MVPFASTFAX

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Important News for Providers

This communication should be viewed by:
All MVP Providers

Telehealth Policy Update: Changes to E/M Coding for 2027

Effective January 1, 2027, MVP Health Care® (MVP) is updating its Telehealth Payment Policy to clarify reimbursement requirements for telehealth evaluation and management (E/M) services.

For dates of service on or after January 1, 2027, MVP will not reimburse CPT codes 98000–98015 for synchronous telemedicine E/M services for the following lines of business:

- Commercial
- Medicaid
- Medicare Advantage
- All other MVP products, including ASO Select Care products

What Providers Need to Know

When a covered E/M service is provided through telehealth, Providers must bill the equivalent in-person E/M code (99202–99215, as appropriate) instead of CPT codes 98000–98015.

Providers must continue to follow all applicable telehealth billing requirements, including:

- The appropriate place of service (POS) code
- Required telehealth modifiers, when applicable
- Applicable coding, billing, and documentation requirements

Action Required

For telehealth visits on or after January 1, 2027, Providers must:

- Do not bill CPT codes 98000–98015
- Bill the appropriate E/M code from CPT code range 99202–99215
- Include the appropriate POS code and required telehealth modifiers
- Meet all applicable billing, coding, and documentation requirements