

orig. 2.2.2021
rev 7.23.2024

Program Terminated Effective 12.31.2023
Treatment-In-Place (TIP) Telehealth Services

Treatment-in-place telehealth claims must include the G2021 procedure code. Please see details in the charts below.

Valid rendering providers are licensed physicians, advanced practice registered nurses, and physician assistants.

Rendering provider NPI is required for each service when rendering provider is different than billing provider.

Treatment-in-place telehealth claims billed without G2021 are subject to post-payment review, recoupment, and additional sanctions as deemed appropriate by Louisiana Medicaid.

As with all telehealth claims, providers must include POS identifier of "02" or "10" and modifier "95" on all claim lines to identify the claim as a telehealth service.

Place of service 10 valid with date of service on and after 1.1.2022

COLUMN A: Type of Service. Definition: Files on which codes are loaded and from which claims are paid. The file to which a claim goes for pricing is determined by, among other things, the type of provider who is billing and the modifier appended to the claim.

Listed below is an explanation of the types of service found on this schedule.

03 - Full service. The file from which physician services are paid primarily for recipients 16 years of age and older. Nurse Practitioners, and Physician Assistants are paid at 80% of this fee.

07 - Full service file for physician services for recipients 0 through 15 (0-15) years of age. Nurse Practitioners, and Physician Assistants are paid at 80% of this fee.

09 - Treatment-in-Place Telehealth services

COLUMNS: B and C, Code, Description

COLUMNS: D and E, Place of Service and Modifier

COLUMN: F, Age Min and Max: Codes with minimum or maximum age restrictions. If the recipient's age on the date of service is outside the minimum or maximum age, claims will deny.

COLUMN G: Fee

COLUMN H: UVS>001: An 'X' in this column means more than one unit of service per day may be billed.

COLUMN I and J: Effective begin and end dates.

Type of Service	Procedure Code	Code Description	Place of Service	Modifier	Age Min-Max	Fee	Effective Date	End Date
09	G2021	Treatment In Place (TIP)	02 or 10	95	00 99	\$0.00	3/1/2020	12/31/2023

Type of Service	Procedure Code	Code Description	Place of Service	Modifier	Age Min-Max	Fee	Effective Date	End Date
03	99202	NEW PATIENT OFFICE OR OTHER OUTPATIE	02 or 10	95		\$42.77	3/1/2020	12/31/2023
07	99202	NEW PATIENT OFFICE OR OTHER OUTPATIE	02 or 10	95	00 15	\$51.33	3/1/2020	12/31/2023
03	99203	NEW PATIENT OFFICE OR OTHER OUTPATIE	02 or 10	95		\$62.18	3/1/2020	12/31/2023
07	99203	NEW PATIENT OFFICE OR OTHER OUTPATIE	02 or 10	95	00 15	\$74.62	3/1/2020	12/31/2023
03	99204	NEW PATIENT OFFICE OR OTHER OUTPATIE	02 or 10	95		\$96.56	3/1/2020	12/31/2023
07	99204	NEW PATIENT OFFICE OR OTHER OUTPATIE	02 or 10	95	00 15	\$115.88	3/1/2020	12/31/2023
03	99205	NEW PATIENT OFFICE OR OTHER OUTPATIE	02 or 10	95		\$122.19	3/1/2020	12/31/2023
07	99205	NEW PATIENT OFFICE OR OTHER OUTPATIE	02 or 10	95	00 15	\$146.62	3/1/2020	12/31/2023
03	99211	OFFICE, EST PT, MINIMAL PROBLEMS	02 or 10	95		\$12.36	3/1/2020	12/31/2023
07	99211	EST PATIENT OFFICE VISIT	02 or 10	95	00 15	\$14.82	3/1/2020	12/31/2023
03	99212	ESTABLISHED PATIENT OFFICE OR OTHER	02 or 10	95		\$24.83	3/1/2020	12/31/2023
07	99212	ESTABLISHED PATIENT OFFICE OR OTHER	02 or 10	95	00 15	\$29.79	3/1/2020	12/31/2023
03	99213	ESTABLISHED PATIENT OFFICE OR OTHER	02 or 10	95		\$41.53	3/1/2020	12/31/2023
07	99213	ESTABLISHED PATIENT OFFICE OR OTHER	02 or 10	95	00 15	\$49.84	3/1/2020	12/31/2023
03	99214	ESTABLISHED PATIENT OFFICE OR OTHER	02 or 10	95		\$62.65	3/1/2020	12/31/2023
07	99214	ESTABLISHED PATIENT OFFICE OR OTHER	02 or 10	95	00 15	\$75.18	3/1/2020	12/31/2023
03	99215	ESTABLISHED PATIENT OFFICE OR OTHER	02 or 10	95		\$84.93	3/1/2020	12/31/2023
07	99215	ESTABLISHED PATIENT OFFICE OR OTHER	02 or 10	95	00 15	\$101.92	3/1/2020	12/31/2023