B, 67.0.C, and 67.0.D for additional information about billing telehealth services.”</p>