

COVID-19 INTERIM PRACTICE: REPORTING LOCATION FOR SERVICES RENDERED AT THE PRACTITIONER'S RESIDENCE

The Health Insurance Portability and Accountability Act (HIPAA) of 1996 requires providers to include the address of the Service Facility Location on all claims that do not take place in the office. The address that is sent on claims is the location of the provider during the service. In general, this would mean, for example, that practitioners providing telehealth services from home would have to include their location when submitting claims for payment.

However, with the shift to telehealth services because of the 2019 Novel Coronavirus Disease (COVID-19) Public Health Emergency (PHE), the Centers for Medicare and Medicaid Services (CMS) issued guidance allowing services provided during the current crisis to indicate the location where the service would have been rendered without the COVID-19 PHE. Practitioners who are teleworking because of the PHE are no longer required to enter their home address (or the major cross-streets of their home location) where the service was actually rendered. Although the practitioner's home address will no longer be reported on claims, telehealth or telephone services must carry the appropriate modifier (GT for telehealth; SC for telephone).

Some types of service take place in a variety of locations even for a single client. In these cases, use the place of service code representing the location where services to the client would have taken place a majority of the time or where the client is now.