

# Place of Service Quick Reference for Billing Teams

Bulletinboardformatsizedfor11x17landscape.Focusedontelehealth,office,hospitalbased,ASC,home,school,andfacility billing. Verify payer bulletins before final claim submission.

Service Type	Medicare FFS	Many MA and Commercial Plans	Behavioral Health and Telehealth Heavy Plans	Modifier and Edit	Biller Checkpoints	Denial Trigger	Appeal or Correction Move
Telehealth video. Patient at home.	POS 10	Usually POS 10. Some plans still keep payer specific exceptions.	Usually POS 10	95 when required	Confirm patient was physically at home. Note modality and patient location.	Claim billed with POS 11 or POS 02 when patient was home.	Corrected claim or appeal with note showing patient home status and policy support.
Telehealth video. Patient not at home.	POS 02	Usually POS 02	Usually POS 02	95 when required	Document actual patient location such as office, school, hospital, SNF, or work.	Claim billed POS 10 although patient was not at home.	Corrected claim or appeal with documentation of non home location.
Telehealth audio only.	POS 10 if patient home. POS 02 if not home.	Same core logic. Coverage varies by payer and code set.	Often covered for behavioral health. Verify policy.	93 when required	Check whether payer covers audio only CPT or HCPCS and whether 93 is required.	Used 95 instead of 93, or billed unsupported audio only code.	Appeal only if documentation and payer policy support audio only. Otherwise correct and rebill.
Office visit. Physician practice.	POS 11	POS 11	POS 11	Usually none	Match rendering site to scheduled office location and service address.	Hospital owned clinic billed as office when claim should reflect hospital outpatient.	Rebill with correct facility POS if documentation and site records support it.
Hospital outpatient department or clinic.	POS 22	POS 22	POS 22	Usually none	Confirm encounter occurred in outpatient department and not office suite.	POS 11 used for hospital department based clinic.	Appeal with department proof or correct and resubmit as POS 22.
Inpatient hospital professional service.	POS 21	POS 21	POS 21	Usually none	Tie claim to admission status on date of service.	Observation or outpatient patient billed as inpatient POS 21.	Correct POS to 22 or applicable status based code and resubmit.
Emergency department professional service.	POS 23	POS 23	POS 23	Usually none	Use ER only when service was performed in emergency room setting.	Urgent care or outpatient clinic miscoded as ER.	Correct and resubmit. Include facility record if payer disputes site.
Ambulatory surgical center professional service.	POS 24	POS 24	POS 24	Procedure specific edits may apply	Confirm professional claim is tied to ASC setting.	Office POS used for ASC procedure day.	Correct POS and verify related procedure edits.
Home visit in person.	POS 12	POS 12	POS 12	Usually none	Differentiate in person home visit from telehealth home visit.	POS 10 used for in person service performed in home.	Correct to POS 12. Telehealth POS applies only when service was remote.
School based service in person.	POS 03	POS 03	POS 03	Usually none	Use school setting only when service was actually rendered there.	School encounter billed as office or home.	Correct POS and keep school site documentation available.
Skilled nursing or nursing facility.	POS 31 or 32	POS 31 or 32	POS 31 or 32	Usually none	Differentiate SNF and nursing facility level. Verify payer definitions.	Facility type mismatched or telehealth logic confused with facility POS.	Correct POS or appeal with facility admission and status records.

## High Risk POS Legend and Team Rules

POS	Meaning	Use Rule
02	Telehealth other than patient home	Use when patient is not located in home during telehealth service.
03	School	Use when in person service is rendered in a school setting.
10	Telehealth in patient home	Use when patient is located in home during telehealth service.
11	Office	Use for physician office or independent practice office setting.
12	Home	Use for in person services rendered in the patient home.
21	Inpatient hospital	Use for professional services rendered to inpatient hospital status.
22	Outpatient hospital	Use for outpatient department or hospital clinic setting.
23	Emergency room hospital	Use for services performed in an emergency department.
24	Ambulatory surgical center	Use for services in an ASC setting.
31 and 32	SNF and nursing facility	Use based on actual facility level and payer definitions.

Source notes. CMS POS code set states POS 02 is telehealth provided other than in the patient home and POS 10 is telehealth provided in the patient home. CMS Telehealth FAQ repeats this rule. WEDI examples show common telehealth combinations using POS 10 or POS 02 with modifiers such as 95, GT, and 93.

