



Doctor-Remote Comprehensive Eye Exam and General Telemedicine Services FAQs

DOCTOR-REMOTE COMPREHENSIVE EYE EXAM DETAILS	
If my practice is part of VSP's pilot, how do I bill for a doctor-remote comprehensive eye exam? (<i>patient in office, doctor remote</i>)	New: VSP network practices that have the capability to offer doctor-remote comprehensive eye exams (VSP refers to these exams as WellVision eExams™) and have agreed to participate in VSP's pilot will have the ability to file these claims in-network, which include 92002, 92004, 92012, 92014, 92015, S0620, and S0621 with modifier 95. Retinal imaging/video used to complete exam criteria is considered a bundled service, no balance billing.
With doctor-remote comprehensive eye exams, can I still bill separately for retinal screening since I'm required to do retinal imaging/video to complete the exam?	If you choose to incorporate this telehealth model in your practice, VSP requires wide-field retinal imaging as the minimum substitution for in-person evaluations. Retinal imaging/video used as a substitution for in-person evaluations to complete minimum exam criteria is considered a bundled service, no balance billing. Handle additional services performed that enhance the exam as you do today: bill VSP for covered services and the member for non-covered services.
Why can't I bill for retinal screening for the imaging/video used to complete a doctor-remote comprehensive eye exam when it is a covered benefit for the patient?	In order to complete the necessary elements of an intermediate/comprehensive eye exam remotely, retinal images/videos are required to fully assess the patient's eye health and vision system. As a result, retinal imaging/video used to complete minimum exam criteria is considered a bundled service, no balance billing. VSP will reimburse you according to your contracted WellVision Exam® fee (based on location, service billed, and patient's coverage), less any copay. Handle additional services performed that enhance the exam as you do today: bill VSP for covered services and the member for non-covered services.
Why can I bill for retinal screening on a PEC/DEP Plus telehealth claim, but not on a doctor-remote comprehensive eye exam?	Retinal screening or fundus photography used to add to the in-person exam services performed remain billable under Primary EyeCareSM and Diabetic Eyecare Plus ProgramSM. In a doctor-remote comprehensive exam, the retinal imaging/video used as a substitution for in-person evaluations is considered a bundled service. Handle additional services performed that enhance the exam as you do today: bill VSP for

	covered services and the member for non-covered services. Additionally, a retinal screening remains billable (either to VSP if covered or VSP's not-to-exceed \$39 price, when applicable) as an added service to an in-person WellVision Exam®.
Why won't VSP pay a higher rate on doctor-remote comprehensive eye exams when I have additional costs to provide this service to your patients?	Doctor-remote eye exams follow the appropriate payment guidelines and fees of the service performed and patient's benefit being billed, less applicable copay. Technology used to perform exam services is at the discretion of the provider.
As part of VSP's doctor-remote comprehensive eye exam pilot, can I also bill for contact lens exam services?	Yes. When conducting contact lens exam services for either new or existing contact lens wearers, use your professional judgement for determining when the doctor-remote eye exam model is appropriate. Bill the applicable CPT code (92310-92313, 92326) for services performed with modifier 95, which must meet the corresponding criteria based on level of service provided.
I want to use a remote doctor provided by a vendor. How do I ensure the provider can see VSP patients?	Reach out to the Provider Network & Development team to ensure the remote doctor is properly credentialed and tied back to your practice to ensure accurate billing. If the remote doctor is already credentialed with VSP, please submit a request in VSPOnline under Practice/Doctor Updates. If the remote doctor is not credentialed with VSP, please complete the Become A VSP Provider Form online to initiate credentialing. If you have additional questions about credentialing, please email providernetworkdevelopment@vsp.com.
Can a patient receive both a WellVision Exam® and a WellVision eExam™ within the same benefit period?	No, the WellVision Exam and WellVision eExam are both considered comprehensive eye exams, just a different delivery method.
GENERAL TELEMEDICINE SERVICES	
Does the patient need to consent prior to receiving telemedicine services?	Yes. VSP requires the doctor performing telemedicine services to inform the beneficiary, obtain consent, and maintain appropriate documentation. Note: Many states mandate patient consent, either verbal or written. For all other carriers, we recommend you refer to your local health authority guidelines and the American Optometric Association guidelines, as well as current regulatory guidelines and notices.
How should I document patient consent?	Use the following statement in the patient's record (e.g., EHR or paper) as a best practice. Example: "Mrs. Jennifer Walker has given verbal consent to be examined remotely on [date of the exam]."

	If you use paper charts rather than an Electronic Health Record (EHR) system, you can document a patient's consent for telemedicine services in their chart.
Does my malpractice have to be modified to include telemedicine?	Check with your liability insurance to verify if it covers telemedicine services, for your protection.
Do I need to have telemedicine liability coverage?	Yes, to perform telemedicine services in your practice, you need to have telemedicine liability coverage. Check with your carrier.
When billing for remote services, is a diagnosis code still required?	Yes, you must have a valid ICD-10-CM diagnosis code.
What diagnosis codes are allowed for telemedicine?	The delivery of services through telemedicine does not limit or change the diagnosis determination. Note: Practices can refer to the Provider Reference Manual on VSPOnline at eyefinity.com for more information on VSP's billable diagnosis codes.
Are all patients who have Primary EyeCare SM (PEC) eligible for telemedicine services?	Yes, PEC includes approved telemedicine services that can be billed when appropriate. Details on covered telemedicine services and billing are available in the Provider Reference Manual under Telemedicine on VSPOnline at eyefinity.com .
Do all VSP patients have Primary EyeCare SM (PEC)?	No, not all VSP members have Primary EyeCare coverage. You can check eligibility and coverage details on eyefinity.com. Through September 30, 2021, VSP is extending Primary EyeCare services to most VSP insured members that do not already have it (excludes MetLife, Access, and Vision Savings Pass members). See the Provider Reference Manual for details.
I offer telemedicine services to my patients. How can I update my services on Find a Doctor on vsp.com ?	You can self-update this information on VSPOnline through eyefinity.com. Navigate to "Administration," then select "Practice/Doctor Updates." Select "Update Information," then "Office Special Interests," and then the "Telemedicine" checkbox. A "Telemedicine Services Available" indicator will be placed next to your practice name on the Find a Doctor Directory on vsp.com. Note that there isn't a special indicator to show that a location offers the WellVision eExamTM. The "Telemedicine services available" indicator is the same indicator used for all VSP network providers who offer telehealth options for essential medical eye care or other remote care needs.
VSP COVERAGE AND BILLING	
How do I bill for telemedicine services?	It's the exact same process you do today. The only difference is adding the appropriate telemedicine modifier based on the Current Procedural Terminology (CPT®) code billed. Remember to use the correct CPT code and appropriate modifiers to indicate the modality it was rendered (synchronous/asynchronous).
What telemedicine services does VSP cover? (<i>patient is not in the office</i>)	Services currently covered: VSP reimburses providers for medical eye care services delivered via telehealth channels, including specific exam

	CPT codes (92002, 92004, 92012, 92014) and Evaluation & Management CPT codes (99202-99205, 99211-99215, 99421-99423, 99441-99443) covered under the Primary EyeCareSM Plan and Diabetic Eyecare Plus ProgramSM, with appropriate modifiers to indicate the modality it was rendered (synchronous/asynchronous). • In addition to specific Evaluation & Management CPT codes, additional services include CPT codes 92227 and 92228 (remote retinal imaging services) covered under the Primary EyeCare Plan and Diabetic Eyecare Plus Program. • VSP also covers interprofessional telephone/internet assessment and management services (99446-99449, 99451-99452). These are procedure codes to report doctor to doctor office's consultation services payable under VSP's medical eye care plans. • VSP also reimburses for vision therapy sessions (CPT code 92065) when performed remotely and billed with appropriate modifiers to indicate the modality it was rendered (synchronous/asynchronous).
What telemedicine services are available for a new patient? (<i>patient is not in the office</i>)	Most of the codes are for established patients. However, Evaluation and Management codes can be billed via telemedicine for new (99202-99205) or established patients (99211-99215) based on the level of service performed. New: VSP network practices that have the capability to offer doctor-remote comprehensive eye exams (VSP refers to these exams as WellVision eExamsTM) and who have agreed to participate in VSP's pilot will have the ability to file these claims in-network, which include 92002, 92004, 92015, and S0620. Note: Standard billing and documentation requirements must be followed for both remote and in-office services for each specific code.
Does VSP cover a doctor-remote comprehensive eye exam? (<i>patient in office, doctor remote</i>)	New: VSP network practices that have the capability to offer doctor-remote comprehensive eye exams (VSP refers to these exams as WellVision eExamsTM) and who have agreed to participate in VSP's pilot will have the ability to file these claims in-network. Retinal imaging/video used to complete exam criteria is considered a bundled service, no balance billing. Refer to the Doctor-Remote Comprehensive Eye Exam section for additional details.
What Place of Service Code should I use?	When billing VSP, use modifiers GQ or 95 to identify telemedicine services and place of service 11 (POS 11). • VSP recognizes but does not currently support electronic claim submission via Eyefinity with place of service code 02 (POS 02) for reporting telehealth services. • Exception: POS 02 is accepted when submitted on paper as a secondary coordination of benefit claim, 837 and some practice management systems (Eyefinity Practice Management and Officemate). When billing other carriers, verify their billing requirements.

	Medicare is temporarily allowing POS 11 and modifier 95.
Does VSP pay a different fee for telemedicine services than it pays for the same services provided in person?	No. VSP pays the same amount for medical eye care services provided via telemedicine as it does for the same services performed in person. Additionally, for providers participating in the VSP pilot, VSP pays the same contracted fee for a routine comprehensive exam delivered in person or remotely (patient in office, doctor remote). Retinal imaging/video used to complete exam criteria is considered a bundled service, no balance billing.
MODIFIERS	
What modifier should I use?	Check with the patient's health or vision plan for insurance specific telemedicine billing details. VSP requires 95 or GQ to designate the mode of telehealth used to provide services.
How do I determine which E/M code to bill for a telehealth visit?	It's the exact same documentation you do today. As the doctor, you must select the best code that satisfies the exam criteria based on the CC/HPI and conditions/technology available for each specific patient/exam type. Standard billing and documentation requirements must be followed for both remote and in-office services for each specific code, including adding a modifier for telemedicine services, when applicable.
What is the difference between the modifiers 95/GQ/GT?	Medicare will accept 95 or GT, VSP uses 95 or GQ, and some private insurances will use all three. Check with the patient's carrier for billing details. 95 = Synchronous telecommunications communication GQ = Asynchronous telecommunications communication GT = via interactive audio and video telecommunications systems When billing other carriers, verify their billing requirements. Medicare is temporarily allowing POS 11.