

June 15, 2023

**AHCCCS Audio Only Telehealth Changes**

Effective May 12, 2023, the audio only modifier FQ will no longer be valid for any Evaluation and Management codes. During the federally declared Public Health Emergency (PHE) AHCCCS sought and received approval for a waiver to allow the use of audio only delivery of the service codes identified below. When the PHE ended on May 11, 2023, the 2023 CPT guidelines will go into effect, which state that these services must be delivered face-to-face. Providers will be able to use modifier GT - Via interactive audio and video telecommunication systems for those services performed via synchronous telehealth (remote exchange of patient information through direct, real-time interaction between a physician and a patient).

All evaluation and management codes will be updated to reflect an end date of the FQ modifier effective for dates of service July 1, 2023, and after. This will also be updated on the AHCCCS approved telehealth spreadsheet located on the AHCCCS Medical Coding Resources page.

99202	Office or other outpatient visits for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and straightforward medical decision making. When using time for code selection, 15-29 minutes of total time is spent on the date of the encounter.	GT		
99203	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 time for code selection, 30-44 minutes of total time is spent on the date of the encounter.	GT		
99204	Office or other outpatient visits 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 time for code selection, 45-59 minutes of total time is spent on the date of the encounter.	GT		
99205	Office or other outpatient visit for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and high level of medical decision making. When using time for code selection, 60-74 minutes of total time is spent on the date of the encounter.	GT		



99211	Office or other outpatient visits for the evaluation and management of an established patient, that may not require the presence of a physician or other qualified health care professional. Usually, the presenting problem(s) are minimal.	GT		
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 time for code selection, 10-19 minutes of total time is spent on the date of the encounter.	GT		
99213	Office or other outpatient visits 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 time for code selection, 20-29 minutes of total time is spent on the date of the encounter.	GT		
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 time for code selection, 30-39 minutes of total time is spent on the date of the encounter.	GT		
99215	Office or other outpatient visits for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and high level of medical decision making. When using time for code selection, 40-54 minutes of total time is spent on the date of the encounter.	GT		
99288	Physician or other qualified health care professional direction of emergency medical systems (EMS) emergency care, advanced life support	GT		
99358	Prolonged evaluation and management service before and/or after direct patient care; first hour	GT		
99359	Prolonged evaluation and management service before and/or after direct patient care; each additional 30 minutes (List separately in addition to code for prolonged service)	GT		
99417	Prolonged outpatient evaluation and management service(s) time with or without direct patient	GT		

	contact beyond the required time of the primary service when the primary service level has been selected using total time, each 15 minutes of total time (List separately in addition to the code of the outpatient Evaluation and Management service)			
99497	Advance care planning including the explanation and discussion of advance directives such as standard forms (with completion of such forms, when performed), by the physician or other qualified health care professional; first 30 minutes, face-to-face with the patient, family member(s), and/or surrogate	GT		
99498	Advance care planning including the explanation and discussion of advance directives such as standard forms (with completion of such forms, when performed), by the physician or other qualified health care professional; each additional 30 minutes (List separately in addition to code for primary procedure)	GT		