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Appendix A to rule 5160-1-18 Covered Telehealth Services

<u>Dental</u>	
Procedure Code	<u>Description</u>
D0120	Periodic oral evaluation (added 11/15/2020)
<u>D0140</u>	<u>Limited oral evaluation – problem focused</u>
<u>D9995</u>	<u>Teledentistry - synchronous; real-time encounter; Reported in addition to other procedures (e.g., diagnostic) delivered to the patient on the date of service.</u>

	Long Term Services and Supports:	
Hospice	Hospice (through 12/31/2024), Private Duty Nursing, State Plan Home	
	<u>Health</u>	
Procedure Code	<u>Description</u>	
T2042	Hospice routine home care; per diem (for dates of service through 12/31/2024)	
T2043	Hospice continuous home care; per hour (for dates of service through 12/31/2024)	
<u>T2046</u>	Hospice long term care, room and board only; per diem (for dates of service through 12/31/2024)	
<u>G0299</u>	Direct skilled nursing services of a registered nurse (RN) in the home health or hospice (through 12/31/2024) setting, each 15 minutes	
<u>G0155</u>	Services of clinical social worker in home health or hospice (through 12/31/2024) settings, each 15 minutes	
<u>G0156</u>	Services of home health/ hospice aide in home health or hospice (through 12/31/2024) settings, each 15 minutes	
<u>G0300</u>	<u>Direct skilled nursing services of a licensed practical nurse (LPN) in the home health</u> <u>or hospice (through 12/31/2024) setting, each 15 minutes</u>	
<u>T1001</u>	RN Assessment Services prior to the provision of home health, private duty nursing, waiver nursing, personal care aide and home choice services, per initial base, and each 15-minute increment	
<u>T1001 U9</u>	<u>RN Consultation</u>	
<u>G0151</u>	Physical Therapy, each 15 minutes	
<u>G0152</u>	Occupational Therapy, each 15 minutes	
G0153	Speech-language Pathology, each 15 minutes	

Medical and Behavioral Health Services (non-OhioMHAS certified behavioral health agencies)	
Procedure Code	<u>Description</u>
90785	Interactive complexity (added 11/15/2020)
90791	Psychiatric diagnostic evaluation
90792	Psychiatric diagnostic evaluation with medical services
90832	Psychotherapy, 30 minutes with patient
90833	Psychotherapy, 30 minutes with patient when performed with an evaluation and management service
90834	Psychotherapy, 45 minutes with patient
90836	Psychotherapy, 45 minutes with patient when performed with an evaluation and management service
90837	Psychotherapy, 60 minutes with patient
90838	Psychotherapy, 60 minutes with patient when performed with an evaluation and management service
90846	Family psychotherapy without patient present (added 11/15/2020)
90847	Family psychotherapy with patient present (added 11/15/2020)
90849	Multiple-family group psychotherapy (added 11/15/2020)
90853	Group psychotherapy (added 11/15/2020)
90951	Dialysis related services monthly, for patients younger than 2 years of age to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents; with 4 or more face-to-face visits by a physician or other qualified health care professional per month
90952	Dialysis related services monthly, for patients younger than 2 years of age to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents; with 2-3 face-to-face visits by a physician or other qualified health care professional per month
90953	Dialysis related services monthly, for patients younger than 2 years of age to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents; with 1 face-to-face visit by a physician or other qualified health care professional per month
90954	Dialysis related services monthly, for patients 2-11 years of age to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents; with 4 or more face-to-face visits by a physician or other qualified health care professional per month

90955	Dialysis related services monthly, for patients 2-11 years of age to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents; with 2-3 face-to-face visits by a physician or other qualified health care professional per month
<u>90956</u>	Dialysis related services monthly, for patients 2-11 years of age to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents; with 1 face-to-face visit by a physician or other qualified health care professional per month.
90957	<u>Dialysis related services monthly, for patients 12-19 years of age to include</u> monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents; with 4 or more face-to-face visits by a physician or other qualified health care professional per month
<u>90958</u>	Dialysis related services monthly, for patients 12-19 years of age to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents; with 2-3 face-to-face visits by a physician or other qualified health care professional per month
90959	Dialysis related services monthly, for patients 12-19 years of age to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents; with 1 face-to-face visit by a physician or other qualified health care professional per month
90960	Dialysis related services monthly, for patients 20 years of age and older; with 4 or more face-to-face visits by a physician or other qualified health care professional per month
90961	<u>Dialysis related services monthly, for patients 20 years of age and older; with 2-3 face-to-face visits by a physician or other qualified health care professional per month</u>
90962	Dialysis related services monthly, for patients 20 years of age and older; with 1 face-to-face visit by a physician or other qualified health care professional per month
90963	Dialysis related services for home dialysis per full month, for patients younger than 2 years of age to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents
90964	Dialysis related services for home dialysis per full month, for patients 2-11 years of age to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents
90965	Dialysis related services for home dialysis per full month, for patients 12-19 years of age to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents
90966	Dialysis related services for home dialysis per full month, for patients 20 years of age and older
90967	Dialysis related services for dialysis less than a full month of service, per day; for patients younger than 2 years of age

90968	<u>Dialysis related services for dialysis less than a full month of service, per day; for patients 2-11 years of age</u>
90969	Dialysis related services for dialysis less than a full month of service, per day; for patients 12-19 years of age
90970	Dialysis related services for dialysis less than a full month of service, per day; for patients 20 years of age and older
92012	Eve exam, established patient (added 11/15/2020)
92065	Orthoptic/Pleoptic training (added 11/15/2020)
96112	Developmental test administration (including assessment of fine and/or gross motor, language, cognitive level, social, memory and/or executive functions by standardized developmental instruments when performed), by physician or other qualified health care professional, with interpretation and report; first hour
96113	Developmental test administration (including assessment of fine and/or gross motor, language, cognitive level, social, memory and/or executive functions by standardized developmental instruments when performed), by physician or other qualified health care professional, with interpretation and report; each additional 30 minutes
96116	Neurobehavioral status exam (clinical assessment of thinking, reasoning and judgment, [e.g., acquired knowledge, attention, language, memory, planning and problem solving, and visual spatial abilities]), by physician or other qualified health care professional, both face-to-face time with the patient and time interpreting test results and preparing the report; first hour
96121	Neurobehavioral status exam (clinical assessment of thinking, reasoning and judgment, [e.g., acquired knowledge, attention, language, memory, planning and problem solving, and visual spatial abilities]), by physician or other qualified health care professional, both face-to-face time with the patient and time interpreting test results and preparing the report; each additional hour
96136	Psychological or neuropsychological test administration and scoring by physician or other qualified health care professional, two or more tests, any method; first 30 minutes
96137	Psychological or neuropsychological test administration and scoring by physician or other qualified health care professional, two or more tests, any method; each additional 30 minutes (List separately in addition to code for primary procedure).
<u>96130</u>	Psychological testing evaluation services by physician or other qualified health care professional, including integration of patient data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report, and interactive feedback to the patient, family member(s) or caregiver(s), when performed; first hour
96131	Psychological testing evaluation services by physician or other qualified health care professional, including integration of patient data, interpretation of standardized test results and clinical data, clinical decision making, treatment

	planning and report, and interactive feedback to the patient, family member(s) or caregiver(s), when performed; each additional hour
96132	Neuropsychological testing evaluation services by physician or other qualified health care professional, including integration of patient data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report, and interactive feedback to the patient, family member(s) or caregiver(s), when performed; first hour
<u>96133</u>	Neuropsychological testing evaluation services by physician or other qualified health care professional, including integration of patient data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report, and interactive feedback to the patient, family member(s) or caregiver(s), when performed; each additional hour
97542	Wheelchair management, each 15 minutes (added 11/15/2020)
97802	Medical nutrition therapy; initial assessment and intervention, each 15 minutes
97803	Medical nutrition therapy; re-assessment and intervention, each 15 minutes
97804	Medical nutrition therapy; group (2 or more individuals), each 30 minutes
97802 TH	Lactation counseling by dietictian; initial assessment and intervention, each 15 minutes
97803 TH	Lactation counseling by dietictian; re-assessment and intervention, each 15 minutes
<u>97804 TH</u>	<u>Lactation counseling by dietictian; group with 2 or more individuals), each 30 minutes</u>
98000 (effective 1/1/2025)	New patient synchronous audio-video visit with straightforward medical decision making, if using time 15 minutes or more
98001 (effective 1/1/2025)	New patient synchronous audio-video visit with low medical decision making, if using time 30 minutes or more
98002 (effective 1/1/2025)	New patient synchronous audio-video visit with moderate medical decision making, if using time 45 minutes or more
98004 (effective 1/1/2025)	Established patient synchronous audio-video visit with straightforward medical decision making, if using time 10 minutes or more
98005 (effective 1/1/2025)	Established patient synchronous audio-video visit with low medical decision making, if using time 20 minutes or more
98006 (effective 1/1/2025)	Established patient synchronous audio-video visit with moderate medical decision making, if using time 30 minutes or more
98008 (effective 1/1/2025)	New patient synchronous audio-only visit with straightforward medical decision making and 10 minutes or more of medical discussion, if using time 15 minutes or more

98009	New patient synchronous audio-only visit with low medical decision making and 10
(effective	minutes or more of medical discussion, if using time 30 minutes or more
1/1/2025)	minutes of more of medical discussion, it using time so minutes of more
98010	New patient synchronous audio-only visit with moderate medical decision making
(effective	and 10 minutes or more of medical discussion, if using time 45 minutes or more
1/1/2025)	and 10 minutes of more of medical discussion, if using time 45 minutes of more
98012	Established patient synchronous audio-only visit with straightforward medical
(effective	decision making and 10 minutes or more of medical discussion, if using time 10
<u>1/1/2025)</u>	minutes or more
98013	Established patient synchronous audio-only visit with low medical decision making
(effective	and 10 minutes or more of medical discussion, if using time 20 minutes or more
1/1/2025)	and 10 minutes of more of medical diseassion, if asing time 20 minutes of more
98014	Established patient synchronous audio-only visit with moderate medical decision
(effective	making and 10 minutes or more of medical discussion, if using time 30 minutes or
1/1/2025)	more
98016	Established patient brief communication technology-based service with 5-10
(effective	minutes of medical discussion
1/1/2025)	Immutes of medical discussion
98975	
(effective	Remote therapeutic monitoring (eg, therapy adherence, therapy response, digital
1/1/2023)	therapeutic intervention); initial set-up and patient education on use of equipment
98976	RTM monitoring, respiratory
98977	RTM monitoring, musculoskeletal
<u>98980</u>	Remote therapeutic monitoring treatment management services, physician or
(effective	other qualified health care professional time in a calendar month requiring at least one interactive communication with the patient or caregiver during the calendar
1/1/2022)	month; first 20 minutes
	Remote therapeutic monitoring treatment management services, physician or
98981	other qualified health care professional time in a calendar month requiring at least
(effective	one interactive communication with the patient or caregiver during the calendar
1/1/2022)	month; each additional 20 minutes (List separately in addition to code for primary
	procedure)
99078 TH*	Group Pregnancy Education
	Office or other outpatient visit for the evaluation and management of a new
99202	patient, which requires a medically appropriate history and/or examination and
<u>332UZ</u>	straightforward medical decision making. When using total time on the date of the
	encounter for code selection, 15 minutes must be met or exceeded.
<u>99203</u>	Office or other outpatient visit for the evaluation and management of a new
	patient, which requires a medically appropriate history and/or examination and
	low level of medical decision making. When using total time on the date of the
	encounter for code selection, 30 minutes must be met or exceeded.
99204	Office or other outpatient visit for the evaluation and management of a new
	patient, which requires a medically appropriate history and/or examination and

	moderate level of medical decision making. When using total time on the date of the encounter for code selection, 45 minutes must be met or exceeded.
99211	Office or other outpatient visit for the evaluation and management of an established patient that may not require the presence of a physician or other qualified health care professional
99212	Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and straightforward medical decision making. When using total time on the date of the encounter for code selection, 10 minutes must be met or exceeded.
99213	Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and low level of medical decision making. When using total time on the date of the encounter for code selection, 20 minutes must be met or exceeded.
99214	Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and moderate level of medical decision making. When using total time on the date of the encounter for code selection, 30 minutes must be met or exceeded.
99241 (through 12/31/2022)	Office consultation for a new or established patient. Usually, the presenting problem(s) are self-limited or minor. Typically, 15 minutes.
99242 (description	Office or other outpatient consultation for a new or established patient, which
<u>changed as of</u> <u>1/1/2023)</u>	requires a medically appropriate history and/or examination and straightforward medical decision making. When using total time on the date of the encounter for code selection, 20 minutes must be met or exceeded.
	medical decision making. When using total time on the date of the encounter for
1/1/2023) 99243 (description changed as of	medical decision making. When using total time on the date of the encounter for code selection, 20 minutes must be met or exceeded. Office or other outpatient consultation for a new or established patient, which requires a medically appropriate history and/or examination and low level of medical decision making. When using total time on the date of the encounter for
1/1/2023) 99243 (description changed as of 1/1/2023) 99244 (description changed as of	medical decision making. When using total time on the date of the encounter for code selection, 20 minutes must be met or exceeded. Office or other outpatient consultation for a new or established patient, which requires a medically appropriate history and/or examination and low level of medical decision making. When using total time on the date of the encounter for code selection, 30 minutes must be met or exceeded. Office or other outpatient consultation for a new or established patient, which requires a medically appropriate history and/or examination and moderate level of medical decision making. When using total time on the date of the encounter for
1/1/2023) 99243 (description changed as of 1/1/2023) 99244 (description changed as of 1/1/2023) 99245 (description changed as of	medical decision making. When using total time on the date of the encounter for code selection, 20 minutes must be met or exceeded. Office or other outpatient consultation for a new or established patient, which requires a medically appropriate history and/or examination and low level of medical decision making. When using total time on the date of the encounter for code selection, 30 minutes must be met or exceeded. Office or other outpatient consultation for a new or established patient, which requires a medically appropriate history and/or examination and moderate level of medical decision making. When using total time on the date of the encounter for code selection, 40 minutes must be met or exceeded. Office or other outpatient consultation for a new or established patient, which requires a medically appropriate history and/or examination and high level of medical decision making. When using total time on the date of the encounter for

(description	medical decision making. When using total time on the date of the encounter for
changed as of	<u>code selection, 35 minutes must be met or exceeded.</u>
<u>1/1/2023)</u>	
<u>99253</u>	<u>Inpatient or observation consultation for a new or established patient, which</u>
(description	requires a medically appropriate history and/or examination and low level of
changed as of	medical decision making. When using total time on the date of the encounter for
1/1/2023)	code selection, 45 minutes must be met or exceeded.
99254	Inpatient or observation consultation for a new or established patient, which
(description	requires a medically appropriate history and/or examination and moderate level of
changed as of	medical decision making. When using total time on the date of the encounter for
1/1/2023)	code selection, 60 minutes must be met or exceeded.
99255	Inpatient or observation consultation for a new or established patient, which
(description	requires a medically appropriate history and/or examination and high level of
changed as of	medical decision making. When using total time on the date of the encounter for
1/1/2023)	code selection, 80 minutes must be met or exceeded.
99281	Emergency department visit for the evaluation and management of a patient;
33201	<u>Usually, the presenting problem(s) are self-limited or minor.</u>
	Emergency department visit for the evaluation and management of a patient;
<u>99282</u>	Usually, the presenting problem(s) are of low to moderate severity.
99283	Emergency department visit for the evaluation and management of a patient;
	<u>Usually, the presenting problem(s) are of moderate severity.</u>
	Emergency department visit for the evaluation and management of a patient;
00004	Usually, the presenting problem(s) are of high severity, and require urgent
<u>99284</u>	evaluation by the physician, or other qualified health care professionals but do not
	pose an immediate significant threat to life or physiologic function.
	Emergency department visit for the evaluation and management of a patient;
<u>99285</u>	Usually, the presenting problem(s) are of high severity and pose an immediate
<u> 33263</u>	
	significant threat to life or physiologic function.
	Initial nursing facility care, per day, for the evaluation and management of a
<u>99304</u>	patient. Typically, 25 minutes are spent at the bedside and on the patient's facility
	<u>floor or unit</u> :
	Initial nursing facility care, per day, for the evaluation and management of a
99305	patient. Typically, 35 minutes are spent at the bedside and on the patient's facility
<u>33335</u>	floor or unit-
	Initial nursing facility care, per day, for the evaluation and management of a
<u>99306</u>	<u>patient. Typically, 45 minutes are spent at the bedside and on the patient's facility</u>
	floor or unit-
1	Subsequent nursing facility care, per day, for the evaluation and management of a
99307	patient. Typically, 10 minutes are spent at the bedside and on the patient's facility
	floor or unit:
	Subsequent nursing facility care, per day, for the evaluation and management of a
00300	
99308	patient. Typically, 15 minutes are spent at the bedside and on the patient's facility
	<u>floor or unit</u>

Typically, 20 minutes are spent with the patient and/or family or caregiver. 12/31/2022 10 report, see 9341 9344 9325 (through 12/31/2022) 10 report, see 9341 9344 9326 (through 12/31/2022) 10 report, see 9341 9344 9327 10 report, see 9341 9344 9328 (through 12/31/2022) 10 report, see 9341 9344 9334 Domiciliary or rest home visit for the evaluation and management of a new patient. Typically, 75 minutes are spent with the patient and/or family or caregiver. 10 minutes are spent with the patient and/or family or caregiver. 11 preport, see 9341 9344 12 preport, see 9341 9344 13 preport, see 9341 9344 14 minutes are spent with the patient and/or family or caregiver. 15 preport, see 9341 9344 16 preport, see 9341 9344 17 preport, see 9341 9344 18 preport, see 9341 9344 19 preport, see 9341 9344 10 minutes are spent with the patient and/or family or caregiver. 17 preport, see 9341 9344 18 preport, see 9341 9344 19 preport, see 9341 9344 10 preport, see 9341 9344 11 preport, see 9341 9344 12 preport, see 9341 9344 13 preport, see 9341 9344 14 preport, see 9341 9344 15 preport, see 9341 9344 16 preport, see 9341 9344 17 preport, see 9341 9344 18 preport, see 9341 9344 19 preport, see 9341 9344 19 preport, see 9341 9344 19 preport, see 9341 9344		
patient. Typically, 35 minutes are spent at the bedside and on the patient's facility floor or unit Nursing facility discharge day management; 30 minutes or less Nursing facility discharge day management; more than 30 minutes posside (through 12/31/2022) Foreport. see 19341 19344 posside (through 12/31/2022) Foreport. see 19341	99309	patient. Typically, 25 minutes are spent at the bedside and on the patient's facility
9316 Nursing facility discharge day management: more than 30 minutes 9324 (through 12/31/2022) Foreport, see 93241 99344 99326 (through 12/31/2022) Foreport, see 93241 99344 99327 (through 12/31/2022) Foreport, see 93241 99344 99328 (through 12/31/2022) Foreport, see 93241 99344 99329 (through 12/31/2022) Foreport, see 93241 99344 99324 (through 12/31/2022) Foreport, see 93241 99344 Pomiciliary or rest home visit for the evaluation and management of a new patient. Typically, 15 minutes are spent with the patient and/or family or caregiver. Pomiciliary or rest home visit for the evaluation and management of an established patient. Typically, 15 minutes are spent with the patient and/or family or caregiver. Home or residence visit for the evaluation and management of a new patient. Typically, 15 minutes are spent with the patient and/or family or caregiver. Home or residence visit for the evaluation and management of a new patient.	99310	patient. Typically, 35 minutes are spent at the bedside and on the patient's facility
99324 (through 12/31/2022) Foreport, see 9341 99344 99325 (through 12/31/2022) To report, see 9341 99344 99326 (through 12/31/2022) To report, see 9341 99344 99326 (through 12/31/2022) To report, see 9341 99344 99326 (through 12/31/2022) To report, see 9341 99344 99327 To report, see 9341 99344 99328 (through 12/31/2022) To report, see 9341 99344 99329 (through 12/31/2022) To report, see 9341 99344 99334 (through 12/31/2022) To report, see 9341 99344 99334 (through 12/31/2022) To report, see 9341 99344 Pomiciliary or rest home visit for the evaluation and management of a new patient. Typically, 75 minutes are spent with the patient and/or family or caregiver. Domiciliary or rest home visit for the evaluation and management of a new patient. Typically, 15 minutes are spent with the patient and/or family or caregiver. Home or residence visit for the evaluation and management of an established patient. Typically, 15 minutes are spent with the patient and/or family or caregiver.	<u>99315</u>	Nursing facility discharge day management; 30 minutes or less
Typically, 20 minutes are spent with the patient and/or family or caregiver. 12/31/2022 10 report, see 9341 9344 9325 (through 12/31/2022) 10 report, see 9341 9344 9326 (through 12/31/2022) 10 report, see 9341 9344 9327 10 report, see 9341 9344 9328 (through 12/31/2022) 10 report, see 9341 9344 9334 Domiciliary or rest home visit for the evaluation and management of a new patient. Typically, 75 minutes are spent with the patient and/or family or caregiver. 10 minutes are spent with the patient and/or family or caregiver. 11 preport, see 9341 9344 12 preport, see 9341 9344 13 preport, see 9341 9344 14 minutes are spent with the patient and/or family or caregiver. 15 preport, see 9341 9344 16 preport, see 9341 9344 17 preport, see 9341 9344 18 preport, see 9341 9344 19 preport, see 9341 9344 10 minutes are spent with the patient and/or family or caregiver. 17 preport, see 9341 9344 18 preport, see 9341 9344 19 preport, see 9341 9344 10 preport, see 9341 9344 11 preport, see 9341 9344 12 preport, see 9341 9344 13 preport, see 9341 9344 14 preport, see 9341 9344 15 preport, see 9341 9344 16 preport, see 9341 9344 17 preport, see 9341 9344 18 preport, see 9341 9344 19 preport, see 9341 9344 19 preport, see 9341 9344 19 preport, see 9341 9344	99316	Nursing facility discharge day management; more than 30 minutes
Domiciliary or rest home visit for the evaluation and management of a new patient.	(through 12/31/2022) To report, see	Domiciliary or rest home visit for the evaluation and management of a new patient. Typically, 20 minutes are spent with the patient and/or family or caregiver.
Typically, 30 minutes are spent with the patient and/or family or caregiver.		Domiciliary or rest home visit for the evaluation and management of a new patient.
12/31/2022) To report, see 99341-99344 99326 (through 12/31/2022) To report, see 99341-99344 99327 (through 12/31/2022) To report, see 99341-99344 99321 To report, see 99341-99344 99328 (through 12/31/2022) To report, see 99341-99344 99328 (through 12/31/2022) To report, see 99341-99344 99328 (through 12/31/2022) To report, see 99341-99344 99324 (through 12/31/2022) To report, see 99341-99344 99334 99334 12/31/2022) To report, see 99341-99344 Pomiciliary or rest home visit for the evaluation and management of an established patient. Typically, 15 minutes are spent with the patient and/or family or caregiver. Home or residence visit for the evaluation and management of an established patient. Typically, 15 minutes are spent with the patient and/or family or caregiver. Home or residence visit for the evaluation and management of a new patient. Home or residence visit for the evaluation and management of a new patient. Home or residence visit for the evaluation and management of a new patient.		•
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99326 (through 12/31/2022) To report, see 99341 99344 99327 (through 12/31/2022) To report, see 99341 99344 99328 (through 12/31/2022) To report, see 99341 99344 99344 99344 99344 99344 99344 99344 99344 99344 99344 99344 Pomiciliary or rest home visit for the evaluation and management of a new patient. Typically, 75 minutes are spent with the patient and/or family or caregiver. 99341 99344 Pomiciliary or rest home visit for the evaluation and management of an established patient. Typically, 15 minutes are spent with the patient and/or family or caregiver. Home or residence visit for the evaluation and management of an established patient. Typically, 15 minutes are spent with the patient and/or family or caregiver. Home or residence visit for the evaluation and management of a new patient. Home or residence visit for the evaluation and management of a new patient.	To report, see	
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99341 99344 Home or residence visit for the evaluation and management of a new patient,		
Home or residence visit for the evaluation and management of a new patient,		
99341	99341 99344	
which requires a medically appropriate history and/or examination and	99341	
(effective straightforward medical decision making. When using total time on the date of the	(effective	
1/1/2023) encounter for code selection, 15 minutes must be met or exceeded.	1/1/2023)	
99342 Home or residence visit for the evaluation and management of a new patient,	99342	
		which requires a medically appropriate history and/or examination and low level of
1/1/2023)		

	medical decision making. When using total time on the date of the encounter for
	code selection, 30 minutes must be met or exceeded.
99344	Home or residence visit for the evaluation and management of a new patient,
(effective	which requires a medically appropriate history and/or examination and moderate
1/1/2023)	<u>level of medical decision making. When using total time on the date of the</u>
1/1/2025/	encounter for code selection, 60 minutes must be met or exceeded.
99335	Domiciliary or rest home visit for the evaluation and management of an established
(through	patient. Typically, 25 minutes are spent with the patient and/or family or caregiver.
12/31/2022)	
To report, see	
99347 99349	
99336	Domiciliary or rest home visit for the evaluation and management of an established
(through	patient. Typically, 40 minutes are spent with the patient and/or family or caregiver.
12/31/2022)	
To report, see	
99347 99349	
99337	Domiciliary or rest home visit for the evaluation and management of an established
(through	patient. Typically, 60 minutes are spent with the patient and/or family or caregiver.
12/31/2022)	
To report, see	
99347 99349	
	Home or residence visit for the evaluation and management of an established
99347	patient, which requires a medically appropriate history and/or examination and
(effective	straightforward medical decision making. When using total time on the date of the
1/1/2023)	encounter for code selection, 20 minutes must be met or exceeded.
00240	Home or residence visit for the evaluation and management of an established
99348	patient, which requires a medically appropriate history and/or examination and
(effective	low level of medical decision making. When using total time on the date of the
1/1/2023)	encounter for code selection, 30 minutes must be met or exceeded.
00240	Home or residence visit for the evaluation and management of an established
99349 (effective	patient, which requires a medically appropriate history and/or examination and
1/1/2023)	moderate level of medical decision making. When using total time on the date of
<u>1/1/2023/</u>	the encounter for code selection, 40 minutes must be met or exceeded.
<u>99401</u>	Preventative medicine counseling, first 15 minutes
99402	Preventative medicine counseling, 15-30 minutes
<u>99406</u>	Smoking and tobacco use cessation counseling visit; intermediate, greater than 3
	minutes up to 10 minutes
	Smoking and tobacco use cessation counseling visit; intensive, greater than 10
99407	minutes
99421	Online digital evaluation and management service, for an established patient, for
<u>33421</u>	up to 7 days, cumulative time during the 7 days; 5-10 minutes
99422	Online digital evaluation and management service, for an established patient, for
	up to 7 days, cumulative time during the 7 days; 5-10 minutes Online digital evaluation and management service, for an established patient, for

99423	Online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 21 or more minutes
99441 (through 12/31/2024) To report, see 98009-98014	Telephone evaluation and management service by a physician or other qualified health care professional who may report evaluation and management services provided to an established patient, parent, or guardian not originating from a related E/M service provided within the previous 7 days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment; 5-10 minutes of medical discussion
99442 (through 12/31/2024) To report, see 98009-98014	Telephone evaluation and management service by a physician or other qualified health care professional who may report evaluation and management services provided to an established patient, parent, or guardian not originating from a related E/M service provided within the previous 7 days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment; 11-20 minutes of medical discussion
99453	Remote monitoring of physiologic parameter(s) (e.g., weight, blood pressure, pulse oximetry, respiratory flow rate), initial; set-up and patient education on use of equipment
<u>99454</u>	Remote monitoring of physiologic parameter(s) (e.g., weight, blood pressure, pulse oximetry, respiratory flow rate), initial; device(s) supply with daily recording(s) or programmed alert(s) transmission, each 30 days
<u>99457</u>	Remote physiologic monitoring treatment management services, clinical staff/physician/other qualified health care professional time in a calendar month requiring interactive communication with the patient/caregiver during the month; first 20 minutes
99458	Remote physiologic monitoring treatment management services, clinical staff/physician/other qualified health care professional time in a calendar month requiring interactive communication with the patient/caregiver during the month; each additional 20 minutes (list separately in addition to code for primary procedure)
<u>G0011</u>	Individual counseling for pre-exposure prophylaxis (PrEP) by physician or qualified health care professional (QHP) to prevent human immunodeficiency virus (HIV), includes HIV risk assessment (initial or continued assessment of risk), HIV risk reduction and medication adherence, 15 to 30 minutes.
G0013	Individual counseling for pre-exposure prophylaxis (PrEP) by clinical staff to prevent human immunodeficiency virus (HIV), includes: HIV risk assessment (initial or continued assessment of risk), HIV risk reduction and medication adherence
<u>G0406</u>	Follow-up inpatient consultation, limited, physicians typically spend 15 minutes communicating with the patient via telehealth
<u>G0407</u>	Follow-up inpatient consultation, intermediate, physicians typically spend 25 minutes communicating with the patient via telehealth
<u>G0408</u>	Follow-up inpatient consultation, complex, physicians typically spend 35 minutes communicating with the patient via telehealth

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<u>G0425</u>	Telehealth consultation, emergency department or initial inpatient, typically 30 minutes communicating with the patient via telehealth
<u>G0426</u>	Telehealth consultation, emergency department or initial inpatient, typically 50 minutes communicating with the patient via telehealth
<u>G0427</u>	<u>Telehealth consultation, emergency department or initial inpatient, typically 70 minutes or more communicating with the patient via telehealth</u>
<u>G0108</u>	<u>Diabetes management training, individual, 30 minutes</u>
<u>G0109</u>	<u>Diabetes management training, group, 30 minutes</u>
62012	
<u>G2012</u>	Brief communication technology-based service, e.g., virtual check-in, by a
(through 12/31/2024)	physician or other qualified health care professional who can report evaluation and
12/31/2024)	management services, provided to an established patient, not originating from a
	related E/M service provided within the previous 7 days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment; 5-
	10 minutes of medical discussion
G2010	Remote evaluation of recorded video and/or images submitted by an established
<u> </u>	patient (e.g., store and forward), including interpretation with follow-up with the
	patient within 24 business hours, not originating from a related E/M service
	provided within the previous 7 days nor leading to an E/M service or procedure
	within the next 24 hours or soonest available appointment
<u>G0406</u>	Follow up inpatient consultation, limited, physicians typically spend 15 minutes
	communicating with the patient via telehealth
G0407	Follow up inpatient consultation, intermediate, physicians typically spend 25
	minutes communicating with the patient via telehealth
G0408	Follow-up inpatient consultation, complex, physicians typically spend 35 minutes
	communicating with the patient via telehealth
G0425	Telehealth consultation, emergency department or initial inpatient, typically 30
	minutes communicating with the patient via telehealth
H1000 G0426	Perinatal risk assessment Telehealth consultation, emergency department or initial
	inpatient, typically 50 minutes communicating with the patient via telehealth
H1005 G0427	Nurse Family Partnership nurse home visiting Telehealth consultation, emergency
	department or initial inpatient, typically 70 minutes or more communicating with
	the patient via telehealth
<u>H2000</u>	
H2000 S9436	the patient via telehealth
	the patient via telehealth Child Adolescent Needs and Strengths (CANS) assessment
\$9436 \$9437 \$9443 (added	the patient via telehealth Child Adolescent Needs and Strengths (CANS) assessment Childbirth prep/Lamaze classes, non-physician provider, per session
<u>\$9436</u> <u>\$9437</u>	the patient via telehealth Child Adolescent Needs and Strengths (CANS) assessment Childbirth prep/Lamaze classes, non-physician provider, per session Childbirth refresher classes, non-physician provider, per session

<u>\$9447</u>	Infant safety (including CPR) training, non-physician provider, per session
<u>\$9452</u>	Prenatal nutrition classes, non-physician provider, per session
<u>\$9453</u>	Smoking cessation class, non-physician provider, per session
<u>\$9470</u>	Prenatal nutrition counseling, dietician visit
0403T (added	Preventive behavior change, intensive program of prevention of diabetes using a
7/1/2024)	standardized diabetes prevention program curriculum, provided to individuals in a
	group setting, minimum 60 minutes, per day
<u>0488T</u>	<u>Diabetes prevention, online/electronic, per month</u>
<u>T1032</u>	Services performed by a doula birth worker, per 1515 minutes
(effective	
10/3/2024)	
<u>T1023</u>	Report of pregnancy (ROP)
H1000	Perinatal risk assessment
H1005	Nurse Family Partnership nurse home visiting
<u>T1030</u>	Family Connects home visiting

Occupational Th	Occupational Therapy, Physical Therapy, Speech-Language Pathology,			
and Audiology Services				
As Found in OAC 5160-8-35				
<u>Procedure Code</u>	Code Description			
<u>92507</u>	Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual			
<u>92508</u>	Treatment of speech, language, voice, communication, and/or auditory processing disorder; group, 2 or more individuals			
<u>92521</u>	Evaluation of speech fluency (e.g., stuttering, cluttering)			
<u>92522</u>	Evaluation of speech sound production (e.g., articulation, phonological process, apraxia, dysarthria)			
92523	Evaluation of speech sound production (e.g., articulation, phonological process, apraxia, dysarthria); with evaluation of language comprehension and expression (e.g., receptive and expressive language)			
<u>92524</u>	Behavioral and qualitative analysis of voice and resonance			
<u>92526</u>	Treatment of swallowing dysfunction and/or oral function for feeding			
<u>92556</u>	Speech audiometry threshold; with speech recognition			
92601	Diagnostic analysis of cochlear implant, patient younger than 7 years of age; with programming			
92602	Diagnostic analysis of cochlear implant, patient younger than 7 years of age; subsequent reprogramming			

<u>92603</u>	Diagnostic analysis of cochlear implant, age 7 years or older; with
02504	programming Diagnostic analysis of cochlear implant, age 7 years or older; subsequent
<u>92604</u>	reprogramming
<u>92606</u>	Therapeutic service(s) for the use of non-speech-generating device, including programming and modification
<u>92607</u>	<u>Evaluation for prescription for speech-generating augmentative and</u> <u>alternative communication device, face-to-face with the patient; first</u> <u>hour</u>
<u>92608</u>	<u>Evaluation for prescription for speech-generating augmentative and alternative communication device, face-to-face with the patient; each additional 30 minutes (List separately in addition to code for primary procedure)</u>
92609	Therapeutic services for the use of speech-generating device, including programming and modification
96110	Developmental screening (e.g., developmental milestone survey, speech and language delay screen), with scoring and documentation, per standardized instrument
96112	Developmental test administration (including assessment of fine and/or gross motor, language, cognitive level, social, memory and/or executive functions by standardized developmental instruments when performed), by physician or other qualified health care professional, with interpretation and report; first hour
<u>96113</u>	Developmental test administration (including assessment of fine and/or gross motor, language, cognitive level, social, memory and/or executive functions by standardized developmental instruments when performed), by physician or other qualified health care professional, with interpretation and report; each additional 30 minutes
97110	Therapeutic procedure, 1 or more areas, each 15 minutes; therapeutic exercises to develop strength and endurance, range of motion and flexibility
97112	Therapeutic procedure, 1 or more areas, each 15 minutes; neuromuscular reeducation of movement, balance, coordination, kinesthetic sense, posture, and/or proprioception for sitting and/or standing activities
<u>97116</u>	Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)
<u>97161</u>	Physical therapy evaluation: low complexity. Typically, 20 minutes are spent face-to-face with the patient and/or family.
97162	Physical therapy evaluation: moderate complexity. Typically, 30 minutes are spent face-to-face with the patient and/or family.

<u>97163</u>	Physical therapy evaluation: high complexity, requiring these components: A history of present problem with 3 or more personal factors and/or comorbidities that impact the plan of care
<u>97164</u>	Re-evaluation of physical therapy established plan of care. Typically, 20 minutes are spent face-to-face with the patient and/or family.
<u>97165</u>	Occupational therapy evaluation, low complexity. Typically, 30 minutes are spent face-to-face with the patient and/or family.
<u>97166</u>	Occupational therapy evaluation, moderate complexity. Typically, 45 minutes are spent face-to-face with the patient and/or family.
<u>97167</u>	Occupational therapy evaluation, high complexity, requiring these components: An occupational profile and medical and therapy history, which includes review of medical and/or therapy records and extensive additional review of physical, cognitive, or psychosocial history related to current functional performance
<u>97168</u>	Re-evaluation of occupational therapy established plan of care. Typically, 30 minutes are spent face-to-face with the patient and/or family.
97129	Therapeutic interventions that focus on cognitive function and compensatory strategies to manage the performance of an activity (e.g., managing time or schedules, initiating, organizing, sequencing tasks), direct (one-on-one) patient contact; initial 15 minutes
97130	Therapeutic interventions that focus on cognitive function and compensatory strategies to manage the performance of an activity (e.g., managing time or schedules, initiating, organizing, and sequencing tasks), direct (one-on-one) patient contact; each additional 15 minutes (list separately in addition to code for primary procedure)
<u>97530</u>	Therapeutic activities, direct (one-on-one) patient contact (use of dynamic activities to improve functional performance), each 15 minutes
<u>97533</u>	Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes
<u>97535</u>	Self-care/home management training (eg. activities of daily living [ADL] and compensatory training, meal preparation, safety procedures, and instructions in use of assistive technology devices/adaptive equipment) direct one-on-one contact, each 15 minutes
<u>97750</u>	Physical performance test or measurement (eg, musculoskeletal, functional capacity), with written report, each 15 minutes
<u>97755</u>	Assistive technology assessment (eg, to restore, augment or compensate for existing function, optimize functional tasks and/or maximize environmental accessibility), direct one-on-one contact, with written report, each 15 minutes

<u>97760</u>	Orthotic(s) management and training (including assessment and fitting when not otherwise reported), upper extremity(ies), lower extremity(ies) and/or trunk, initial orthotic(s) encounter, each 15 minutes
<u>97761</u>	Prosthetic(s) training, upper and/or lower extremity(ies), initial prosthetic(s) encounter, each 15 minutes

Specialized Recovery Services (SRS) Program As found in Chapter 5160-43 of the OAC		
Procedure Code	<u>Description</u>	
<u>H0038</u>	Specialized Recovery Services (SRS) program – peer recovery support services	
<u>H2023</u>	Specialized Recovery Services (SRS) program – supported employment	
<u>H2025</u>	Specialized Recovery Services (SRS) program – ongoing support to maintain employment	
<u>T1016</u>	Specialized Recovery Services (SRS) program – recovery management	
H0038	Specialized Recovery Services (SRS) program—peer recovery support services	