



Reminder: Telemedicine Services Billing for HAP Empowered Medicaid

HAP Empowered Medicaid follows telemedicine billing guidance from the Michigan Department of Health and Human Services. All telemedicine services, as allowed on the Michigan Medicaid telemedicine database and submitted on professional claim format (CMS-1500 form or 837P equivalent), require both:

- Place of service code 02- Telehealth
- GT- interactive telecommunication modifier

Services submitted on an institutional claim format (UB-04 form or 837I equivalent) require:

- The appropriate National Uniformed Billing Committee (NUBC) revenue code, appropriate CPT/HCPCS code and GT-interactive telecommunication modifier.

Audio only service requires:

- Modifier GT- interactive telecommunication modifier in addition to modifier FQ. When a provider submits modifier FQ for an audio only service, a note is not required in the remarks section stating that the service was provided via telephone.

Telemedicine location patient home requires:

- The comment “patient's home” in the remarks section and modifier FQ to be appended in addition to modifier GT.

For more information, please refer to the MDHHS policy bulletins MSA 20-09 and 20-13 which can be found [here](#).