Telehealth Service Modifiers

Telehealth modifiers must be submitted with distant site telehealth services. Generally, interactive audio and video telecommunications systems must be used to allow real-time communication between the distant site physician or practitioner and the patient. The patient must be present and actively participating in the telehealth visit.

A List of Telehealth Services is available on the CMS website.

Modifier	Description	Additional Information
93	Telehealth modifier defined as "synchronous telemedicine service rendered via telephone or other real-time interactive audio-only telecommunications system."	Modifier 93 is used for **audio-only communication**: • Permitted for patients in their home if patient does not have: o Technical capacity o Availability of real-time audio and visual interactive technology • Permitted for patients in their home if patient does not: o Consent to the use of 2-way, audio/video technology • Opioid Treatment Programs (OTPs) services furnished using **audio-only technology including:** o Intake activities o Periodic assessments o Counseling and therapy services • Reference: OTP Billing & Payment - Claims RHCs and FQHCs can report either modifier 93 or FQ for services provided by audio-only technology.
95	Telehealth modifier defined as synchronous telemedicine service rendered via real-time Interactive audio and video telecommunications system.	**Use modifier 95 for:** • Telehealth services furnished by a physician to a patient participating in the Acute

		• Hospital Care at Home (AHCAH) program:
		  o **Report (POS) 21 (Inpatien Hospital) and append modifier 95**
		• Outpatient therapy services provided via telehealth by qualified physical therapists, occupational therapists, or speech language pathologists employed by hospitals
		• Opioid Treatment Programs (OTPs) services furnished using **audio-video technolog including:**
		  o Intake activities
		  o Periodic assessments
		  o Counseling and therapy services
		• Reference: OTP Billing & Payment - Claims

FQ	The service was furnished using audio-only communication technology.	• This modifier can only be used by RHCs and FQHCs
G0 (zero)	Telehealth services furnished for purposes of diagnosis, evaluation, or treatment of symptoms of an acute stroke.	Valid for: • Telehealth distant site codes billed with place of service (POS) code 02; or • CAH method II (revenue codes 096X, 097X, or 098X); or • Telehealth originating site facility fee, billed with HCPCS code Q3014.
GQ	Telehealth service rendered via asynchronous telecommunications system.	Certifying the collection and transmission of the asynchronous medical file at the distant site from a federal telemedicine demonstration conducted in Alaska or Hawaii.

GT	Telehealth service via interactive audio and video telecommunication systems.	Only allowed on institutional claims billed by CAH method II providers.

References

- MLN Booklet MLN901705, Telehealth & Remote Monitoring
- Place of Service Codes
- Telehealth
- List of Telehealth Services
- Telehealth.HHS.gov
- Telehealth FAQ - Updated 2/26/2026
- Telehealth Services
- List of Telehealth Services
- MLN Matters Article MM14315, Medicare Physician Fee Schedule Final Rule Summary: CY 2026
- MLN Matters Article MM13887, Medicare Physician Fee Schedule Final Rule Summary: CY 2025
- CMS IOM Pub. 100-04 Medicare Claims Processing Manual, Chapter 12, Section 190
- CMS IOM Pub. 100-04 Medicare Claims Processing Manual, Chapter 39, Section 30.5
- OTP Billing & Payment

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