

Audio-Only Coding and Reimbursement Updates for Vermont Providers

Effective January 1, 2022, MVP Health Care® (MVP) will implement the following coding changes for Vermont Providers billing for audio-only services.

Claims for services equivalent to in-person and provided via audio-only must be billed with:

- Modifier V3 appended to the code for in-person services; and
- Place-of -Service (POS) code "99- Other"

Providers can continue to bill designated audio-only telephone services using telephone-only Evaluation and Management (E/M) codes, such as CPT 99441, 99442, and 99443. Telephone-specific E/M codes do not require any modifier.

Effective March 1, 2022, MVP will implement the following reimbursement change for Vermont Providers billing for audio-only services.

- Claims for in-person covered services performed via audio-only will be allowed at 75% of the medical provider contracted rate.
- Behavioral Health Providers billing codes for in person covered services performed via audioonly will be reimbursed as outlined in their contract.

The above coding changes and reimbursement updates are indicated in the Audio-Only (Vermont Only) Payment Policy that was published in the MVP Payment Policies on December 1, 2021. To review the policy, visit **mvphealthcare.com/PRM** and select *Effective January 1, 2022*, then select *Payment Policies, Effective January 1, 2022*, then select *Audio-Only (Vermont Only)*.

Other telehealth services should be provided in accordance with and billed following the guidelines outlined in the Telehealth Payment Policy.

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