

February 7, 2023

PROVIDER ALERT: UPDATED TELEMEDICINE PROVIDER GUIDANCE

The Department of Health Care Finance (DHCF) recently issued Transmittal 23-11 “[Updated Telemedicine Provider Guidance with Revised Billing Requirements](#)”. The DHCF issued this transmittal to inform providers about revised telemedicine billing requirements to more accurately capture the type and location of telemedicine services.

Previously, providers were required to use the “GT” procedure modifier on all telemedicine claims. Providers are now required to use the “GT” procedure modifier on claims only for services delivered via video-audio telemedicine. When billing for any audio-only telemedicine service, distant site providers shall use the new “93” procedure modifier. Additionally, the distant site provider must specify the place of service (POS) code:

- POS 10 – Beneficiary’s home is the originating site
- POS 03 – DC Public School or DC Public Charter School is the originating site
- POS 02 – Beneficiary is at any other eligible originating site (as defined in section IV of the Telemedicine Provider Guidance document). When using POS 02, the distant site provider must also report the NPI of the originating site provider in the “referring provider” portion of the claim.

Effective March 1, 2023, District health care providers rendering services to beneficiaries in Medicaid fee-for-service; Medicaid Managed Care; Health Care Alliance and Immigrant Children’s programs must comply with these revised billing requirements.

[Included with this provider alert is the Telemedicine Provider Guidance \(January 2023\).](#)

For questions concerning this Provider Alert, please contact the MFC-DC Provider Relations department, Monday through Friday, 8 a.m. to 5:30 p.m.

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