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General information

This document contains information specific to telehealth visits for medical providers. For broader information about telehealth, see the following documents:

- *Telemedicine Services Medical Policy* — To find this document, go to the [Medical Policy Router Search](#) webpage on **bcbsm.com**, enter the name of the medical policy in the Policy/Topic Keyword field and press Enter.
- *Telehealth for behavioral health providers* — You can find this and other documents on our secure Provider Resources website, which you can access by doing the following:
 1. Log in to our provider portal ([availability.com](#)**).
 2. Click *Payer Spaces* on the menu bar and then click the BCBSM and BCN logo.
 3. Click the *Resources* tab.
 4. Click *Secure Provider Resources (Blue Cross and BCN)*.
 5. Click *Billing and Claims* on the menu bar and then click *Telehealth*.

Medicare Plus Blue and BCN Advantage

The general telehealth information in this document, such as definitions, authorization requirements, and telehealth technology and patient confidentiality, applies to Medicare Plus Blue and BCN Advantage members.

To determine which procedures can be performed via telehealth for Medicare Plus Blue and BCN Advantage members, see the [List of Telehealth Services webpage](#)** on the **cms.gov** website.

When billing telehealth visits, follow Centers for Medicare & Medicaid Services guidance.

Definitions

Telehealth

Telehealth is an umbrella term that includes audiovisual, and telephone-only and asynchronous visits. These visits can improve access and provide an alternative to in-person care. For example, seeking virtual care for mild flu-like symptoms is a safe step for members who want to talk with board-certified doctors and can help avoid the spread of illness in physician office and emergency room settings.

Telemedicine visits

The following types of telemedicine visits are available:

- Visits with Blue Cross- or BCN-contracted providers
- Virtual Care through Teladoc Health[®] — Provides access to virtual urgent care, virtual therapy and virtual psychiatry visits. For more information, see the document titled [Virtual Care by Teladoc Health: Frequently asked questions for providers](#).

During telemedicine visits, patients and health care providers are connected via a secure network. These visits allow for real-time clinical health care services to be provided through electronic technology when distance separates the patient and health care provider.

Providers should use their judgement to determine which visits should be handled via telemedicine. The medical documentation should support the code that is submitted for payment.

Here's some additional information about visits with Blue Cross- or BCN-contracted health care providers:

Question	Telemedicine visits ⁽¹⁾
Who initiates the visit?	Member or provider

Question	Telemedicine visits ⁽¹⁾
Is audiovisual equipment required?	<p>Visits can be conducted by telephone only, if audiovisual (video) technology isn't available. For more information, see "Telephone-only visits" below.</p> <p>For information about setting up a secure network in your office for audiovisual visits, see the "Telehealth technology and patient confidentiality" section below.</p>
Does the visit handle high-complexity health care?	Depends on the provider
Does the visit handle chronic care or ongoing visits?	Yes
What are the network requirements?	<p>If the member receives telemedicine services provided by an in-network provider, the visit will be reimbursed according to their in-network benefit.</p> <p>If the member receives telemedicine services provided by an out-of-network provider, the visit will be reimbursed according to their out-of-network benefit.</p> <p>The network provider can use any acceptable telehealth technology platform; see the "Telehealth technology and patient confidentiality" section for more information.</p>

¹To be considered in network, providers must be contracted with Blue Cross Blue Shield of Michigan for Blue Cross commercial and Medicare Plus Blue members or be contracted with Blue Care Network for BCN commercial and BCN Advantage members.

Telephone-only visits

In addition to visits that use audiovisual technology, Blue Cross and BCN will cover telephone-only visits for all services for which telemedicine is payable for Blue Cross commercial, Medicare Plus Blue, BCN commercial and BCN Advantage members.

Telephone-only visits use the telephone to provide real-time clinical health care services through electronic technology when distance separates the patient and health care provider. The patient and the health care provider are connected only by telephone.

Determining whether a member has a telehealth benefit

Most Blue Cross commercial, all Medicare Plus Blue, all BCN commercial and all BCN Advantage members have coverage for telemedicine visits with in-network providers.

Note: To determine whether a member has telemedicine visits (provided by network providers or provided by Virtual Care through Teladoc Health) as a benefit, see the

[Determining a member's telehealth benefits](#) document. You can find this document on our secure Provider Resources site, which is accessed through Availity EssentialsTM.

Telemedicine visits when the member is outside of Michigan

According to our [Telemedicine Services Medical Policy](#), the provider must be licensed, registered or otherwise authorized to perform the service in the state where the patient is located.

Michigan members who are traveling outside of Michigan can use the number on the back of their ID card to find a participating provider where they are located. They can work with the provider to determine if the visit should be in person or via telehealth. Members can also access online care if their contract includes coverage for Virtual Care through Teladoc Health.

Telemedicine visits when the provider is outside of Michigan

According to the [Telemedicine Services Medical Policy](#), the provider must be licensed, registered, or otherwise authorized to perform service in their health care profession in the state where the patient is located. The provider is not required to be located in the state of Michigan. In addition, services must fall within their scope of practice.

Telehealth technology and patient confidentiality

Blue Cross and BCN typically expect providers to use mechanisms that are compliant with the Health Insurance Portability and Accountability Act, or HIPAA, to conduct therapeutic encounters. Free portals are available to conduct this work. The American Telemedicine Association may be able to provide information that will help you to set up your system for telemedicine visits.

See the [Telehealth Basics](#)** and [Practice Guidelines](#)** pages of the American Telemedicine Association website to determine how to adhere to HIPAA requirements and protect patient confidentiality, as required in your Blue Cross or BCN contract.

Billing telehealth visits

Important! For our approved virtual care provider vendor, Teladoc Health, we pay for online evaluation and management services:

- Procedure codes *98000, *98001, *98004, and *98005, provided to Blue Cross commercial and BCN commercial members
- Procedure codes *99202, *99203, *99211-*99213 provided to Medicare Plus Blue and BCN Advantage members

Other services — Medicare Plus Blue and BCN Advantage

For information about billing other services provided to Medicare Plus Blue and BCN Advantage members, follow CMS guidance.

Other services — Blue Cross commercial and BCN commercial

For Blue Cross commercial and BCN commercial members, follow the guidance in this section.

In general, you can bill for a telemedicine visit if the service falls within your scope of practice and you can meet the documentation requirements of the codes billed. Procedure codes should be billed for telemedicine only if the provider determines that significant progress to established treatment goals can be attained, such as management of acute and chronic conditions. This progress must be documented clearly in the medical record.

When care is delivered virtually, the appropriate place of service must be billed for all codes.

- For telehealth services performed with a patient who is **in their home**, include place of service code 10.
- For telehealth services performed with a patient who is **in a location other than their home**, include place of service code 02.

Telehealth evaluation and management services

The following codes are specific to health care professionals who deliver E/M or assessment and management services by telephone or online:

Telemedicine audio-video codes: *98000, *98001, *98002, *98003, *98004, *98005, *98006, *98007, *99421⁽¹⁾, *99422⁽¹⁾ and *99423⁽¹⁾, *98970⁽²⁾, *98971⁽²⁾, *98972⁽²⁾, G2061⁽²⁾, G2062⁽²⁾ and G2063⁽²⁾

- **Telemedicine audio-only codes:** *98008, *98009, *98010, *98011, *98012, *98013, *98014, *98015, *98016, *98966, *98967, *98968

⁽¹⁾Includes M.D.s, D.O.s, nurse practitioners and physician assistants who deliver evaluation and management services.

⁽²⁾Includes qualified non-physician health care professionals who deliver assessment and management services.

Clinician to clinician interaction: *99446-*99449, *99451-*99452 and G2010

Store and forward encounter: Requires the GQ modifier

CPT/HCPSC codes: Any code that is appropriate for the encounter and provider scope

For information specific to telehealth visits for behavioral health, please see the [Telehealth for behavioral health providers](#) document.

Rural health clinics and federally qualified health centers

Here's how to bill for distant site telehealth services provided in an RHC or FQHC:

- **For Blue Cross commercial and BCN commercial plans:** We allow reimbursement of HCPCS code G2025 for services provided in an RHC or an FQHC. Bill as follows:
 - **For Blue Cross commercial members:** Bill G2025 for the distant site on a CMS-1500 professional claim form.
 - **For BCN commercial members:** Bill according to the contracted agreement.
- **For Medicare Plus Blue, BCN Advantage, Medigap and Medicare Supplement plans:** Follow CMS guidance.

For members who don't have coverage for telehealth services

Members can contact the 24-hour Nurse Line:

- Blue Cross commercial members should call 1-800-775-2583
- BCN commercial members should call 1-855-624-5214

Where to find more information

- The Blue Cross/BCN *Telemedicine Services Medical Policy* can be found in our secure *Provider Resources* site. Click *Billing and Claims* on the menu bar and then click *Telehealth*.
- Centers for Medicare and Medicaid Services [Medicare Telemedicine Health Care Provider Fact Sheet](#)**
- [We're using some new codes for online visits, starting Jan. 1](#) (December 2019 *The Record* article)

None of the information included herein is intended to be legal advice and as such it remains the provider's responsibility to comply with all applicable state and federal laws and regulations, including all coding and documentation requirements.

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Telehealth for medical providers

For Blue Cross commercial, Medicare Plus BlueSM,
Blue Care Network commercial and BCN AdvantageSM

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Availity[®] is an independent company that contracts with Blue Cross Blue Shield of Michigan and Blue Care Network to offer provider portal and electronic data interchange services

Teladoc Health is an independent company that provides virtual care solutions for Blue Cross Blue Shield of Michigan and Blue Care Network.