Curtis Lowery, MD  
President  
Center for Telehealth and e-Health Law  
1500 K. Street, NW  
Washington, DC 20005

Dear Dr. Lowery:

Thank you for your letter to Administrator Verma requesting clarification concerning the billing of a telehealth transaction on the professional fee bill known as the CMS-1500. The Centers for Medicare & Medicaid Services greatly appreciates your bringing these concerns to our attention. She has asked me to respond directly to you.

Generally, for services paid on the Medicare physician fee schedule, in order for the correct locality payment amount to be determined, physicians and other practitioners are required to enter on the claim in item 32 the address of the location where the service was furnished. There is nothing on the claim to indicate whether this address is the practitioner’s office or a home.

In the case of telehealth services as well as other services where the patient and practitioner are in different geographic locations, the practitioner should enter on the claim the address where they typically practice. If they furnish some or all of these services from their home or another location that is not their typical practice location, they should use the address of the office location where they usually practice. For a practitioner who works from home 100 percent of the time with no other office site, the home address is the address they should enter on the claim. We recognize that these practitioners may not wish to enter their home address, but there is no other appropriate alternate address to use.

We appreciate your interest in this important issue as we work toward our mutual goal of strengthening the Medicare program for all beneficiaries. Please share this response with the organizations that have co-signed your letter.

Sincerely,

Carol L. Blackford  
Director, Hospital & Ambulatory Policy Group  
Centers for Medicare