



# Telehealth Advisory Committee

October 7, 2021



## Welcome to today's Telehealth Advisory Committee

**We will begin shortly.**

**All lines have been  
automatically muted.**

While you are waiting **TEST YOUR AUDIO.**

**LISTEN FOR MUSIC.**



# Telehealth Advisory Committee Agenda

- Call to Order: Christina Corieri, Co-Chair
- Welcome/Introductions: Christina Corieri
- Review Prior Meeting Minutes and Approval: Christina Corieri
- Sub-Committee Audio-Only Code Recommendations, Discussion and Vote: Dr. Sara Salek, Co-Chair
- Process to review national/other standards for telehealth best practices, relevant peer-reviewed literature, and adopt telehealth best practices guidelines: Dr. Sara Salek
- Call to the Public: Christina Corieri
- 2021 & 2022 Meeting Dates: Dr. Sara Salek
- Adjourn: Christina Corieri

# HB 2454

- Requires the Advisory Committee to review national and other standards for telehealth best practices and relevant peer-reviewed literature.
- Allows the Advisory Committee to conduct public meetings at which testimony may be taken regarding the efficacy of various communications media and the types of services and populations for which telehealth is appropriate.
- Requires the Advisory Committee to adopt telehealth best practices guidelines and recommendations regarding the health care services that may be appropriately provided through an audio-only telehealth format and make updates, when applicable.
- Requires the Advisory Committee, before making its recommendations, to:
  - a. Analyze medical literature and national practice guidelines;
  - b. Consider the comparative effectiveness, safety and benefit to the patient of performing a service through an audio-only telehealth format instead of in person or through an audio-visual format; and
  - c. Consider the appropriate frequency and duration of audio-only telehealth encounters.
- Allows the Advisory Committee to authorize subcommittees to address select issues or services and report to the Advisory Committee as directed.

# HB 2454

- Requires the Advisory Committee to submit a report to the Governor, the President of the Senate and the Speaker of the House of Representatives by:
  - a. **December 1, 2021**, with recommendations regarding the specific health care services that are appropriate to provide through an audio-only telehealth format as a substitute for an in-person or audio-visual telehealth encounter; and
  - b. **June 30, 2022**, with recommendations regarding telehealth best practice guidelines for health care providers.
- Requires AHCCCS to staff the Advisory Committee and provide meeting space.
- Requires, from October 1, 2021 until January 1, 2026, each health care provide regulatory board or agency to submit to the Advisory Committee a report identifying the number and type of out-of-state health care providers who have applied for interstate telehealth registration and the number and type of out-of-state health care providers who registration has been approved.
- Terminates the Advisory Committee on July 1, 2029.

# July Meeting Minutes Review and Approval

Christina Corieri

# Subcommittee Audio-Only Code Recommendations, Discussion, and Vote

Dr. Sara Salek

# Primary Criteria Utilized by Subcommittees

- Requirement of face-face or in-person based on code description
- Clinical appropriateness for audio-only service delivery

# Subcommittee Recommendation Summary

## Audio-only coverage post pandemic

Total of **37 codes** available for audio-only coverage post pandemic

- Maintain 24 codes (out of 94) on temporary audio-only code set
- Maintain 13 codes on permanent audio-only code list

# AHCCCS Audio-only Coding Standards

- Currently, there is no specific audio-only modifier available from CMS or AMA
  - AHCCCS joined other States in submitting application to AMA for a specific audio-only modifier
- Pre-pandemic, AHCCCS adopted Place of Service (POS) 02 Telehealth to identify services delivered via an audio-only
- During the pandemic, AHCCCS identified the modifier UD to utilize with temporary audio only code set

# Report Requirements

- Requires the Advisory Committee to submit a report by **December 1, 2021** with recommendations regarding the specific health care services that are appropriate to provide through an audio-only telehealth format as a substitute for an in-person or audio-visual telehealth encounter
- AHCCCS will draft report for Committee's review and approval to meet this timeframe

Process to review national/other standards for telehealth best practices, relevant peer-reviewed literature, and adopt telehealth best practices guidelines

Dr. Salek

# Recap: Telehealth Resources Shared

- Center for Connected Health Policy: <https://www.cchpca.org/>
- Arizona Telemedicine Program <https://telemedicine.arizona.edu>
  - [Arizona Telemedicine Council](#)
- Southwest Telehealth Resource Center <https://southwesttrc.org>
- National Consortium of Telehealth Resource Centers  
<https://telehealthresourcecenter.org/>
- American Telemedicine Association <https://www.americantelemed.org/>

# Southwest Telehealth Resource Center

- Created to advance the effective use of telemedicine services throughout the Southwest
- Assists start-up telehealth programs in their development and serves as a resource for existing programs regarding changes in technology and other issues affecting telehealth in the Southwest region
- Standards and guidelines: <https://southwesttrc.org/resources/standards>
  - Includes direct links to American Telemedicine Association Guidelines, including telerehab services, pediatric telehealth

## American Telemedicine Association

- Resources include Practice Guidelines:  
[https://www.americantelemed.org/resource\\_categories/practice-guidelines/](https://www.americantelemed.org/resource_categories/practice-guidelines/)
- Majority of these practice guidelines are available to ATA members only
- Example of non-member guideline access:
  - [Teledermatology](#)
  - [Teleburn care](#)

# Association Specific Guidelines

Examples:

[Telepsychiatry With Children and Adolescents](#)

# Call to the Public

Email comments to  
[lauren.prole@azahcccs.gov](mailto:lauren.prole@azahcccs.gov)

# 2021 & 2022 Meetings

Adjourn

Thank You.

## Final Code List

Type	CODE	DESCRIPTION
Maintain	96130	Psychological testing evaluation by qualified health care professional first 60 minutes
Maintain	96131	Psychological testing evaluation by qualified health care professional additional 60 minutes
Maintain	96132	Neuropsychological testing evaluation by qualified health care professional, first 60 minutes
Maintain	96133	Neuropsychological testing evaluation by qualified health care professional, additional 60 minutes
Maintain	96136	Psychological or neuropsychological test administration and scoring by qualified health care professional first 30 minutes
Maintain	96137	Psychological or neuropsychological test administration and scoring by qualified health care professional additional 30 minutes
Maintain	96138	Psychological or neuropsychological test administration and scoring by technician first 30 minutes
Maintain	96139	Psychological or neuropsychological test administration and scoring by technician additional 30 minutes
Maintain	96160	Administration of patient-focused health risk assessment instrument (eg, health hazard appraisal) with scoring and documentation, per standardized instrument
Maintain	96161	Administration of caregiver-focused health risk assessment instrument (eg, depression inventory) for the benefit of the patient, with scoring and documentation, per standardized instrument
Maintain	96127	Brief emotional/behav asgmt
Maintain	96156	Health behavior assessment, or re-assessment (ie, health-focused clinical interview, behavioral observations, clinical decision making)
Maintain	97129	Therapeutic interventions that focus on cognitive function (eg, attention, memory, reasoning, executive function, problem solving, and/or pragmatic functioning) and compensatory strategies to manage the performance of an activity (eg, managing time or schedules, initiating, organizing, and sequencing tasks), direct (one-on-one) patient contact; initial 15 minutes
Maintain	97130	Therapeutic interventions that focus on cognitive function (eg, attention, memory, reasoning, executive function, problem solving, and/or pragmatic functioning) and compensatory strategies to manage the performance of an activity (eg, managing time or schedules, initiating, organizing, and sequencing tasks), direct (one-on-one) patient contact; each additional 15 minutes (List separately in addition to code for primary procedure)
Permanent Telephonic Code Set	98966	Telephone assessment and management service provided by a qualified nonphysician health care professional to an established patient, parent, or guardian not originating from a related assessment and management service provided within the previous 7 days nor leading to an assessment and management service or procedure within the next 24 hours or soonest available appointment; 5-10 minutes of medical discussion
Permanent Telephonic Code Set	98967	Telephone assessment and management service provided by a qualified nonphysician health care professional to an established patient, parent, or guardian not originating from a related assessment and management service provided within the previous 7 days nor leading to an assessment and management service or procedure within the next 24 hours or soonest available appointment; 11-20 minutes of medical discussion
Permanent Telephonic Code Set	98968	Telephone assessment and management service provided by a qualified nonphysician health care professional to an established patient, parent, or guardian not originating from a related assessment and management service provided within the previous 7 days nor leading to an assessment and management service or procedure within the next 24 hours or soonest available appointment; 21-30 minutes of medical discussion
Permanent Telephonic Code Set	99288	Physician direction of emergency advanced life support paramedic services
Permanent Telephonic Code Set	99441	Telephone evaluation and management service by a physician or other qualified health care professional who may report evaluation and management services provided to an established patient, parent, or guardian not originating from a related E/M service provided within the previous 7 days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment; 5-10 minutes of medical discussion
Permanent Telephonic Code Set	99442	Telephone evaluation and management service by a physician or other qualified health care professional who may report evaluation and management services provided to an established patient, parent, or guardian not originating from a related E/M service provided within the previous 7 days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment; 11-20 minutes of medical discussion
Permanent Telephonic Code Set	99443	Telephone evaluation and management service by a physician or other qualified health care professional who may report evaluation and management services provided to an established patient, parent, or guardian not originating from a related E/M service provided within the previous 7 days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment; 21-30 minutes of medical discussion
Maintain	H0001	Alcohol and/or drug assessment

Maintain	H0002	Behavioral health screening to determine eligibility for admission to treatment program
Maintain	H0004	Behavioral health counseling and therapy per 15 minutes
Permanent Telephonic Code Set	H0025	Behavioral health prevention education service (delivery of services with target population to affect knowledge attitude and/or behavior)
Maintain	H0031	Mental health assessment by non-physician
Maintain	H0034	Medication training and support per 15 minutes
Permanent Telephonic Code Set	H0038	Self-help/peer services per 15 minutes
Permanent Telephonic Code Set	H2014	Skills training and development per 15 minutes
Permanent Telephonic Code Set	H2025	Ongoing support to maintain employment per 15 minutes
Maintain	H2027	Psychoeducational service per 15 minutes
Maintain	H2033	Multisystemic therapy for juveniles per 15 minutes
Permanent Telephonic Code Set	S5110	Home care training family; per 15 minutes
Maintain	T1002	RN services, up to 15 minutes
Maintain	T1003	LPN/LVN services, up to 15 minutes
Maintain	T1015	Clinic visit/encounter all-inclusive
Permanent Telephonic Code Set	T1016	Case management each 15 minutes

Audio Only Subcommittee Recommendations with Permanent Audio Only Codes

KEY
Maintain
Remove
Face to Face Required
Permanent Code

Code Type	CODE	DESCRIPTION	AMA Request
BH	96116	Neurobehavioral status exam (clinical assessment of thinking, reasoning and judgment, [eg, acquired knowledge, attention, language, memory, planning and problem solving, and visual spatial abilities]), by physician or other qualified health care professional, both face-to-face time with the patient and time interpreting test results and preparing the report; first hour	
BH	96121	Neurobehavioral status examination by qualified health care professional with interpretation and report additional 60 minutes	
BH	96130	Psychological testing evaluation by qualified health care professional first 60 minutes	
BH	96131	Psychological testing evaluation by qualified health care professional additional 60 minutes	
BH	96132	Neuropsychological testing evaluation by qualified health care professional, first 60 minutes	
BH	96133	Neuropsychological testing evaluation by qualified health care professional, additional 60 minutes	
BH	96136	Psychological or neuropsychological test administration and scoring by qualified health care professional first 30 minutes	
BH	96137	Psychological or neuropsychological test administration and scoring by qualified health care professional additional 30 minutes	
BH	96138	Psychological or neuropsychological test administration and scoring by technician first 30 minutes	
BH	96139	Psychological or neuropsychological test administration and scoring by technician additional 30 minutes	
BH	96160	Administration of patient-focused health risk assessment instrument (eg, health hazard appraisal) with scoring and documentation, per standardized instrument	
PH	96160	Administration of patient-focused health risk assessment instrument (eg, health hazard appraisal) with scoring and documentation, per standardized instrument	
BH	96161	Administration of caregiver-focused health risk assessment instrument (eg, depression inventory) for the benefit of the patient, with scoring and documentation, per standardized instrument	
PH	96161	Administration of caregiver-focused health risk assessment instrument (eg, depression inventory) for the benefit of the patient, with scoring and documentation, per standardized instrument	
BH	97110	Therapeutic exercise to develop strength, endurance, range of motion, and flexibility, each 15 minutes	
PH	97110	Therapeutic exercise to develop strength, endurance, range of motion, and flexibility, each 15 minutes	
PH	97150	Therapeutic procedure(s), group (2 or more individuals) <b>Per the CPT 2021 guidelines 97010-97763 consist of Face to Face time with the patient (and care giver) if applicable.</b>	
BH	97158	Group adaptive behavior treatment with protocol modification administered by qualified health care professional to multiple patients each 15 minutes	
PH	97530	Therapeutic activities to improve function, with one-on-one contact between patient and provider, each 15 minutes	
PH	97535	Self-care or home management training, each 15 minutes	
PH	97803	Medical nutrition therapy; re-assessment and intervention, individual, <b>face-to-face</b> with the patient, each 15 minutes	x
PH	97804	Medical nutrition therapy; group (2 or more individual(s)), each 30 minutes	
PH	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.	
PH	99204	Office or other outpatient visit 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.	
PH	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.	
PH	99211	Office or other outpatient visit 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.	x
PH	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.	x

PH	99213	Office or other outpatient visit 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.	x
PH	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.	x
PH	99215	Office or other outpatient visit 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.	x
PH	99231	Subsequent hospital inpatient care, typically 15 minutes per day	
PH	99232	Subsequent hospital inpatient care, typically 25 minutes per day	
PH	99233	Subsequent hospital inpatient care, typically 35 minutes per day	
PH	99241	Patient office consultation typically 15 minutes	
PH	99242	Patient office consultation typically 30 minutes	
PH	99243	Patient office consultation typically 40 minutes	
PH	99244	Patient office consultation typically 60 minutes	
PH	99245	Patient office consultation typically 80 minutes	
PH	99341	New patient home visit, typically 20 minutes	
PH	99342	New patient home visit, typically 30 minutes	
PH	99343	New patient home visit, typically 45 minutes	
PH	99344	New patient home visit, typically 60 minutes	
PH	99347	Established patient home visit, typically 15 minutes	
PH	99348	Established patient home visit, typically 25 minutes	
PH	99349	Established patient home visit, typically 40 minutes	
PH	99354	Prolonged office or other outpatient service first hour	
PH	99355	Prolonged office or other outpatient service each 30 minutes beyond first hour	
PH	99356	Prolonged inpatient or observation hospital service first hour	
PH	99357	Prolonged inpatient or observation hospital service each 30 minutes beyond first hour	
PH	99358	Prolonged evaluation and management service before and/or after direct patient care; first hour	
PH	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)	
PH	99412	Preventive medicine counseling and/or risk factor reduction intervention(s) provided to individuals in a group setting (separate procedure); approximately 60 minutes	
PH	99497	Advance care planning by the physician or other qualified health care professional	
PH	99498	Advance care planning by the physician or other qualified health care professional	
PH	92507	Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	
PH	92508	Treatment of speech, language, voice, communication, and/or auditory processing disorder; group, 2 or more individuals	
PH	92521	Evaluation of speech fluency (eg, stuttering, cluttering)	
PH	92522	Evaluation of speech sound production (eg, articulation, phonological process, apraxia, dysarthria);	
PH	92523	Evaluation of speech sound production (eg, articulation, phonological process, apraxia, dysarthria); with evaluation of language comprehension and expression (eg, receptive and expressive language)	
PH	92524	Behavioral and qualitative analysis of voice and resonance	
PH	92526	Treatment of swallowing dysfunction and/or oral function for feeding	
BH	96127	Brief emotional/behav asstmt	
BH	96156	Health behavior assessment, or re-assessment (ie, health-focused clinical interview, behavioral observations, clinical decision making)	
PH	96156	Health behavior assessment, or re-assessment (ie, health-focused clinical interview, behavioral observations, clinical decision making)	
BH	96158	Health behavior intervention, individual, face-to-face; initial 30 minutes	
BH	96159	Health behavior intervention, individual, face-to-face; each additional 15 minutes (List separately in addition to code for primary service)	
BH	96164	Health behavior intervention, group (2 or more patients), face-to-face; initial 30 minutes	
BH	96165	Health behavior intervention, group (2 or more patients), face-to-face; each additional 15 minutes (List separately in addition to code for primary service)	
BH	96167	Health behavior intervention, family (with the patient present), face-to-face; initial 30 minutes	

BH	96168	Health behavior intervention, family (with the patient present), face-to-face; each additional 15 minutes (List separately in addition to code for primary service)	
BH	96170	Health behavior intervention, family (without the patient present), face-to-face; initial 30 minutes	
BH	96171	Health behavior intervention, family (without the patient present), face-to-face; each additional 15 minutes (List separately in addition to code for primary service)	
BH	97129	Therapeutic interventions that focus on cognitive function (eg, attention, memory, reasoning, executive function, problem solving, and/or pragmatic functioning) and compensatory strategies to manage the performance of an activity (eg, managing time or schedules, initiating, organizing, and sequencing tasks), direct (one-on-one) patient contact; initial 15 minutes	
PH	97129	Therapeutic interventions that focus on cognitive function (eg, attention, memory, reasoning, executive function, problem solving, and/or pragmatic functioning) and compensatory strategies to manage the performance of an activity (eg, managing time or schedules, initiating, organizing, and sequencing tasks), direct (one-on-one) patient contact; initial 15 minutes	
BH	97130	Therapeutic interventions that focus on cognitive function (eg, attention, memory, reasoning, executive function, problem solving, and/or pragmatic functioning) and compensatory strategies to manage the performance of an activity (eg, managing time or schedules, initiating, organizing, and sequencing tasks), direct (one-on-one) patient contact; each additional 15 minutes (List separately in addition to code for primary procedure)	
PH	97130	Therapeutic interventions that focus on cognitive function (eg, attention, memory, reasoning, executive function, problem solving, and/or pragmatic functioning) and compensatory strategies to manage the performance of an activity (eg, managing time or schedules, initiating, organizing, and sequencing tasks), direct (one-on-one) patient contact; each additional 15 minutes (List separately in addition to code for primary procedure)	
BH	97156	Family adaptive behavior treatment guidance by qualified health care professional (with or without patient present), each 15 minutes	
PH	97802	Medical nutrition therapy; initial assessment and intervention, individual, face-to-face with the patient, each 15 minutes	x
Permanent Telephonic Code Set	98966	Telephone assessment and management service provided by a qualified nonphysician health care professional to an established patient, parent, or guardian not originating from a related assessment and management service provided within the previous 7 days nor leading to an assessment and management service or procedure within the next 24 hours or soonest available appointment; 5-10 minutes of medical discussion	
Permanent Telephonic Code Set	98967	Telephone assessment and management service provided by a qualified nonphysician health care professional to an established patient, parent, or guardian not originating from a related assessment and management service provided within the previous 7 days nor leading to an assessment and management service or procedure within the next 24 hours or soonest available appointment; 11-20 minutes of medical discussion	
Permanent Telephonic Code Set	98968	Telephone assessment and management service provided by a qualified nonphysician health care professional to an established patient, parent, or guardian not originating from a related assessment and management service provided within the previous 7 days nor leading to an assessment and management service or procedure within the next 24 hours or soonest available appointment; 21-30 minutes of medical discussion	
PH	99202	Office or other outpatient visit 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.	
PH	99234	Hospital observation or inpatient care low severity, 40 minutes per day	
PH	99235	Hospital observation or inpatient care moderate severity, 50 minutes per day	
Permanent Telephonic Code Set	99288	Physician direction of emergency advanced life support paramedic services	
PH	99411	Preventive medicine counseling and/or risk factor reduction intervention(s) provided to individuals in a group setting (separate procedure); approximately 60 minutes	
PH	99417	Prolonged office or other outpatient evaluation and management service(s) beyond the minimum required time of the primary procedure which has been selected using total time, requiring total time with or without direct patient contact beyond the usual service, on the date of the primary service, each 15 minutes of total time (List separately in addition to codes 99205, 99215 for office or other outpatient Evaluation and Management services)	
PH	99421	Online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 5-10 minutes	

PH	99422	Online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 11-20 minutes	
PH	99423	Online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 21 or more minutes	
Permanent Telephonic Code Set	99441	Telephone evaluation and management service by a physician or other qualified health care professional who may report evaluation and management services provided to an established patient, parent, or guardian not originating from a related E/M service provided within the previous 7 days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment; 5-10 minutes of medical discussion	
Permanent Telephonic Code Set	99442	Telephone evaluation and management service by a physician or other qualified health care professional who may report evaluation and management services provided to an established patient, parent, or guardian not originating from a related E/M service provided within the previous 7 days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment; 11-20 minutes of medical discussion	
Permanent Telephonic Code Set	99443	Telephone evaluation and management service by a physician or other qualified health care professional who may report evaluation and management services provided to an established patient, parent, or guardian not originating from a related E/M service provided within the previous 7 days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment; 21-30 minutes of medical discussion	
BH	H0001	Alcohol and/or drug assessment	
BH	H0002	Behavioral health screening to determine eligibility for admission to treatment program	
BH	H0004	Behavioral health counseling and therapy per 15 minutes	
BH	H0015	Alcohol and/or drug services; intensive outpatient (treatment program that operates at least 3 hours/day and at least 3 days/week and is based on an individualized treatment plan), including assessment, counseling; crisis intervention, and activity therapies or education	
Permanent Telephonic Code Set	H0025	Behavioral health prevention education service (delivery of services with target population to affect knowledge attitude and/or behavior)	
BH	H0031	Mental health assessment by non-physician	
BH	H0034	Medication training and support per 15 minutes	
Permanent Telephonic Code Set	H0038	Self-help/peer services per 15 minutes	
BH	H2011	Crisis intervention service per 15 minutes	
Permanent Telephonic Code Set	H2014	Skills training and development per 15 minutes	
Permanent Telephonic Code Set	H2025	Ongoing support to maintain employment per 15 minutes	
BH	H2027	Psychoeducational service per 15 minutes	
BH	H2033	Multisystemic therapy for juveniles per 15 minutes	
PH	S5100	Day care services, adult; per 15 minutes	
Permanent Telephonic Code Set	S5110	Home care training family; per 15 minutes	
BH	S9480	Intensive outpatient psychiatric services, per diem	
BH	T1002	RN services, up to 15 minutes	
PH	T1002	RN services, up to 15 minutes	
BH	T1003	LPN/LVN services, up to 15 minutes	
PH	T1003	LPN/LVN services, up to 15 minutes	
BH	T1015	Clinic visit/encounter all-inclusive	
PH	T1015	Clinic visit/encounter all-inclusive	
Permanent Telephonic Code Set	T1016	Case management each 15 minutes	