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**PAYMENT POLICY ID NUMBER** 21-071

**Original Effective Date:** 01/01/2021

**Revised:** 01/11/2024

## **Telehealth Facility Procedure Code Q3014**

**THIS PAYMENT POLICY IS NOT AN AUTHORIZATION, CERTIFICATION, EXPLANATION OF BENEFITS, A GUARANTEE OF PAYMENT, NOR DOES IT SUBSTITUTE FOR OR CONSTITUTE MEDICAL ADVICE. ALL MEDICAL DECISIONS ARE SOLELY THE RESPONSIBILITY OF THE PATIENT AND PHYSICIAN. BENEFITS ARE DETERMINED BY THE GROUP CONTRACT, MEMBER BENEFIT BOOKLET, AND/OR INDIVIDUAL SUBSCRIBER CERTIFICATE IN EFFECT AT THE TIME SERVICES WERE RENDERED. THIS PAYMENT POLICY APPLIES TO ALL LINES OF BUSINESS AND PROVIDERS OF SERVICE. IT DOES NOT ADDRESS ALL POTENTIAL ISSUES RELATED TO PAYMENT FOR SERVICES PROVIDED TO FLORIDA BLUE MEMBERS AS LEGISLATIVE MANDATES, PROVIDER CONTRACT DOCUMENTS OF THE MEMBER'S BENEFIT COVERAGE MAY SUPERSEDE THIS POLICY.**

### **DESCRIPTION:**

Telemedicine is where patient care, treatment or services are rendered using real-time interactive audio and video telecommunications, in place of an in-person visit. Examples of telemedicine services include consultation, diagnostic, monitoring, and/or therapeutic services.

A telemedicine visit involves an exchange between a patient at an originating site and a physician, or other qualified healthcare professional, at a distant site. The originating site is the location of the patient at the time the service is being furnished. The distant site is the site where the physician or other qualified healthcare professional delivering the service is located.

This policy is intended to address Healthcare Common Procedure Coding System (HCPCS) code Q3014, which describes the Medicare telehealth originating site facility fee. Services and subsequent payment are pursuant to the member's benefit plan document, medical necessity review, where applicable, and provider contract.

### **REIMBURSEMENT INFORMATION:**

HCPCS code Q3014 is submitted by the originating site when a facility is providing administrative and clinical support services for a patient receiving services via telemedicine.

HCPCS code Q3014 is eligible for separate reimbursement for commercial and Medicare lines of business.

Telehealth originating site facility fee (HCPCS code Q3014) should only be submitted if the encounter occurs in an outpatient medical facility. HCPCS code Q3014 is not reimbursable for encounters which occur outside of a clinical setting.

Telehealth originating site facility fee (HCPCS code Q3014) is eligible for reimbursement for place of service (POS) 02, 19, 22, 31, 53 or 72 if billed with a corresponding professional claim and the requirements for the physical location of the member and provider are met. If the outpatient medical facility is not the physical location of the member at the time of the service, HCPCS code Q3014 should not be reported.

Telehealth originating site facility fee (HCPCS code Q3014) may be reported by the facility when the distant provider bills POS 02, 19, 22, 31, 53, or 72. If the distant provider billed POS 10, or 11, the facility may not report the originating site fee Q3014.

HCPCS code Q3014 must be submitted for the same date of service as the professional claim, and it must indicate the physical location of the facility where the member was at the time of the telemedicine encounter.

Telehealth originating site facility fee (HCPCS code Q3014) may not be billed by the same provider or on the same claim as the telemedicine service performed by the provider at the distant site (where the patient is not located).

All claims are subject to post payment review.

**BILLING/CODING INFORMATION:**

**HCPCS Codes**

Code	Descriptor
Q3014	Telehealth Originating Site Facility Fee

**RELATED MEDICAL COVERAGE GUIDELINES OR PAYMENT POLICIES:**

N/A

**REFERENCES:**

1. American Medical Association, Healthcare Common Procedure Coding System (HCPCS) Level II, Professional Edition
2. Centers for Medicare & Medicaid Services (CMS) Place of Service Code Set, [https://www.cms.gov/Medicare/Coding/place-of-service-codes/Place\\_of\\_Service\\_Code\\_Set](https://www.cms.gov/Medicare/Coding/place-of-service-codes/Place_of_Service_Code_Set)
3. Centers for Medicare & Medicaid Services website. Medicare Claims Processing Manual, Chapter 12 Physicians/Nonphysician Practitioners, Section 190.5 - Originating Site Facility Fee Payment Methodology <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/clm104c12.pdf>
4. Centers for Medicare & Medicaid Services (CMS). COVID-19 Frequently Asked Questions (FAQs) on. (2020, September 9) <https://www.cms.gov/files/document/medicare-telehealth-frequently-asked-questions-faqs-31720.pdf>

**GUIDELINE UPDATE INFORMATION:**

01/01/2021	New policy established
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01/13/2022	Annual Review – no changes
03/17/2022	Revision – Added place of service codes 31, 53 and 72 to the originating sites eligible for reimbursement.
01/12/2023	Annual Review – References reviewed and updated.
01/01/2024	Annual Review – HCPCS Q3014 continues to be allowed following the PHE. Reference to coverage during the Covid-19 PHE removed. Added place of service code 02 to the originating sites eligible for reimbursement and POS 10 to the originating site not eligible for reimbursement. References reviewed and updated.

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