

**COVID-19 Interim Practice:
Update Regarding Entering Location of Service on Progress Notes (4/17/20)**

Based on guidance issued by the Centers for Medicare and Medicaid Services (CMS), services provided during the current COVID-19 Public Health Emergency should indicate the location of service of where the service would have most likely been provided prior to the COVID-19 crisis. Practitioners no longer need to enter the address of where the service was actually provided (e.g., for services being rendered at the practitioner’s home, practitioners do not need to enter the major cross-streets of their home location). Practitioners providing these services via telehealth or telephone will still need to enter the appropriate procedure code modifiers (GT for telehealth; SC for telephone).

NOTE: This guidance differs from what was originally issued on March 18, 2020. Providers do NOT need to go back and change Location of Service on any prior progress notes.

Services Provided via TELEHEALTH from the Practitioner’s Residence during COVID-19

If a practitioner is currently providing a service via telehealth from his/her residence, but the same service would have been provided in the office, then the practitioner would enter the following in the progress note:

The screenshot shows the 'SERVICE INFORMATION' section with 'Date Of Service' as 04/14/2020 and 'Program of Service' as 6840F SAN FERNANDO MENTAL HEALTH CENTER. The 'Location of Service' dropdown is set to 'Office'. The 'Service Code' is 'ASSESSMENT-PSYCH DIAG INT-TELEPSY (90791GT)'. Below, the 'SERVICE ADDRESS' section has fields for Facility Name, Street, City, and State, which are grayed out.

- **Location of Service –** Defaults to “Office”
- **Procedure Code Modifier – GT**
- **Facility Name, Street, City, Zip –** fields will automatically be grayed-out

If a practitioner is currently providing a service via telehealth from his/her residence, but the same service would have been provided in the field, client’s home, or other location outside of the practitioner’s office, then when writing the progress note, the practitioner would enter the following:

- **Location of Service –** select appropriate option depending on where service would have been provided
- **Procedure Code Modifier – GT**
- **Facility Name, Street, City, Zip –** fields will be grayed out if “Home (client home)” and “Office” is selected; for other options, an address will have to be entered

The screenshot shows the 'SERVICE INFORMATION' section with 'Date Of Service' as 04/14/2020 and 'Program of Service' as 6840F SAN FERNANDO MENTAL HEALTH CENTER. The 'Location of Service' dropdown is set to 'Home'. The 'Service Code' is 'PSYCHOTHERAPY 38-52 MIN FF TELEPSY (90834GT)'. Below, the 'SERVICE ADDRESS' section has fields for Facility Name, Street, City, and State, which are grayed out.

The screenshot shows the 'SERVICE INFORMATION' section with 'Date Of Service' as 04/14/2020 and 'Program of Service' as 6840F SAN FERNANDO MENTAL HEALTH CENTER. The 'Location of Service' dropdown is set to 'School'. The 'Service Code' is 'REHAB - TELEPSY (H2015GT)'. Below, the 'SERVICE ADDRESS' section has fields for Facility Name (Eagle Rock Elementary School), Street (2057 Fair Park Ave.), City (LOS ANGELES), and State (CA). The zip code field is populated with 90041-0000.

Note: “Telehealth” would only be selected as the Location of Service if telehealth would have been provided prior to the COVID-19 crisis (and the Service Address would be the Office address)

Los Angeles County Department of Mental Health
Quality Assurance Unit – Policy and Technical Development Team

Services Provided via TELEPHONE from the Practitioner’s Residence during COVID-19

If a practitioner is currently providing a service via telephone from his/her residence, but the same service would have been provided in the office, then when writing the progress note, the practitioner would enter the following:

The screenshot shows the 'SERVICE INFORMATION' section of a form. The 'Date Of Service' is 04/14/2020. The 'Program of Service' is 6840F SAN FERNANDO MENTAL HEALTH CENTER. The 'Location of Service' is set to 'Office'. The 'Service Code' is PSYCHOTHERAPY PHONE (H00465C). Below this is the 'SERVICE ADDRESS' section with fields for Facility Name, Street, City, and State (CA). A note indicates '9-digit zip code REQUIRED Enter -9998 if ZIP+4 is unknown'.

- **Location of Service –** Note defaults to “Office”
- **Procedure Code Modifier – SC**
- **Facility Name, Street, City, Zip –** fields will automatically be grayed-out

If a practitioner is currently providing a service via telephone from his/her residence, but the same service would have been provided in the field, client’s home, or other location outside of the practitioner’s office, then when writing the progress note, the practitioner would enter the following:

- **Location of Service –** select appropriate option depending on where service would have been provided
- **Procedure Code Modifier – SC**
- **Facility Name, Street, City, Zip –** fields will be grayed out if “Home (client home)” and “Office” is selected; for other options, an address will have to be entered

The screenshot shows the 'SERVICE INFORMATION' section with 'Home' selected for 'Location of Service'. The 'SERVICE ADDRESS' section is grayed out, with only the 'State' field (CA) visible.

The screenshot shows the 'SERVICE INFORMATION' section with 'Group Home' selected for 'Location of Service'. The 'SERVICE ADDRESS' section is active, with 'Facility Name' (Optimist Home), 'Street' (7003 N Figueroa), 'City' (LOS ANGELES), and 'State' (CA) filled in. The '9-digit zip code' field contains 90042-0000.

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Services Provided with NO CONTACT (e.g., psych testing report writing, review labs, record review) from the Practitioner’s Residence

If a practitioner currently provides a service from his/her residence that does not require contact with a client or significant support person, but the same service would have been provided at the office, then when writing the progress note, the practitioner would enter the following:

The screenshot shows a web form with two main sections: SERVICE INFORMATION and SERVICE ADDRESS. In the SERVICE INFORMATION section, 'Date of Service' is set to 04/14/2020, 'Program of Service' is '6840F SAN FERNANDO MENTAL HEALTH CENTER', and 'Location of Service' is 'Office'. The 'Service Code' field contains 'RECORD REVIEW (90885)'. The SERVICE ADDRESS section has empty fields for Facility Name, Street, City, and State (with a 'CA' checkbox). A note indicates that 9-digit zip codes are required and to enter -9998 if the ZIP+4 is unknown.

- **Location of Service** – Note defaults to “Office”
- **Facility Name, Street, City, Zip** – fields will automatically be grayed-out