



March 2025

Revenue Cycle Management

A UPA Billing Office Newsletter



In This Issue

**2025 Medicare Telehealth Updates
G2211 Add-On Code Reimbursement Updates**

2025 Medicare Telehealth Updates

On March 14, 2025, congress passed a continuing resolution to temporarily fund the U.S. Government through September 30, 2025. The bill was signed into law to allow the continuing resolution (CR) that would keep the federal government funded through September 30, 2025. Included in that bill was an extension of the major statutory telehealth waivers, but only until September 30, 2025. Details can be found here: [NO SHUTDOWN FOR TELEHEALTH AS CONGRESS PASSES SPENDING BILL TO KEEP THE GOVERNMENT OPEN, INCLUDING CRITICAL TELEHEALTH EXTENSIONS, ATA ACTION CELEBRATES VOTE - ATA](#)

The telehealth waivers extended an additional six months include:

- Geographic and specific site requirements waived (patients may be in their homes for telehealth).
- Delaying the requirement for in-person visits for mental health services taking place without the geographic requirement to be met and taking place in an eligible site such as the home.
- Continuing to allow services to be provided via audio-only.
- Continue to allow telehealth to be used to conduct the face-to-face encounter recertification for beneficiaries eligible for hospice care.

With the Medicare telehealth flexibilities that were extended through September 30, 2025, CMS advised that telemedicine services should be reported with an appropriate E/M or other code along with the appropriate modifier 93 or 95 to indicate that the services were performed via “audio-video” or “audio-only”.

- Modifier 93 - Synchronous Telemedicine Service Rendered Via Telephone or Other Real-Time Interactive Audio-Only Telecommunications System.
- Modifier 95 - Synchronous Telemedicine Service Rendered Via a Real-Time Interactive Audio and Video Telecommunications System.
- 99441-99443 Telephone Visits are deleted.
- New Audio-video codes 98000-98003 (time based) for new patients.

-continued on page 2



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- New Audio- video codes 98004-98007 (time based) for established patients are not covered by traditional Medicare.
- New Audio-only codes 98008-98011 for new patients.
- New Audio-only codes 98012-98015 for established patients.
- G2012 has been deleted and replaced with 98016.

Be sure that your office staff is up to date on any changes that may impact your practice. You can see more details on the code changes on the AMA & Federal Registry websites:

[AMA releases CPT 2025 code set | American Medical Association](#)

[Federal Register:: Medicare and Medicaid Programs; CY 2024 Payment Policies Under the Physician Fee Schedule and Other Changes to Part B Payment and Coverage Policies; Medicare Shared Savings Program Requirements; Medicare Advantage; Medicare and Medicaid Provider and Supplier Enrollment Policies; and Basic Health Program](#)

G2211 Add-On Code Reimbursement Updates

For 2025, CMS will allow payment of the E/M visit complexity add-on code, HCPCS code G2211, when the E/M base CPT (codes 99202-99205, 99211-99215) is reported by the same practitioner on the same day with modifier 25, but ONLY IF the additional service is one of the following:

- Initial Preventive Physical Examination (IPPE).
- Annual wellness visit (AWV).
- Vaccine administration.
- Any Medicare Part B Preventive Service in Office.

Please note that traditional Medicare, as well as plans that follow CMS policy will not reimburse G2211 with an E/M on the same day as another procedure not outlined above, such as drug administration charges or preventive services such as 993xx series codes.

For the full CMS MLN release and a full list of covered services under this CMS policy change transmittal, see the links below:

[CMS MLN MM13473 - How to Use the Office & Outpatient Evaluation and Management Visit Complexity Add-on Code G2211](#)

[CMS Claims Processing Manual Transmittal 13015](#)