

Service	CPT Code	wRVUs	Non-Facility Estimated Fee	Facility Estimated Fee	CPT Guidance
Virtual Check In	G2012	0.25	\$14.78	\$13.33	<ul style="list-style-type: none"> <li>Established patients</li> <li>Cannot originate from a related EM within the previous 7 days</li> <li>Cannot leading to an EM or procedure within the next 24 hours or soonest available appointment</li> <li>5-10 minutes of medical discussion</li> <li>Require patient consent prior to performing and billing the service</li> </ul>
Remote Eval of Pre-Recorded Video/Images Established Pt	G2010	0.18	\$12.61	\$9.37	<ul style="list-style-type: none"> <li>Established patients</li> <li>Follow-up with the patient within 24 business hours</li> <li>Cannot originate from a related EM within the previous 7 days</li> <li>Cannot leading to an EM or procedure within the next 24 hours or soonest available</li> <li>Require patient consent prior to performing and billing the service</li> </ul>
InterProfessional telephone/Internet/EHR assessment/management (consultation)	99451	0.70	\$37.48	\$37.48	<ul style="list-style-type: none"> <li>Time Based Codes</li> <li>New or Established Patients</li> <li>Billed by practitioners that can bill E/M services</li> <li>Require written report to treating/requesting provider</li> <li>Consultant should not have seen the patient in a face-to-face encounter within the last 14 days</li> <li>The written or verbal request for by the treating/requesting provider should be documented.</li> <li>Require patient consent prior to performing and billing the service</li> </ul>
	99452	0.70	\$37.48	\$37.48	
Remote Physiologic Monitoring Treatment Management Services	99453	Practice Expense Codes Only	\$19.46	Practice Expense Codes Only	<ul style="list-style-type: none"> <li>Device used must be a medical device as defined by the FDA</li> <li>99453 may be used to report the set-up and patient education on use of the device(s).</li> <li>99454 may be used to report supply of the device - each 30 day</li> <li>99457 report once each 30 days regardless of the number of parameters monitored.</li> <li>99457 Requires 20 minutes or more of clinical staff/ physician/other qualified health care professional time in a calendar month.</li> </ul>
	99454		\$64.15		
	99457	0.61	\$51.54	\$32.44	