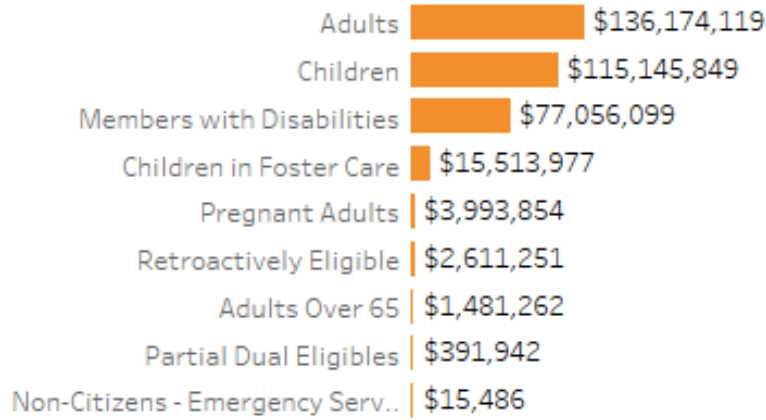


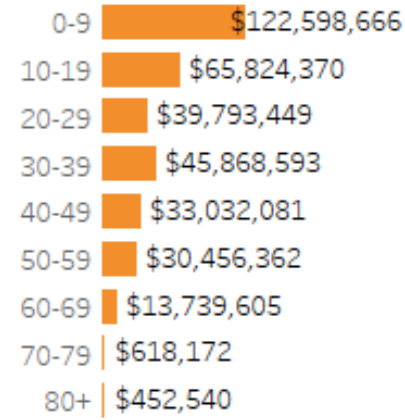
# Outpatient and Professional Services Eligible for Telemedicine

Service Type  
■ Not Telemedicine  
■ Telemedicine

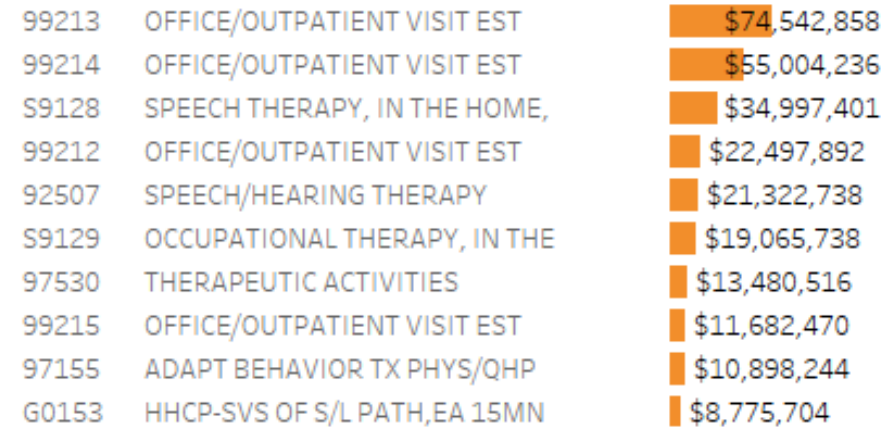
## Eligibility Category



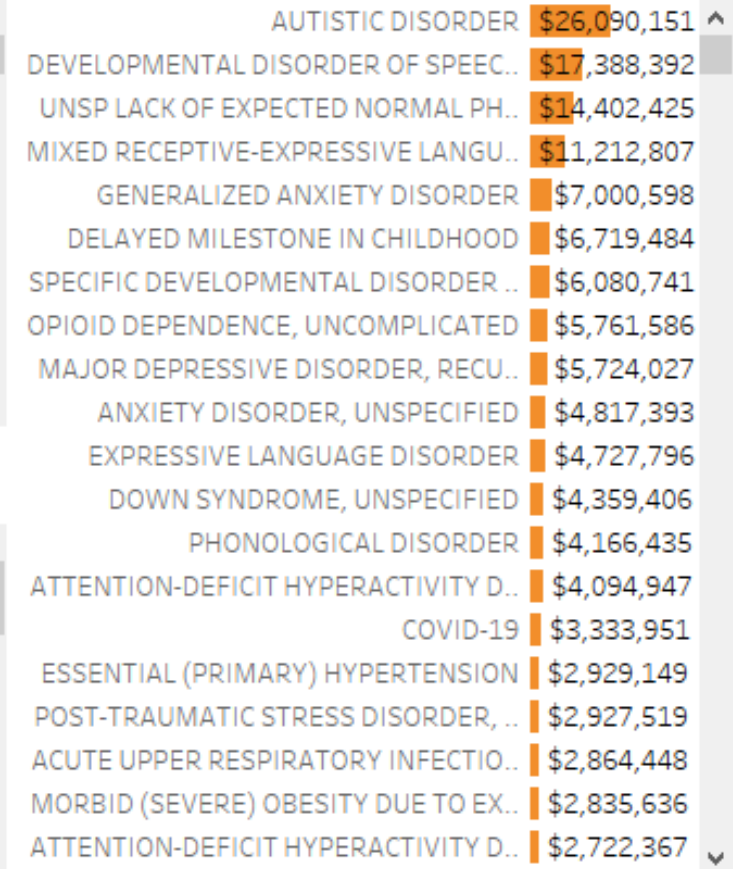
## Age Group



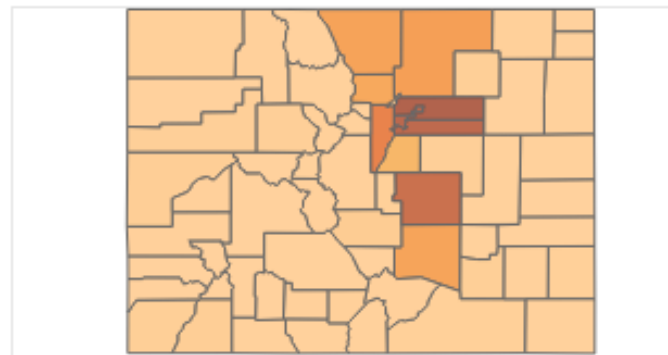
## Procedure Codes



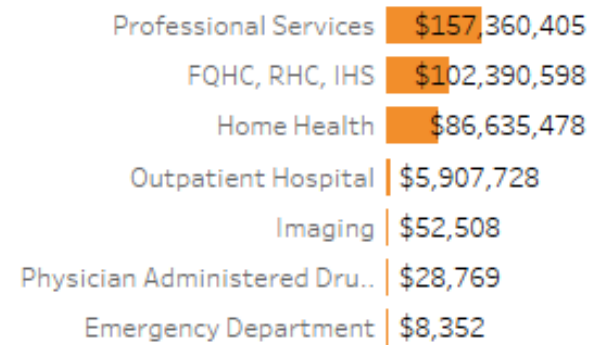
## Primary Diagnosis Codes



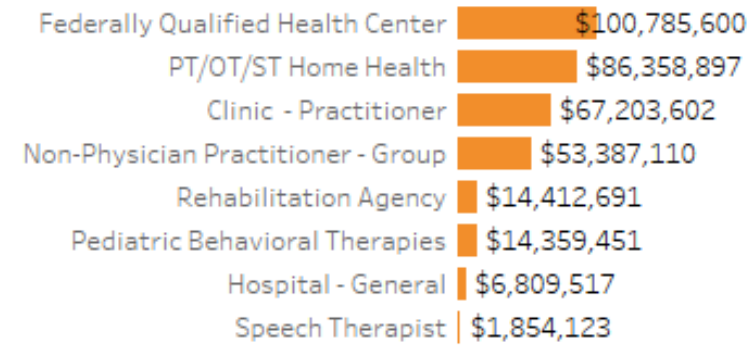
## Member County Map



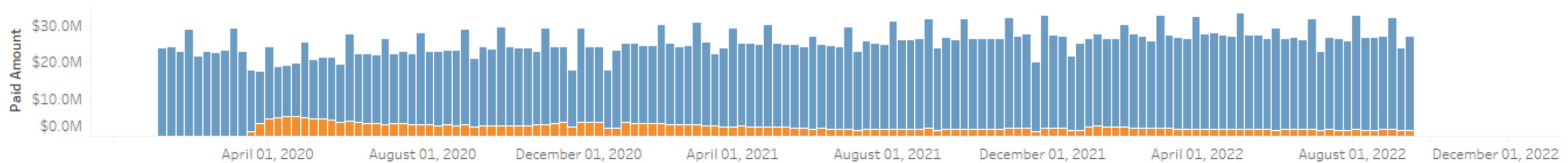
## Benefit Category



## Billing Provider Type



## Trend over Time (Actuals)

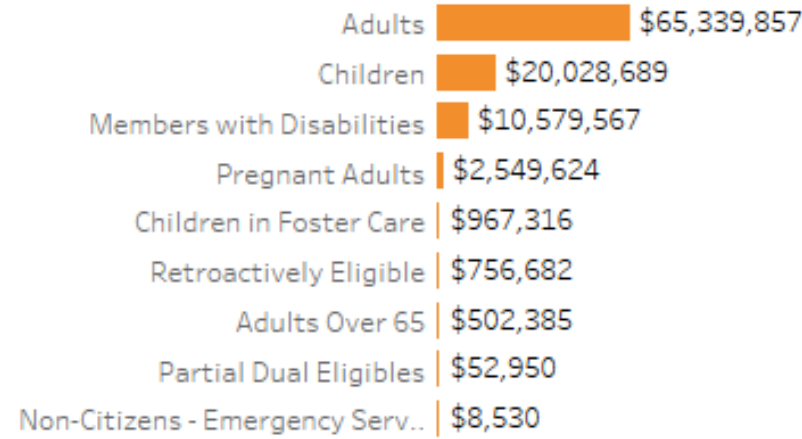


Note: Only includes Fee-For-Service services eligible for telemedicine. HCBS and Case Management Agencies do not indicate which services provided are telemedicine and therefore have been excluded from the above graph. Dental services are excluded. Trend graph shows service dates from 1/5/20 through 9/17/22. All other graphs include service dates from 1/5/20 through 11/13/22. Due to limited claims run-out, paid amounts may change over time. For outpatient services, only outpatient claim lines with the 'GT' modifier or with a telemedicine-specific procedure code were identified as telemedicine. Due to the fact that outpatient crossover paid amounts are only available at the claim header level, the header level paid amount has been distributed evenly among each claim line for the purposes of reporting paid amounts at the line level. This methodology may not be an accurate reflection of the actual distribution of costs among outpatient crossover claim lines.

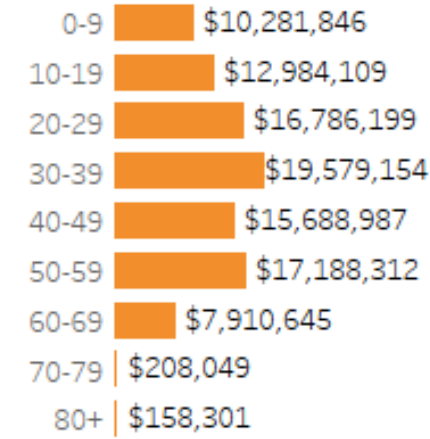
# Federally Qualified Health Centers

Service Type  
■ Not Telemedicine  
■ Telemedicine

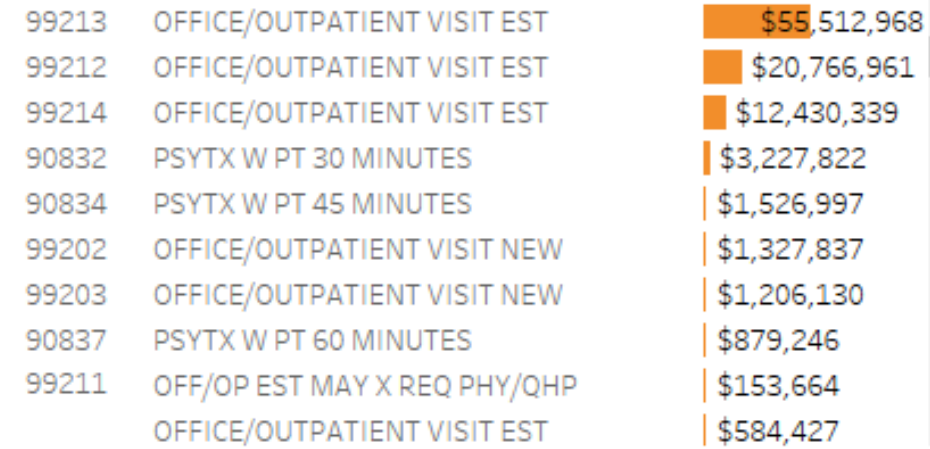
## Eligibility Category



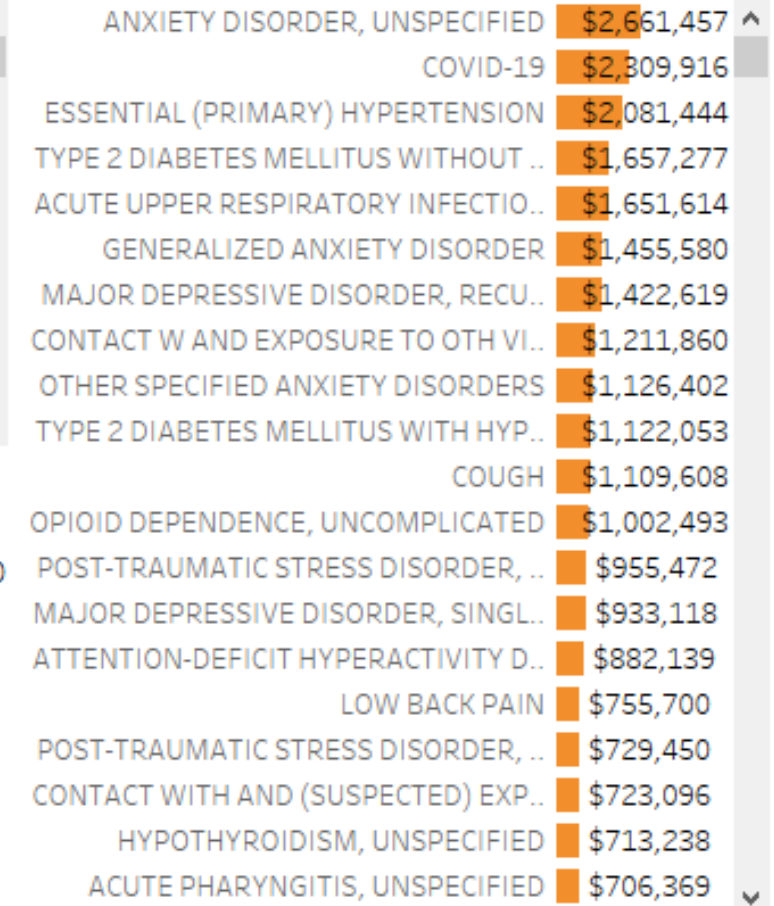
## Age Group



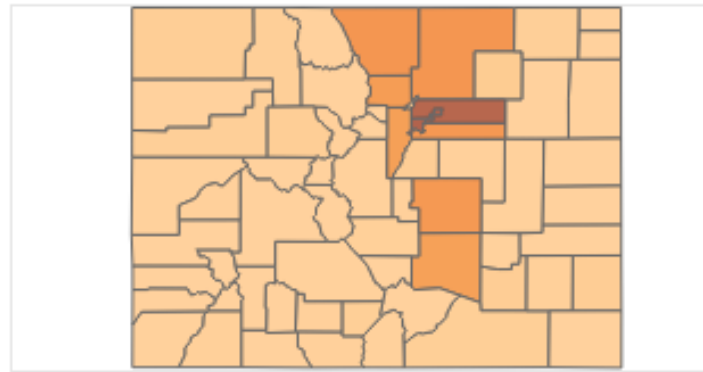
## Procedure Codes



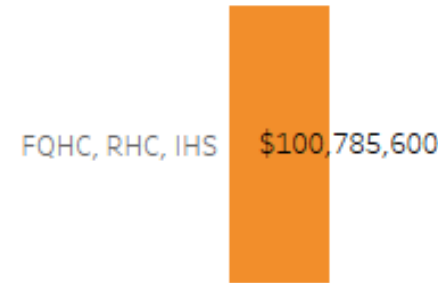
## Primary Diagnosis Codes



## Member County Map



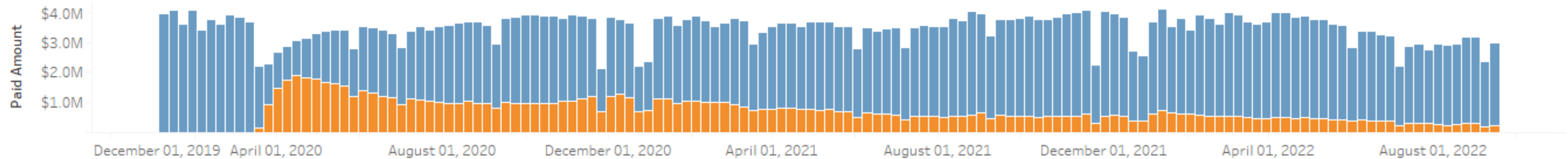
## Benefit Category



## Billing Provider Type



## Trend over Time (Actuals)

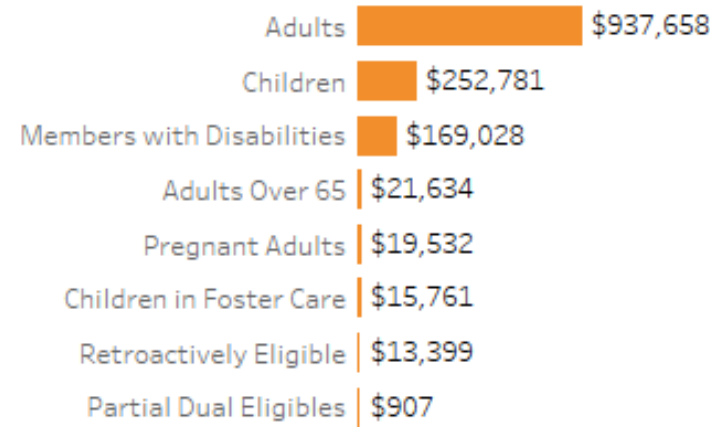


Note: Only includes Fee-For-Service services eligible for telemedicine. Dental services are excluded. Trend graph shows service dates from 1/5/20 through 9/17/22. All other graphs include service dates from 1/5/20 through 11/13/22. Due to limited claims run-out, paid amounts may change over time. For outpatient services, only outpatient claim lines with the 'GT' modifier or with a telemedicine-specific procedure code were identified as telemedicine. Due to the fact that outpatient crossover paid amounts are only available at the claim header level, the header level paid amount has been distributed evenly among each claim line for the purposes of reporting paid amounts at the line level. This methodology may not be an accurate reflection of the actual distribution of costs among outpatient crossover claim lines.

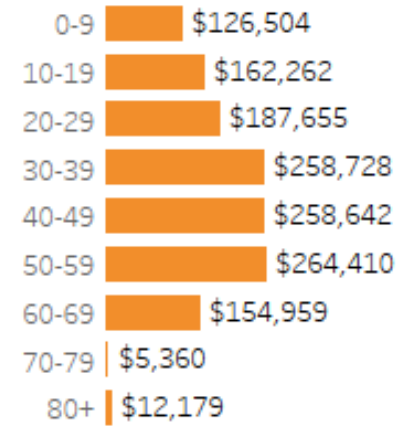
# Rural Health Clinics

Service Type  
■ Not Telemedicine  
■ Telemedicine

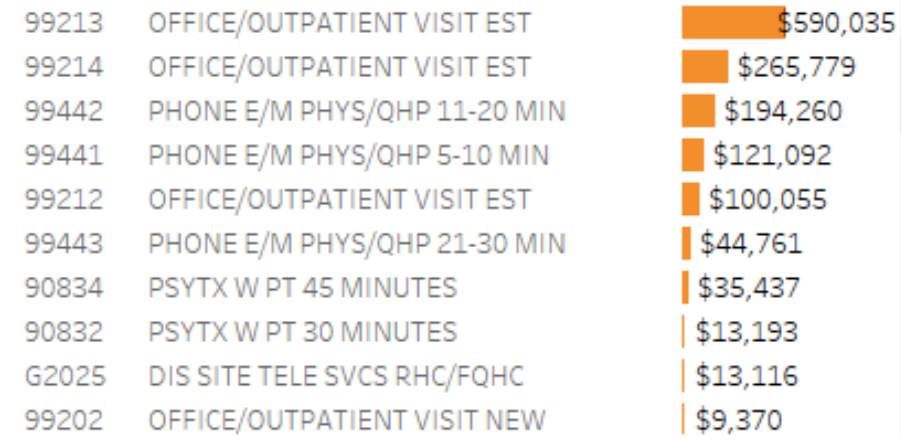
## Eligibility Category



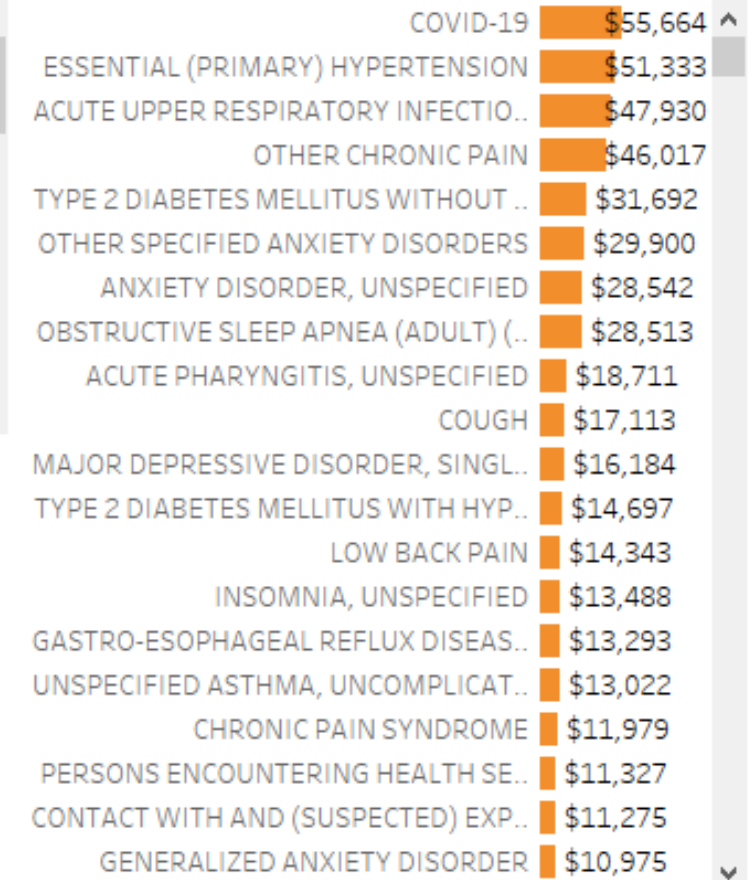
## Age Group



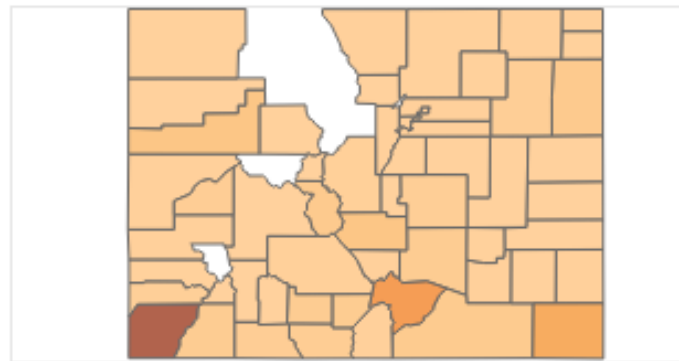
## Procedure Codes



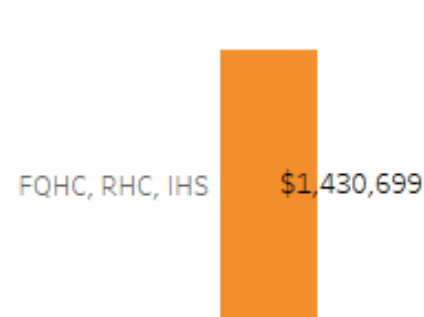
## Primary Diagnosis Codes



## Member County Map



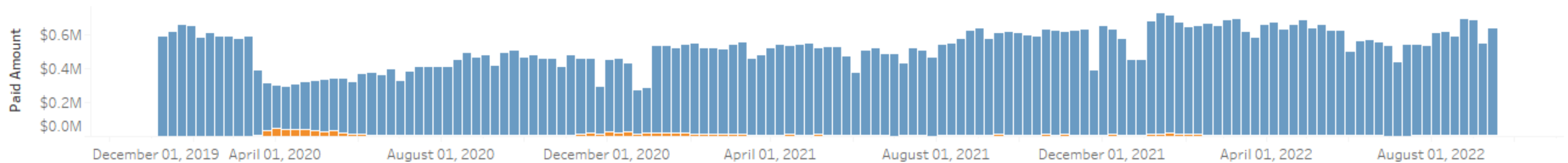
## Benefit Category



## Billing Provider Type



## Trend over Time (Actuals)



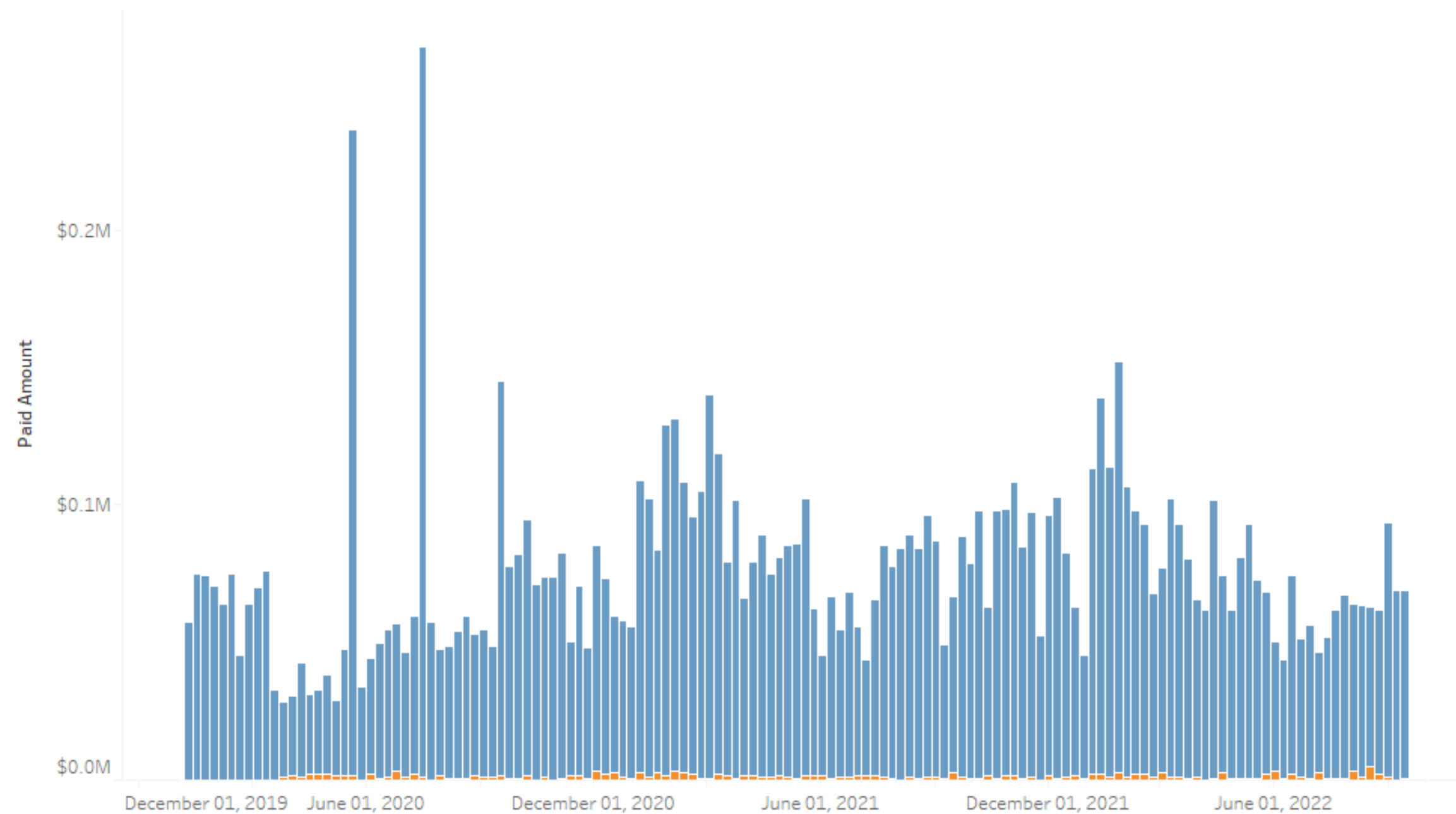
Note: Only includes Fee-For-Service services eligible for telemedicine. Dental services are excluded. Trend graph shows service dates from 1/5/20 through 9/17/22. All other graphs include service dates from 1/5/20 through 11/13/22. Due to limited claims run-out, paid amounts may change over time. For outpatient services, only outpatient claim lines with the 'GT' modifier or with a telemedicine-specific procedure code were identified as telemedicine. Due to the fact that outpatient crossover paid amounts are only available at the claim header level, the header level paid amount has been distributed evenly among each claim line for the purposes of reporting paid amounts at the line level. This methodology may not be an accurate reflection of the actual distribution of costs among outpatient crossover claim lines.



# Indian Health Services

Service Type  
■ Not Telemedicine  
■ Telemedicine

Trend over Time (Actuals)

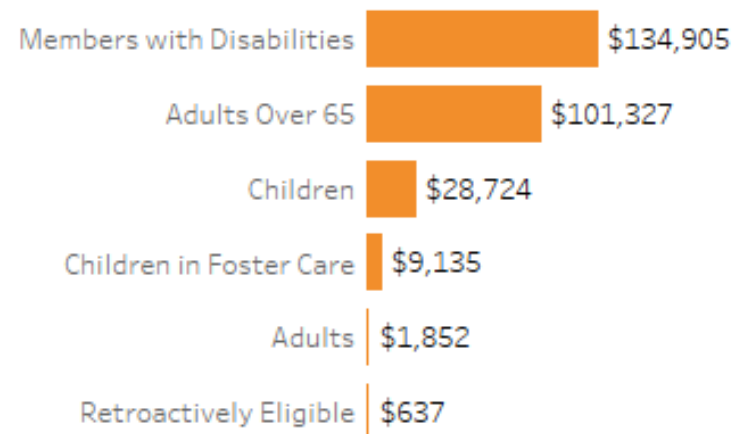


Note: Due to data issues, this graph does not accurately capture all telemedicine services provided by IHS. Only includes Fee-For-Service services eligible for telemedicine. Dental services are excluded. Data shows service dates from 1/5/20 through 9/17/22. Due to limited claims run-out, paid amounts may change over time. For outpatient services, only outpatient claim lines with the 'GT' modifier or with a telemedicine-specific procedure code were identified as telemedicine. Due to the fact that outpatient crossover paid amounts are only available at the claim header level, the header level paid amount has been distributed evenly among each claim line for the purposes of reporting paid amounts at the line level. This methodology may not be an accurate reflection of the actual distribution of costs among outpatient crossover claim lines.

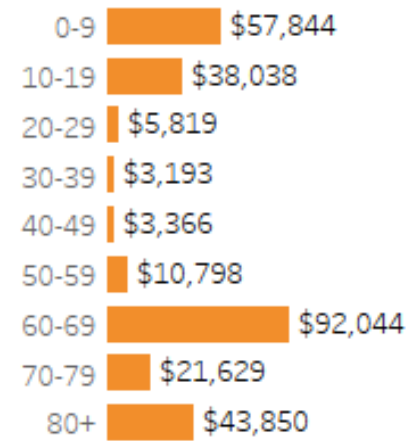
# Certified Nursing Assistant/Registered Nurse Home Health

Service Type  
■ Not Telemedicine  
■ Telemedicine

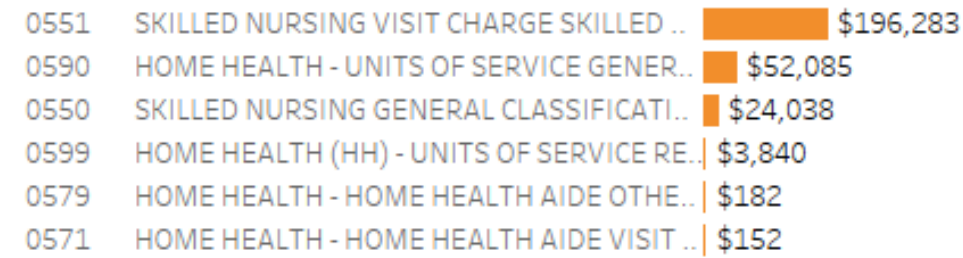
## Eligibility Category



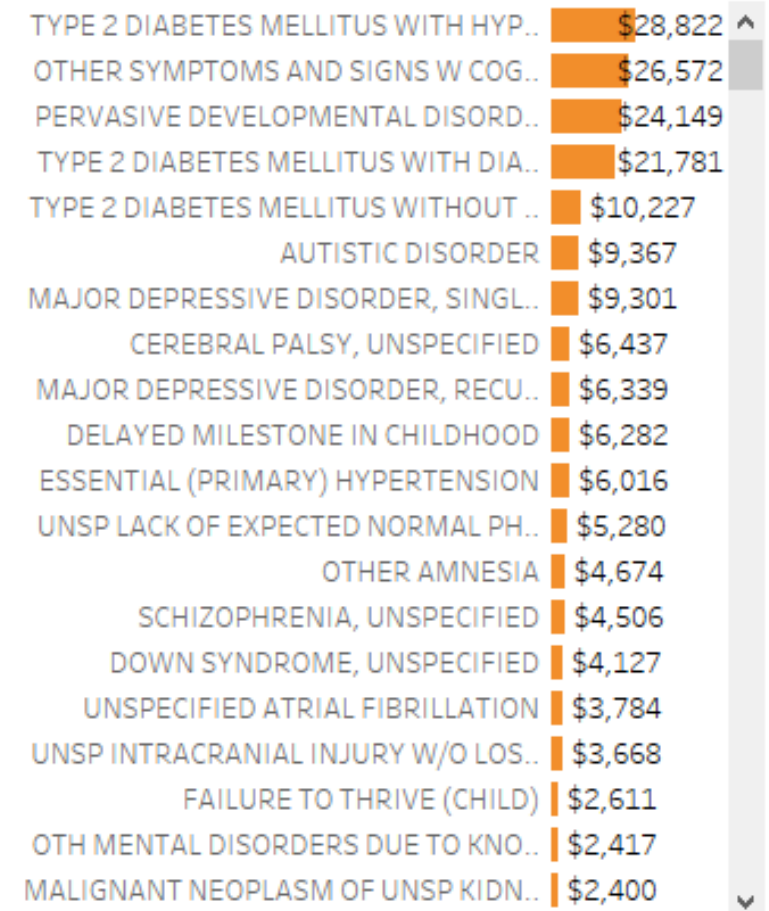
## Age Group



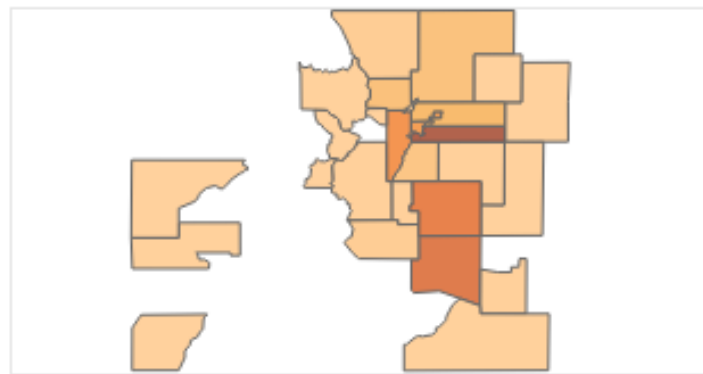
## Revenue Codes



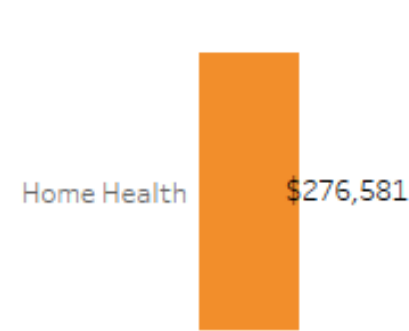
## Primary Diagnosis Codes



## Member County Map



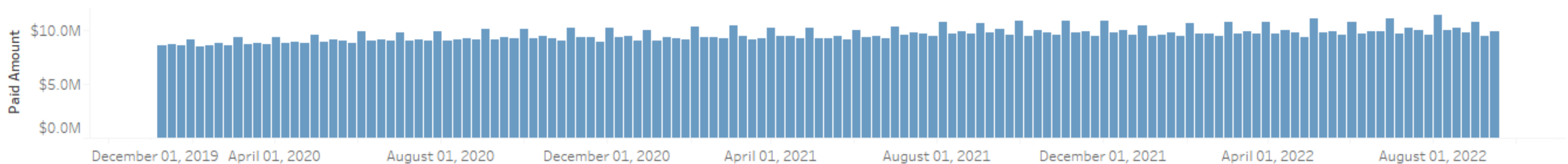
## Benefit Category



## Billing Provider Type



## Trend over Time (Actuals)

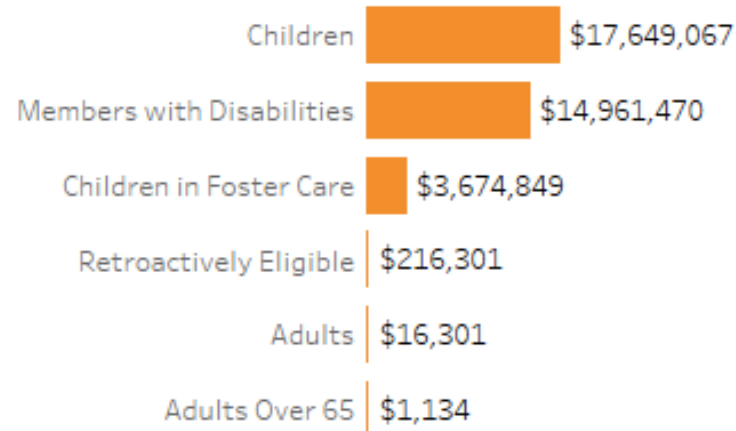


Note: Only includes Fee-For-Service services eligible for telemedicine. Trend graph shows service dates from 1/5/20 through 9/17/22. All other graphs include service dates from 1/5/20 through 11/13/22. Due to limited claims run-out, paid amounts may change over time. For outpatient services, only outpatient claim lines with the 'GT' modifier or with a telemedicine-specific procedure code were identified as telemedicine. Due to the fact that outpatient crossover paid amounts are only available at the claim header level, the header level paid amount has been distributed evenly among each claim line for the purposes of reporting paid amounts at the line level. This methodology may not be an accurate reflection of the actual distribution of costs among outpatient crossover claim lines.

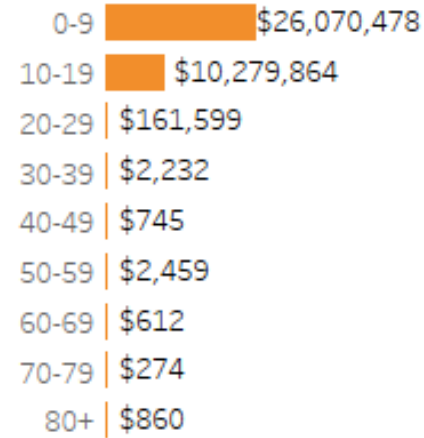
# Physical Therapy/Occupational Therapy Home Health

Service Type  
■ Not Telemedicine  
■ Telemedicine

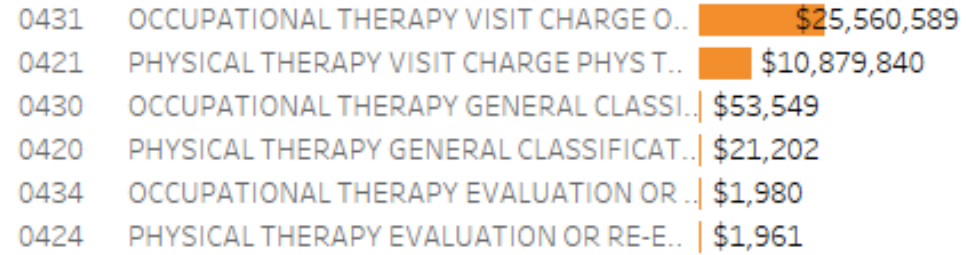
## Eligibility Category



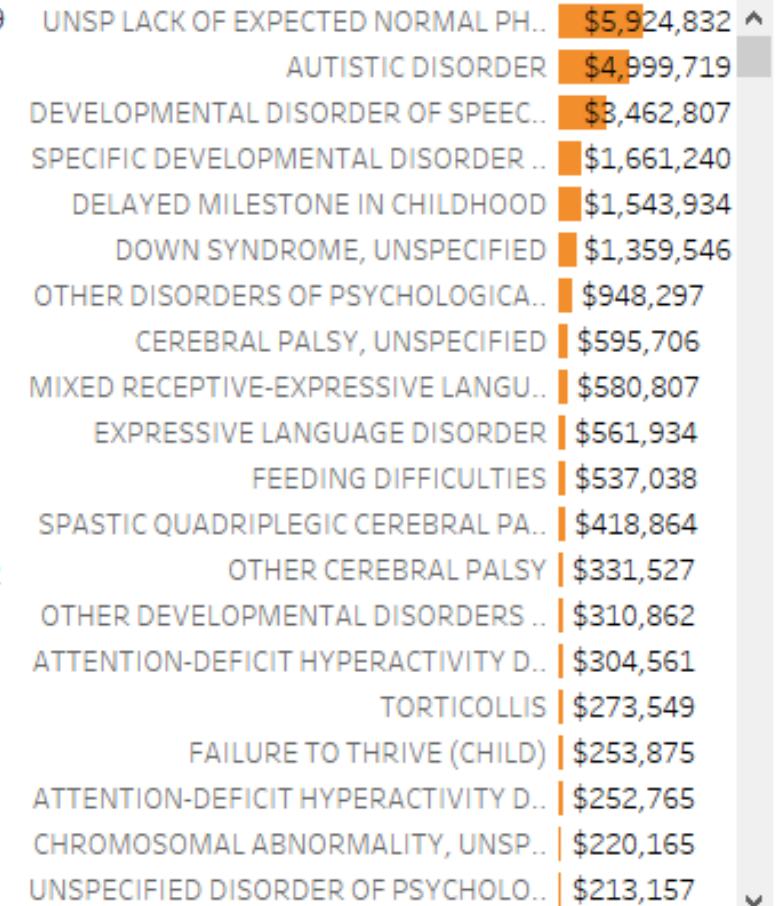
## Age Group



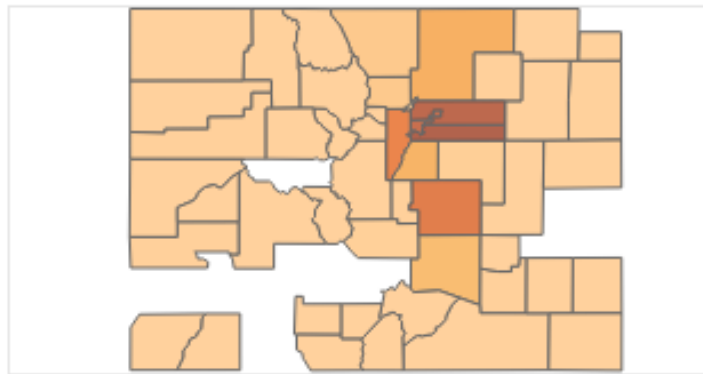
## Revenue Codes



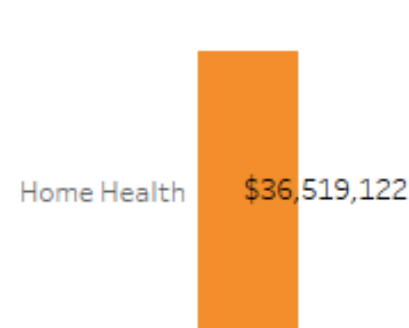
## Primary Diagnosis Codes



## Member County Map



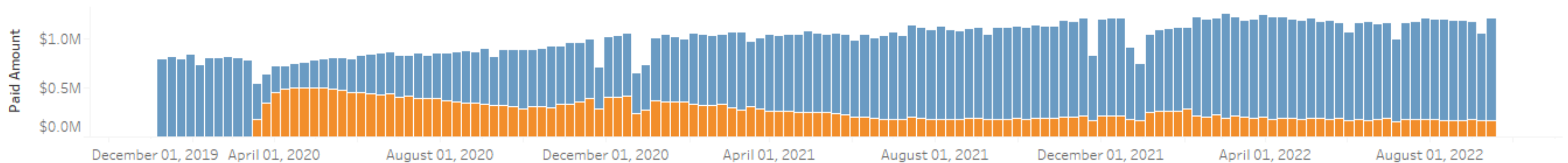
## Benefit Category



## Billing Provider Type



## Trend over Time (Actuals)

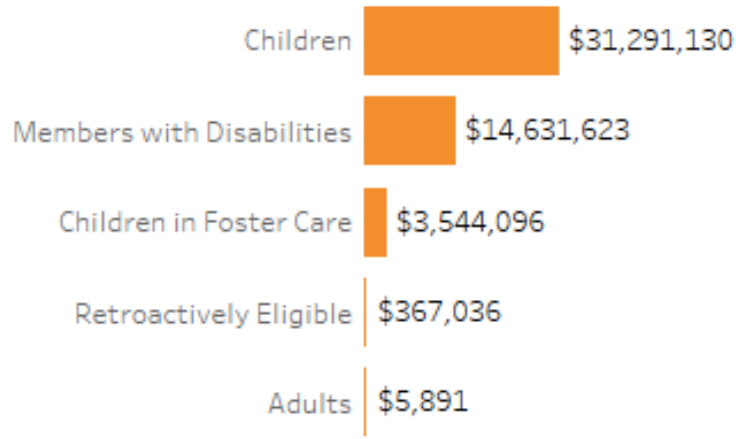


Note: Only includes Fee-For-Service services eligible for telemedicine. Trend graph shows service dates from 1/5/20 through 9/17/22. All other graphs include service dates from 1/5/20 through 11/13/22. Due to limited claims run-out, paid amounts may change over time. For outpatient services, only outpatient claim lines with the 'GT' modifier or with a telemedicine-specific procedure code were identified as telemedicine. Due to the fact that outpatient crossover paid amounts are only available at the claim header level, the header level paid amount has been distributed evenly among each claim line for the purposes of reporting paid amounts at the line level. This methodology may not be an accurate reflection of the actual distribution of costs among outpatient crossover claim lines.

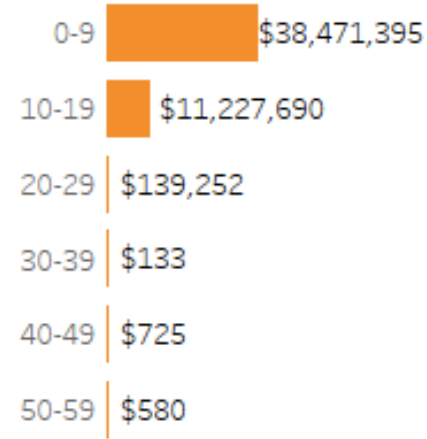
# Speech Therapy Home Health

Service Type  
■ Not Telemedicine  
■ Telemedicine

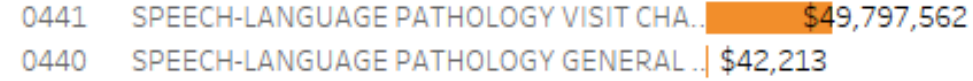
## Eligibility Category



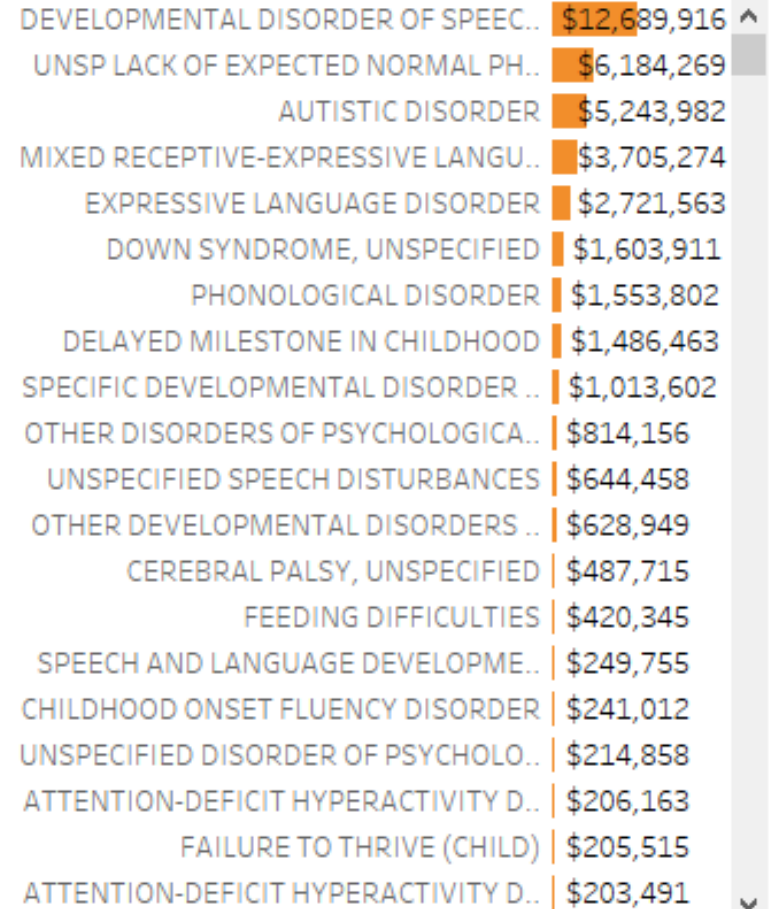
## Age Group



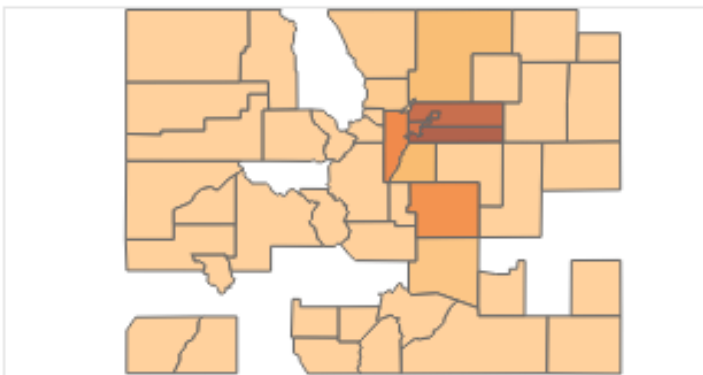
## Revenue Codes



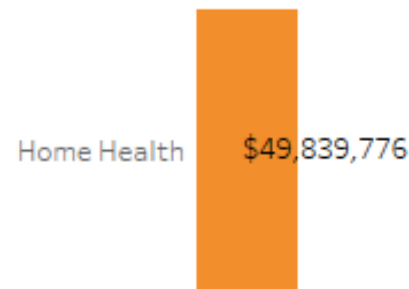
## Primary Diagnosis Codes



## Member County Map



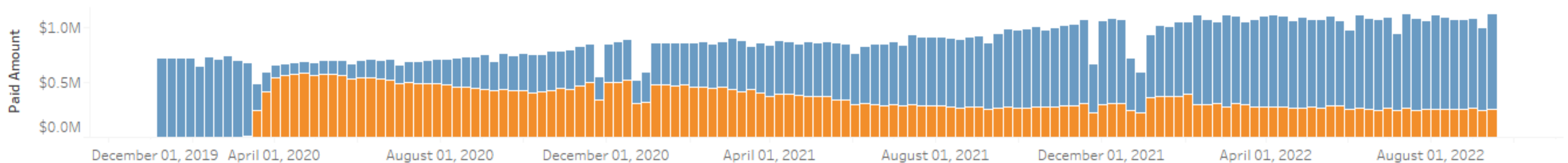
## Benefit Category



## Billing Provider Type



## Trend over Time (Actuals)



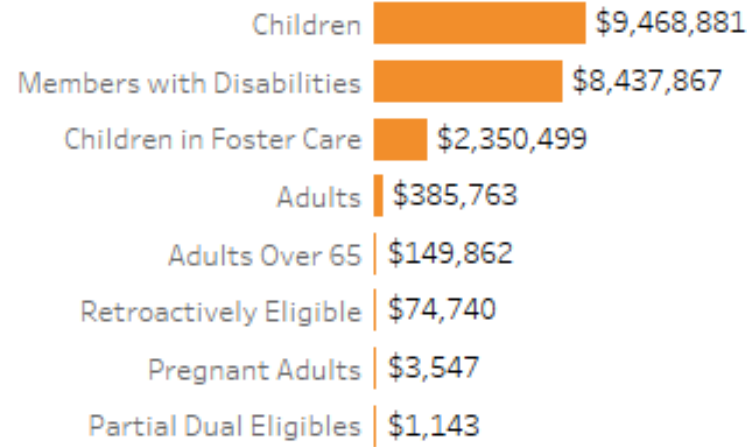
Note: Only includes Fee-For-Service services eligible for telemedicine. Trend graph shows service dates from 1/5/20 through 9/17/22. All other graphs include service dates from 1/5/20 through 11/13/22. Due to limited claims run-out, paid amounts may change over time. For outpatient services, only outpatient claim lines with the 'GT' modifier or with a telemedicine-specific procedure code were identified as telemedicine. Due to the fact that outpatient crossover paid amounts are only available at the claim header level, the header level paid amount has been distributed evenly among each claim line for the purposes of reporting paid amounts at the line level. This methodology may not be an accurate reflection of the actual distribution of costs among outpatient crossover claim lines.



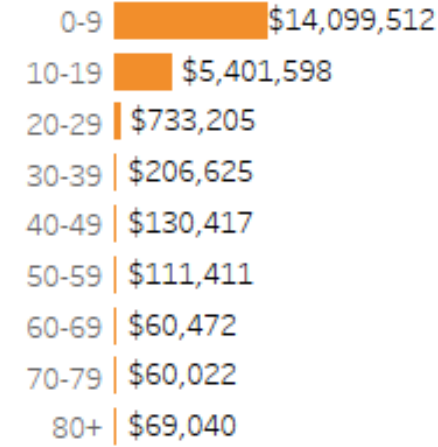
# Physical Therapy/Occupational Therapy

Service Type  
■ Not Telemedicine  
■ Telemedicine

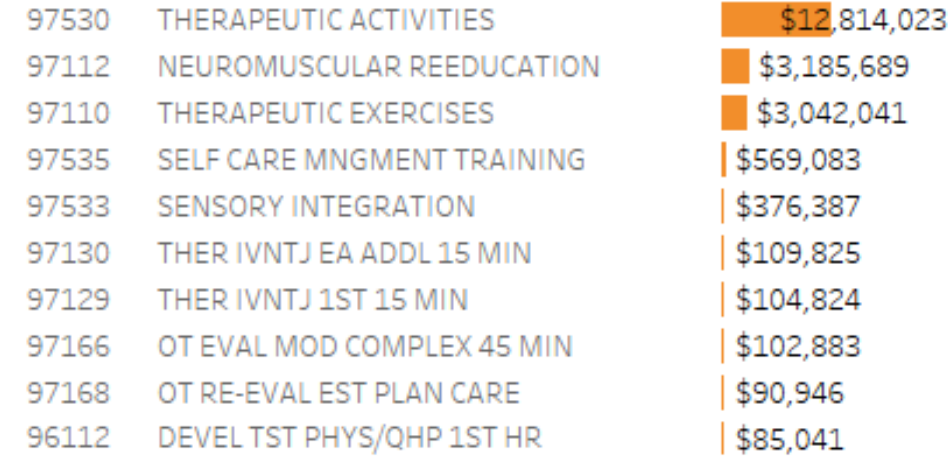
## Eligibility Category



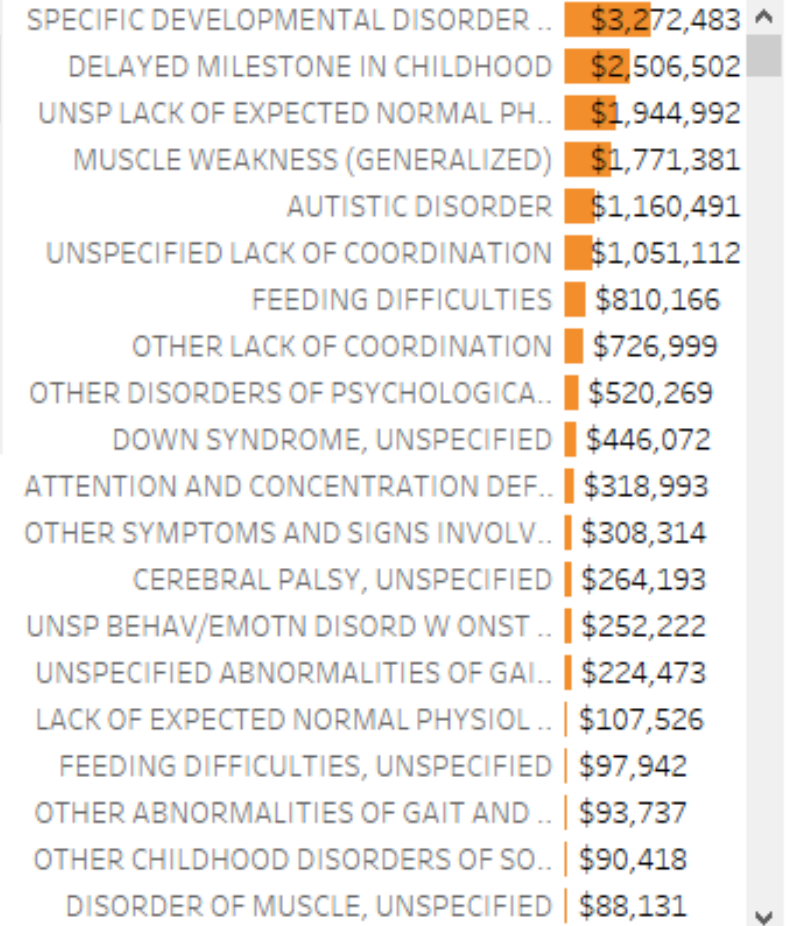
## Age Group



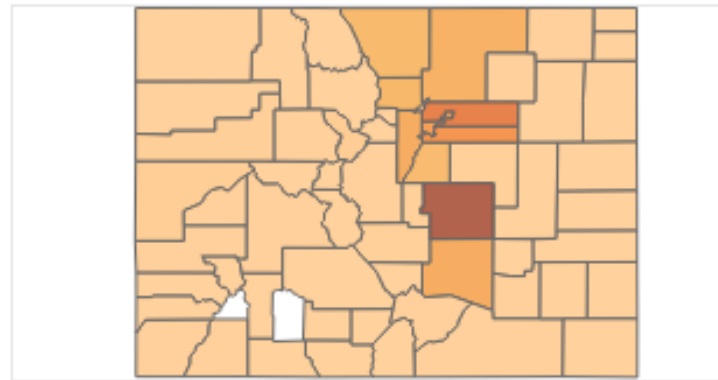
## Procedure Codes



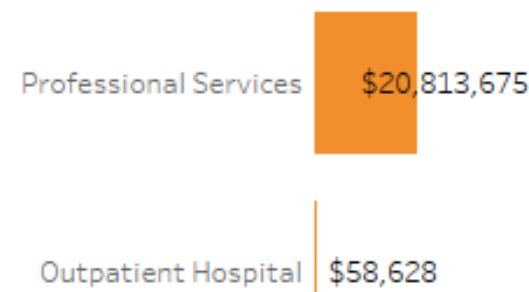
## Primary Diagnosis Codes



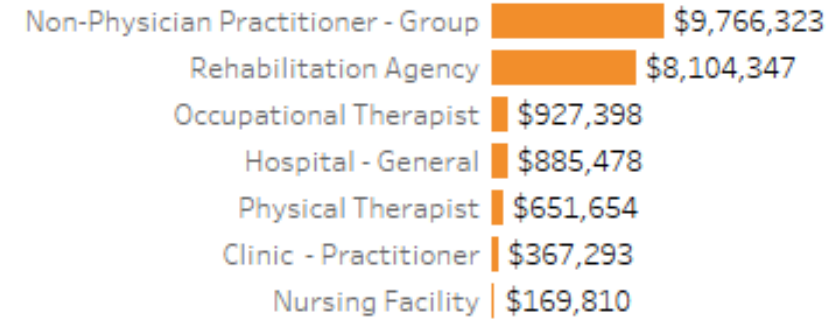
## Member County Map



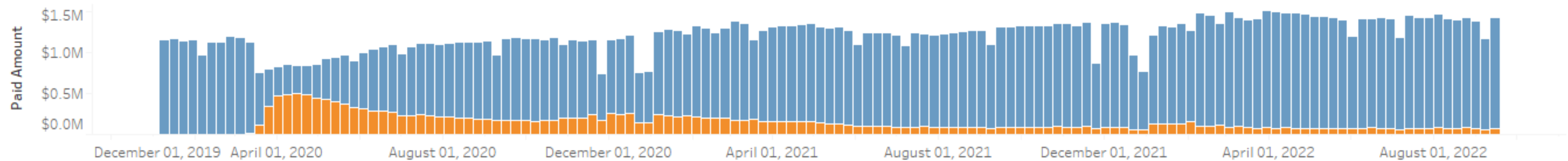
## Benefit Category



## Billing Provider Type



## Trend over Time (Actuals)



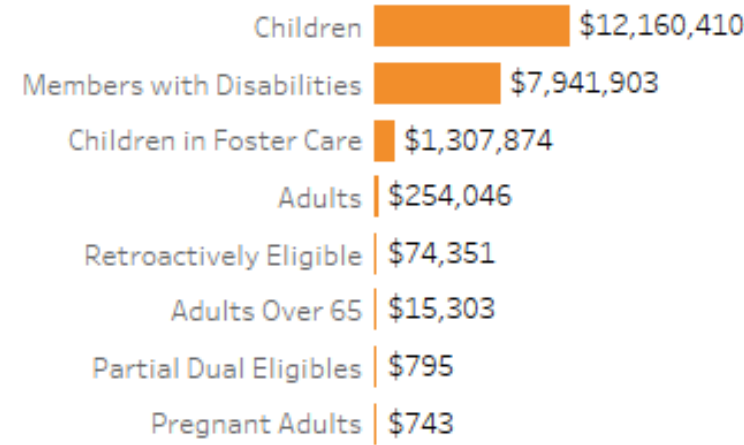
Note: Only includes Fee-For-Service services eligible for telemedicine. Trend graph shows service dates from 1/5/20 through 9/17/22. All other graphs include service dates from 1/5/20 through 11/13/22. Due to limited claims run-out, paid amounts may change over time. For outpatient services, only outpatient claim lines with the 'GT' modifier or with a telemedicine-specific procedure code were identified as telemedicine. Due to the fact that outpatient crossover paid amounts are only available at the claim header level, the header level paid amount has been distributed evenly among each claim line for the purposes of reporting paid amounts at the line level. This methodology may not be an accurate reflection of the actual distribution of costs among outpatient crossover claim lines.



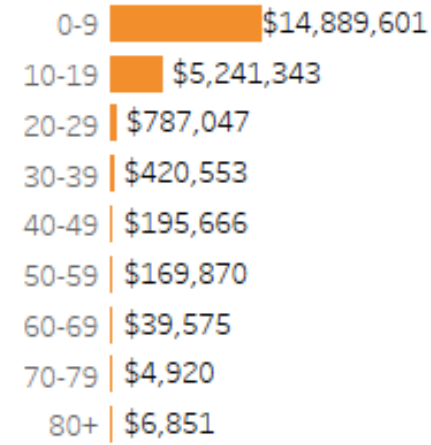
# Speech Therapy

Service Type  
■ Not Telemedicine  
■ Telemedicine

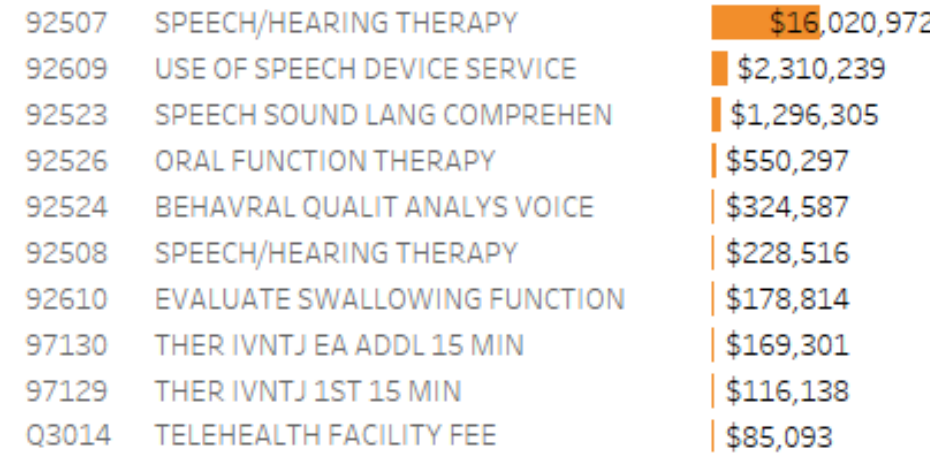
## Eligibility Category



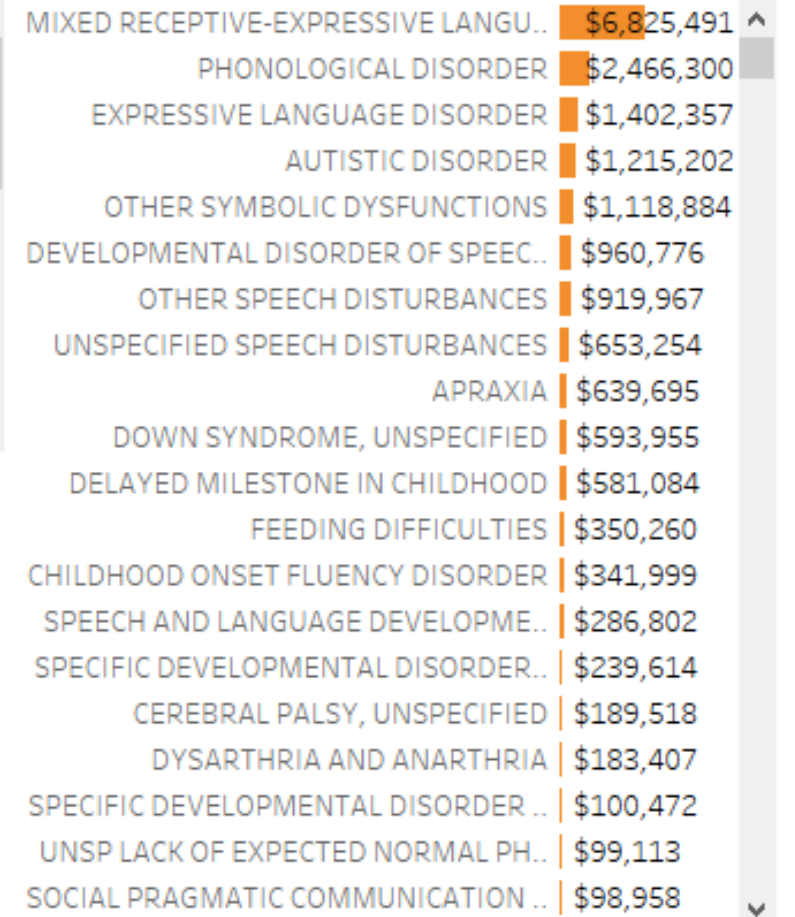
## Age Group



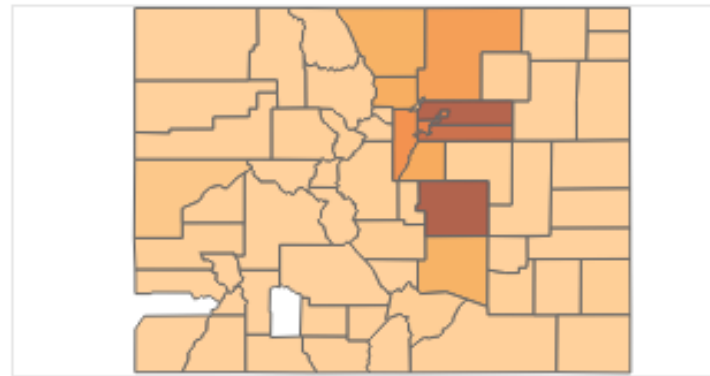
## Procedure Codes



## Primary Diagnosis Codes



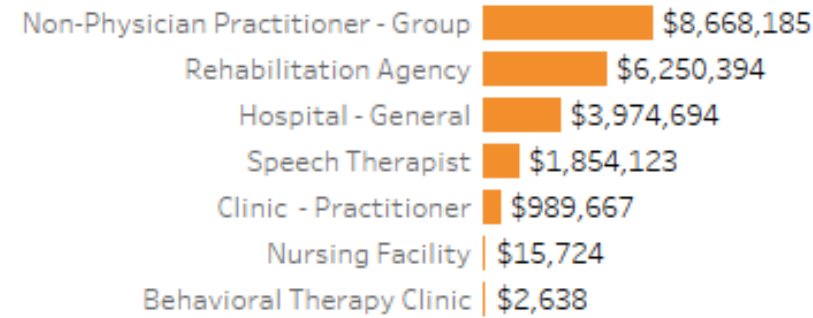
## Member County Map



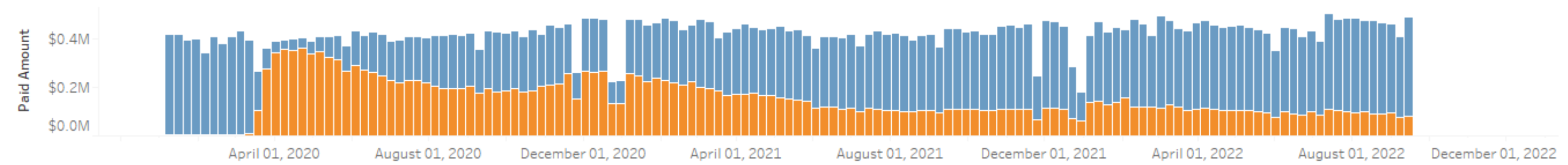
## Benefit Category



## Billing Provider Type



## Trend over Time (Actuals)

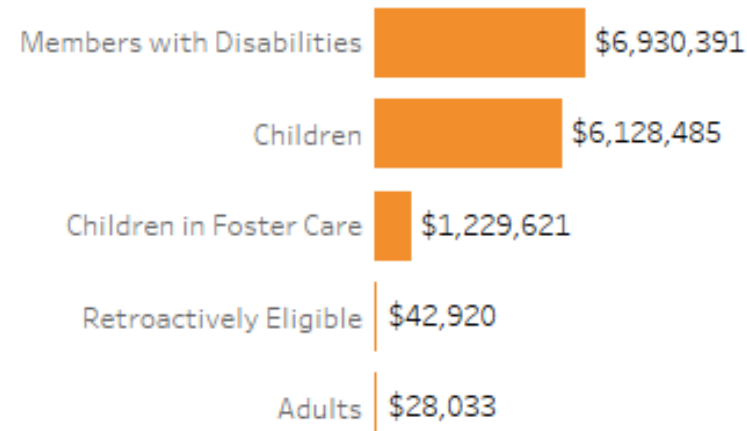


Note: Only includes Fee-For-Service services eligible for telemedicine. Trend graph shows service dates from 1/5/20 through 9/17/22. All other graphs include service dates from 1/5/20 through 11/13/22. Due to limited claims run-out, paid amounts may change over time. For outpatient services, only outpatient claim lines with the 'GT' modifier or with a telemedicine-specific procedure code were identified as telemedicine. Due to the fact that outpatient crossover paid amounts are only available at the claim header level, the header level paid amount has been distributed evenly among each claim line for the purposes of reporting paid amounts at the line level. This methodology may not be an accurate reflection of the actual distribution of costs among outpatient crossover claim lines.

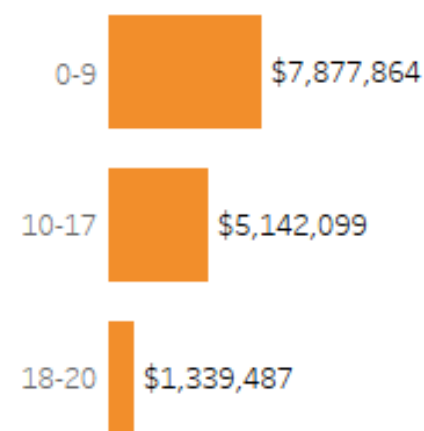
# Pediatric Behavioral Therapy

Service Type  
■ Not Telemedicine  
■ Telemedicine

## Eligibility Category



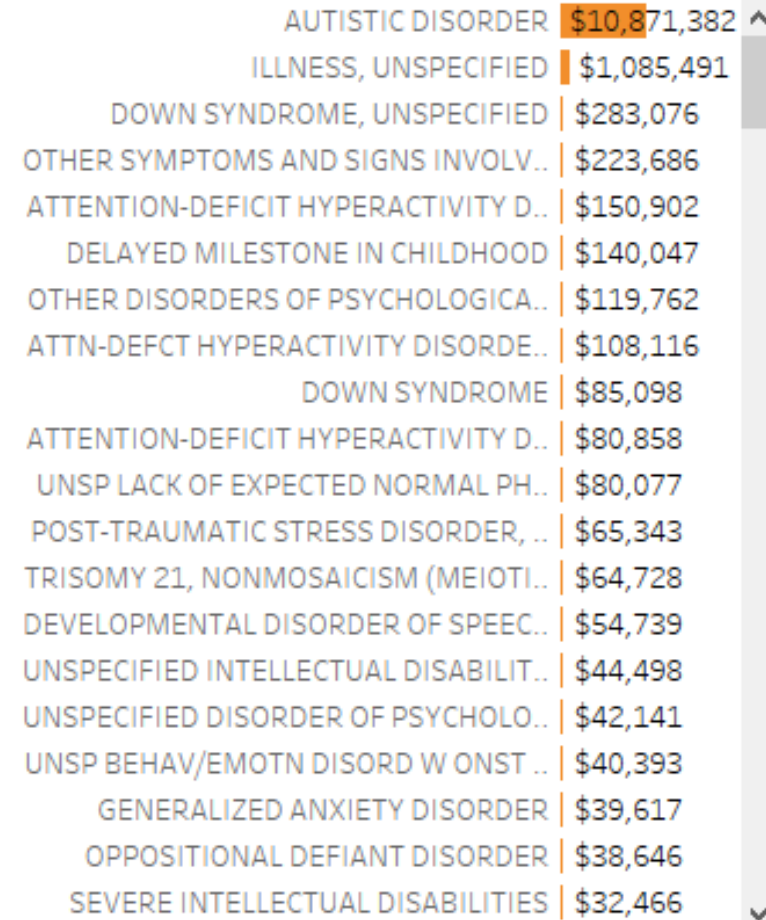
## Age Group



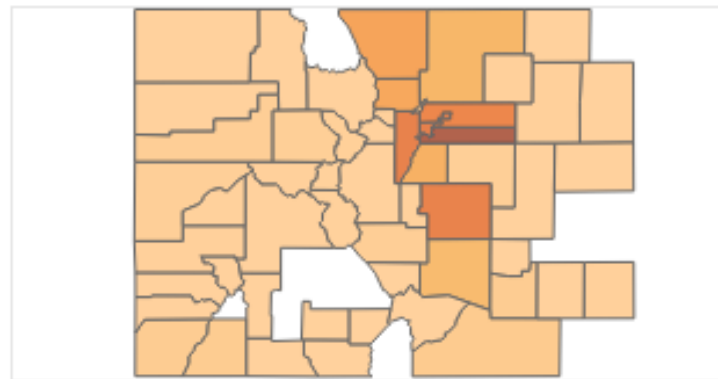
## Procedure Codes



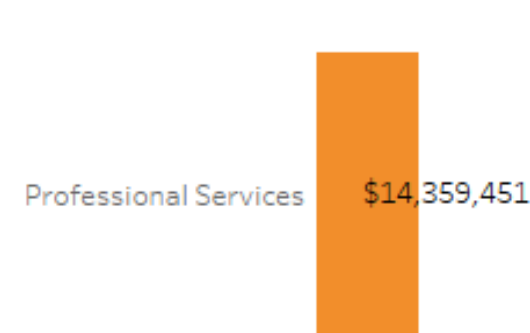
## Primary Diagnosis Codes



## Member County Map



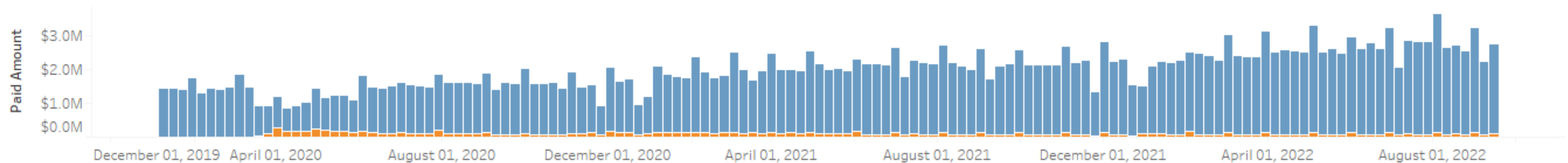
## Benefit Category



## Billing Provider Type



## Trend over Time (Actuals)

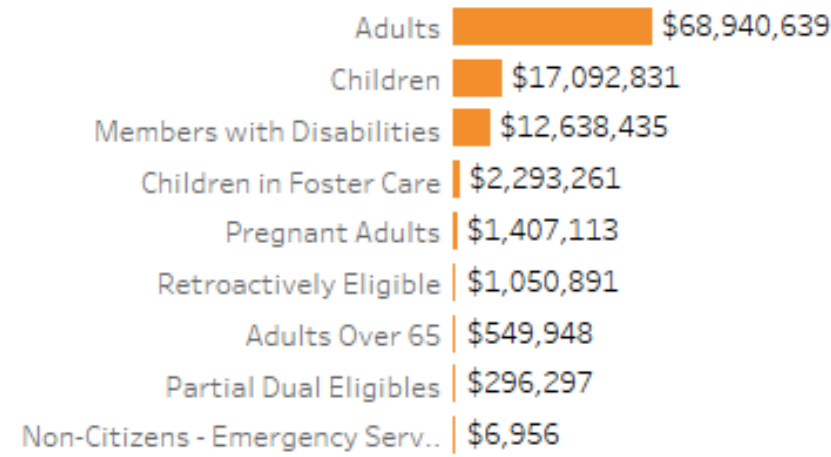


Note: Only includes Fee-for-Service services eligible for telemedicine. Trend graph shows service dates from 1/5/20 through 9/17/22. All other graphs include service dates from 1/5/20 through 11/13/22. Due to limited claims run-out, paid amounts may change over time. HCBS and Case Management Agencies do provide telemedicine services but do not indicate them as such on the claim, and therefore have been excluded in the above graphs.

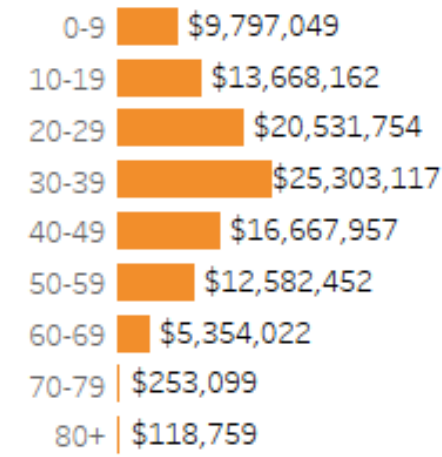
# Fee Schedule Medical Providers and Other Professional Services

Service Type  
■ Not Telemedicine  
■ Telemedicine

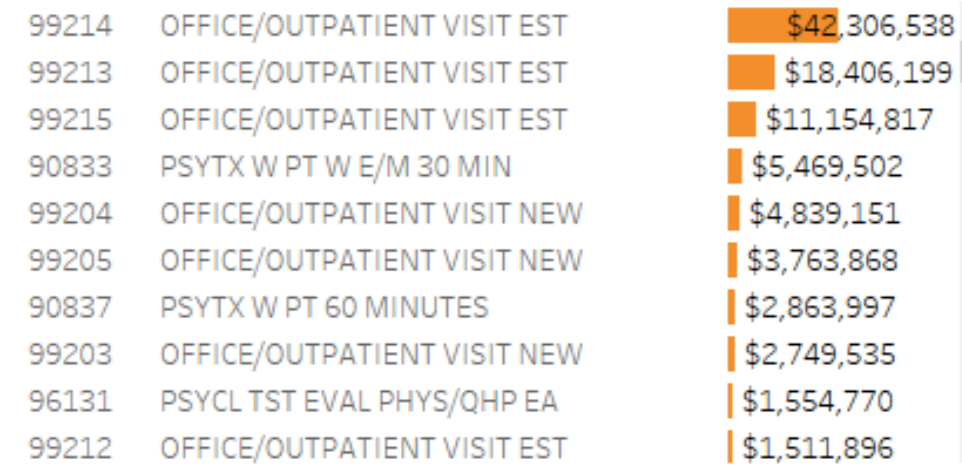
## Eligibility Category



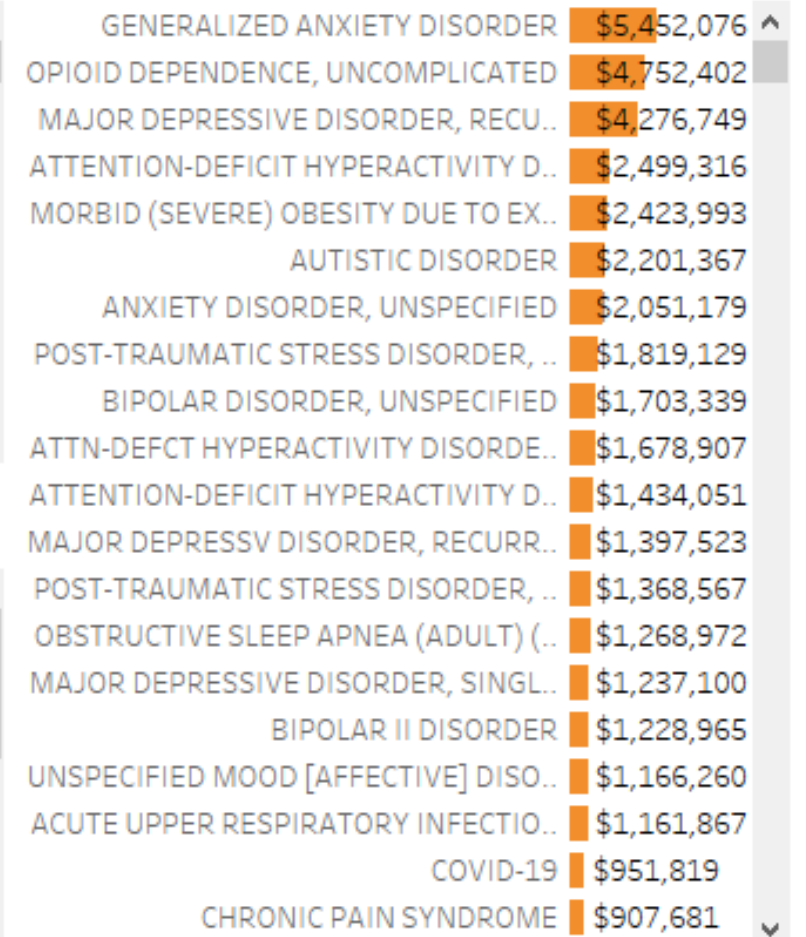
## Age Group



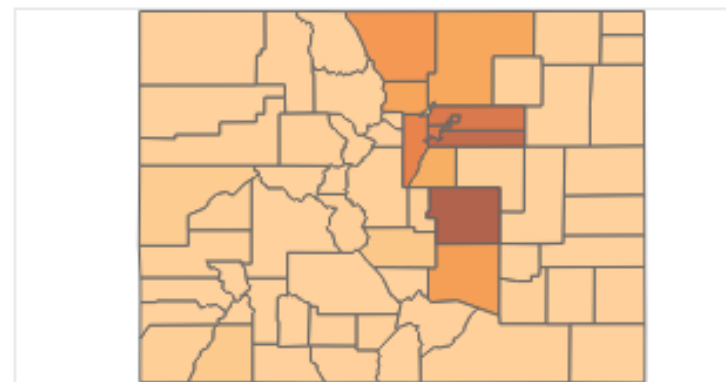
## Procedure Codes



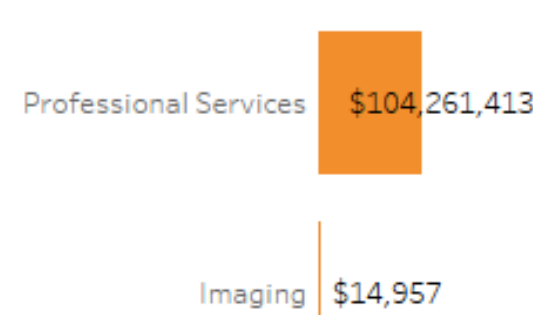
## Primary Diagnosis Codes



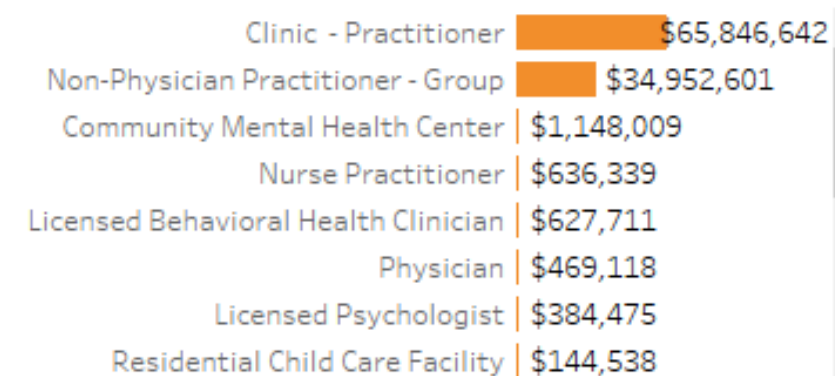
## Member County Map



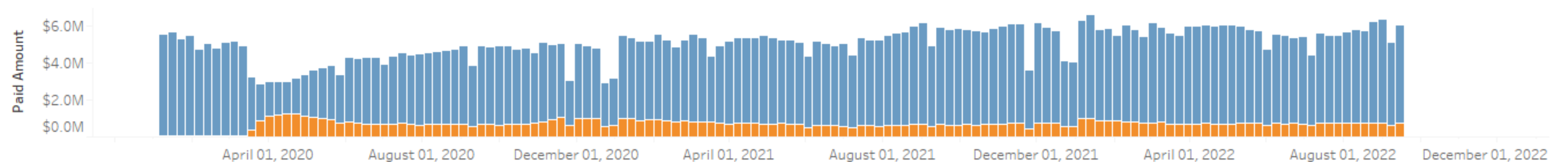
## Benefit Category



## Billing Provider Type



## Trend over Time (Actuals)



Note: Only includes Fee-for-Service services eligible for telemedicine. Trend graph shows service dates from 1/5/20 through 9/17/22. All other graphs include service dates from 1/5/20 through 11/13/22. Due to limited claims run-out, paid amounts may change over time. HCBS and Case Management Agencies do provide telemedicine services but do not indicate them as such on the claim, and therefore have been excluded in the above graphs.