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Webinar Series: 2025 Billing Updates

December 12, 2024

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Agenda:

- CCM/RPM Billing Updates and Clarifications
- FQHC/RHC Billing Updates
- APCM (Advanced Primary Care Management)
  - NEW Code overview
  - ChronicCareIQ software support for APCM

CCM and RPM Clarificiations

No Significant changes for CCM and RPM for 2025

CCM is NOT going away!
APCM codes are coming, but CCM is still CMS supported and encouraged

CMS Medicare and Medicaid CY 2025 PFS Final Rule: Section II, G, #2, d. (Page 97897)

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FQHC/RHC:

(G5011 Sunset and Billing Updates)

FQHC/RHC Billing Updates - now PFS

G0511 - FQHC/RHC

- CCM (one code)
- PCM (one code)
- RPM (one code)
- RTM (one code)
- BHI (one code)
- CPM (one code)

Average National Amount 2024:
$72 per instance flat rate



CCM
- 99490, 99439 x2
- Complex - 99487, 99489 (unlim)
- Provider - 99491, 99437 x2

RPM
- 99457, 99458 x2
- 99453, 99454
- Provider - 99091

PCM
- 99426, 99427 x2
- Provider - 99424, 99425 x2

BHI
- 99484

CPM
- G3002, G3003

RTM - coming to CCIQ

APCM (new for 2025)

FQHC/RHC Billing Updates - now PFS

- CMS has stated the calculation of G0511 as a flat rate for all the services that it covers is no longer appropriate.
- CMS agrees that it is “important to identify the actual services being furnished”
- CMS believes that converting FQHC/RHC to PFS codes:
  - Leads to transparency in billing
  - Allows proper payment for services rendered
  - Expressly allows “add-on” codes to be billed for if requirements met to offset lower reimbursements
- *NOTE:* G0512 is NOT included - this code remains status quo

CMS Medicare and Medicaid CY 2025 PFS Final Rule: Section III, B, #2, c.

FQHC/RHC Billing Updates - Convert NOW

- CMS gave six months for FQHC/RHCs to convert billing to PFS
- Organization MUST pick one or other - can not do both G0511 and PFS billing in same months

ChronicCareIQ positioned our software to support this change already - we encourage our FQHC/RHC's to update to PFS in January 2025, after December billing complete.

CMS Medicare and Medicaid CY 2025 PFS Final Rule: Section III, B, #2, c.

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APCM:

(Advanced Primary Care Management)

APCM - New Codes for 2025

"APCM services for use by practitioners who are providing services under this specific model of advanced primary care, when the practitioner is the ***continuing focal point*** for all needed health care services and ***responsible for all primary care services*** for a patient"

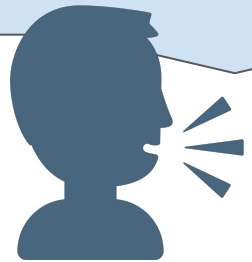


TABLE 24: Patient-Centered Risk Stratification for Billing APCM Codes

Level 1 [G0556]	Level 2 [G0557]	Level 3 [G0558]
Patients with one or fewer chronic conditions.	Patients with two or more chronic conditions.	Patients with two or more chronic conditions and who are Qualified Medicare Beneficiaries.
$15	$50	$110

Federal Register: CY 2025 PFS Medicare Final Rule (Section II, G, #2 - page 97859, 97869)

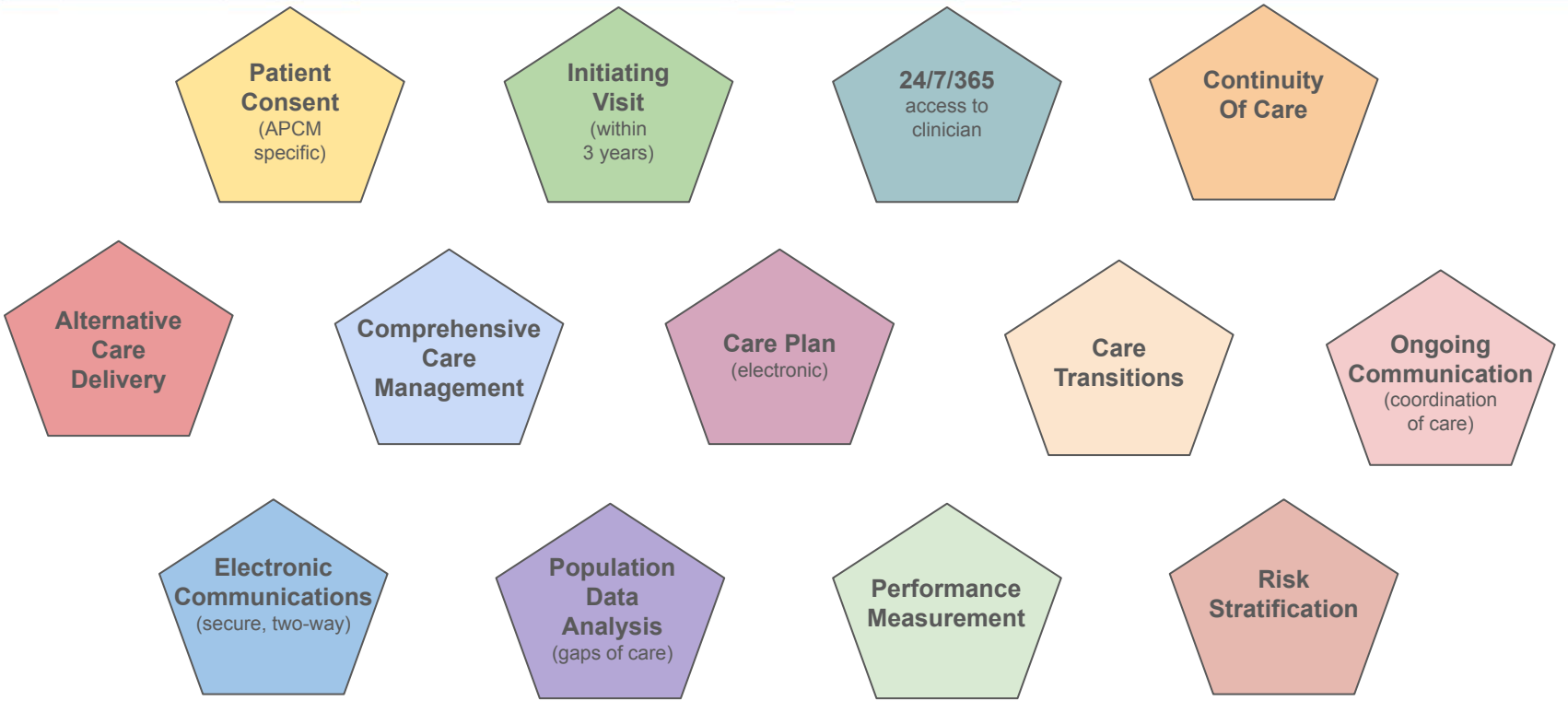
APCM - New Codes for 2025

What do I need to consider to support APCM?

1. Can my practice *OFFER* the 13 service requirements?
2. Is the practice/provider truly the *FOCAL POINT* of care?
3. Are we ready to offer to *ALL* our Medicare patients?
4. Am I completing *Care Plans* on all patients?
5. Are my ChronicCareIQ patients *TECHNOLOGY* connected via the platform?
6. Is the practice participating in a *MIPS MVP* (or equivalent) program?

Federal Register: CY 2025 PFS Medicare Final Rule (Section II, G, #2)

APCM - Service Elements



CMS Medicare and Medicaid CY 2025 PFS Final Rule: Section II, G, #2, Table 25.

APCM Service Elements (Table 25)

APCM requires 13 service elements. All service elements must be “available” to patients in a primary care practice, but **not all service elements need to be provided each month.**

- Practice must be able to fulfill all 13, but do not have perform them every month
  - CMS did NOT stipulate what minimum number of elements is
- Practices who do NOT fulfill are encouraged by CMS to bill for CCM/RPM services

- **Consent** - SPECIFIC to APCM and include that this provider is responsible for all primary care. Patient must agree to this and be informed of copay responsibilities
- **24/7 Access** - this is more specifically outlined - clause for “reasonable after-hours”
- **Care Plan** - must be electronically available and shared with patient/caregiver. No specific format was provided by CMS (similar to CCM)
- **Care Transitions** - final rule stated *reasonable* efforts for 7 day follow up after discharge
- **Ongoing Communication** - very clear TWO WAY and TECHNOLOGY - OTHER THAN TELEPHONE - is needed and can be housed in external sources outside of EHR.
- **Performance Measurement** - Value in Care/MIPS/MIPS MVP programs

APCM - Co-billing of Codes

TAKE HOME MESSAGE:

APCM was designed to incorporate value of care for patients that do not get 20 minutes - it is NOT a replacement for CCM.

APCM **is NOT** co-billable in the same month as:

- CCM
- PCM (by SAME provider)
- TCM (by SAME provider)

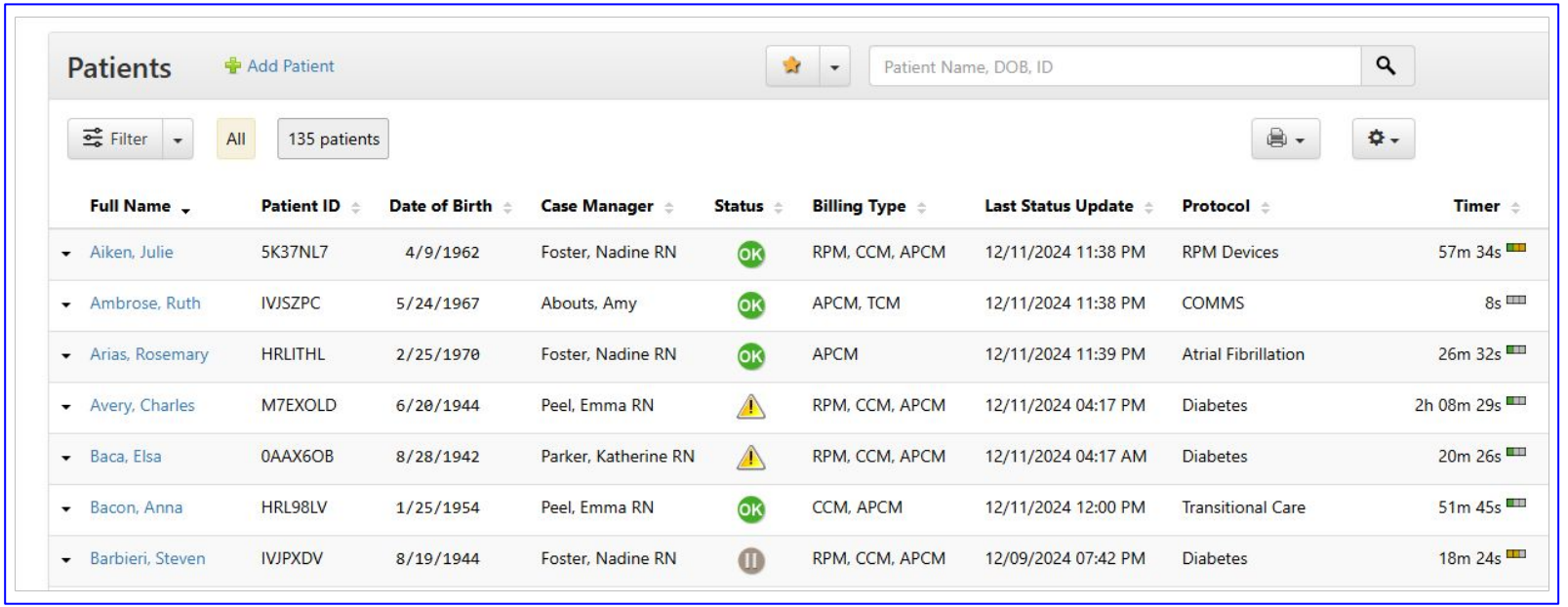
APCM **is** co-billable in the same month as:

- RPM
- RTM
- BHI

CMS Medicare and Medicaid CY 2025 PFS Final Rule: Section II, G, #2, Table 26.

APCM - ChronicCareIQ Support

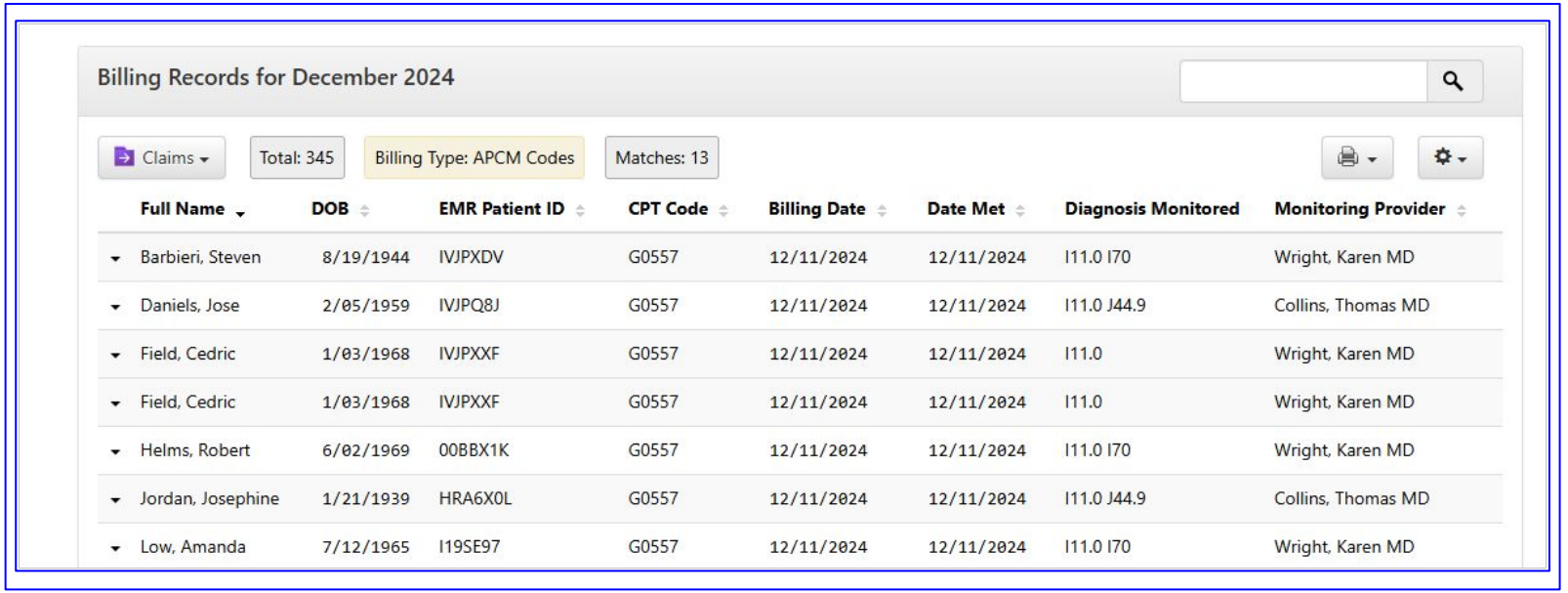
- ChronicCareIQ will offer “Opt-In” APCM billing for clients
- Billing engine will optimize codes and requirements for co-billable patients
- APCM codes will make nearly all ***consented*** Medicare patients billable each month!



Full Name	Patient ID	Date of Birth	Case Manager	Status	Billing Type	Last Status Update	Protocol	Timer
Aiken, Julie	5K37NL7	4/9/1962	Foster, Nadine RN	OK	RPM, CCM, APCM	12/11/2024 11:38 PM	RPM Devices	57m 34s
Ambrose, Ruth	IVJSZPC	5/24/1967	Abouts, Amy	OK	APCM, TCM	12/11/2024 11:38 PM	COMMS	8s
Arias, Rosemary	HRLITHL	2/25/1970	Foster, Nadine RN	OK	APCM	12/11/2024 11:39 PM	Atrial Fibrillation	26m 32s
Avery, Charles	M7EXOLD	6/20/1944	Peel, Emma RN	⚠	RPM, CCM, APCM	12/11/2024 04:17 PM	Diabetes	2h 08m 29s
Baca, Elsa	0AAX6OB	8/28/1942	Parker, Katherine RN	⚠	RPM, CCM, APCM	12/11/2024 04:17 AM	Diabetes	20m 26s
Bacon, Anna	HRL98LV	1/25/1954	Peel, Emma RN	OK	CCM, APCM	12/11/2024 12:00 PM	Transitional Care	51m 45s
Barbieri, Steven	IVJPXDV	8/19/1944	Foster, Nadine RN	⏸	RPM, CCM, APCM	12/09/2024 07:42 PM	Diabetes	18m 24s

APCM - ChronicCareIQ Support

- APCM codes will be displayed on Billing Dashboard
- Consents will be for APCM billing type patients
- Re-consent is required for adding APCM billing type to existing patients
- Patient must be technology connected to ChronicCareIQ



Billing Records for December 2024

Claims | Total: 345 | Billing Type: APCM Codes | Matches: 13

Full Name	DOB	EMR Patient ID	CPT Code	Billing Date	Date Met	Diagnosis Monitored	Monitoring Provider
Barbieri, Steven	8/19/1944	IVJPXDV	G0557	12/11/2024	12/11/2024	I11.0 I70	Wright, Karen MD
Daniels, Jose	2/05/1959	IVJPQ8J	G0557	12/11/2024	12/11/2024	I11.0 J44.9	Collins, Thomas MD
Field, Cedric	1/03/1968	IVJPXXF	G0557	12/11/2024	12/11/2024	I11.0	Wright, Karen MD
Field, Cedric	1/03/1968	IVJPXXF	G0557	12/11/2024	12/11/2024	I11.0	Wright, Karen MD
Helms, Robert	6/02/1969	00BBX1K	G0557	12/11/2024	12/11/2024	I11.0 I70	Wright, Karen MD
Jordan, Josephine	1/21/1939	HRA6X0L	G0557	12/11/2024	12/11/2024	I11.0 J44.9	Collins, Thomas MD
Low, Amanda	7/12/1965	I19SE97	G0557	12/11/2024	12/11/2024	I11.0 I70	Wright, Karen MD

Thank You!

CONTACT US

If you need product support or help with your account, please contact support

· Email at support@chroniccareiq.com

· Call at (855) 999-8089 option 3