

Payment Policy Updates

Effective 1/1/2020, MVP Health Care® (MVP) has expanded its coverage of Telemedicine, Virtual Check-ins, and non-face-to-face Inter-professional Consultations.

Telemedicine

Medically Necessary Telemedicine visits performed on a secure transmission meeting the minimum federal and state confidentiality requirements that employ acceptable authentication and identification procedures by the sender and the receiver will be reimbursed by MVP. Telephone calls and FaceTime do not meet coverage requirements and MVP will not reimburse for the acquisition, installation or maintenance of telecommunication platforms. Additional information, including coding and billing requirements can be found in the MVP TeleHealth Payment Policy at mvphealthcare.com/PRM.

Virtual Check-ins and Inter-professional non-face-to-face Consultations

Medically Necessary Virtual Check-ins and Inter-professional non-face-to-face consultations are covered by MVP for existing MVP members. A Virtual Check-in is a brief, 5-10-minute discussions performed by phone call and/or video call and must be medically necessary. Virtual check-ins cannot be billed for members who have had a visit within the week prior, or if the member needs to be seen in the office within a day (or next available appointment) after the Virtual Check-in. Virtual Check-ins include the evaluation of members through previously recorded videos or images submitted by the member. Inter-professional non-face-to-face consultations (health record assessment and management services) provided by a consultative physician are covered and with a verbal and written report from the requesting provider and cannot be billed if there is a face-to-face visit within 14 days of the service. Additional details on Virtual Check-ins and Inter-professional non-face-to-face Consultations, including coding and billing requirements can be found at mvphealthcare.com/PRM.

	Technology allowed	Co-pay/cost share applies	Restrictions on proximity to in-person visit	Medical record documentation required	Medicaid line of business allowed
Telemedicine (appropriate procedure code, modifier+02 in place of service)	HIPAA-compliant synchronous, 2-way (face-to-face) audiovisual platform	X		X	X
Virtual Check-ins (G2012)	Telephone or Video call	X	X	X	
Interprofessional consultation (99441)	Telephone or Internet or EHR	X	X	X	