



2021 Annual Update to the Therapy Code List

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Related Change Request (CR) Number: 12126

Related CR Release Date: December 31, 2020 Effective Date: January 1, 2021

Related CR Transmittal Number: R10542CP Implementation Date: January 4, 2021

PROVIDER TYPES AFFECTED

This MLN Matters Article is for physicians, therapists, providers, and suppliers billing Medicare Administrative Contractors (MACs) for therapy services provided to Medicare beneficiaries.

PROVIDER ACTION NEEDED

This article informs you of updates to the list of codes that sometimes or always describe therapy services. The additions, changes, and deletions to the therapy code list reflect those made in the Calendar Year (CY) 2021 CPT and Level II HCPCS. Make sure your billing staffs are aware of these updates.

BACKGROUND

Section 1834(k)(5) of the Social Security Act (the Act) requires that all claims for outpatient rehabilitation therapy services and all Comprehensive Outpatient Rehabilitation Facility (CORF) services use a uniform coding system. The CY 2021 CPT and Level II HCPCS are the coding systems you use for reporting these services. You'll find the therapy code listing at <http://www.cms.gov/Medicare/Billing/TherapyServices/index.html>.

CMS discussed the policies implemented in this notification in CY 2021 Medicare Physician Fee Schedule (MPFS) rulemaking. CR 12126 updates the therapy code list and associated policies for CY 2021. CMS designated all these HCPCS/CPT codes as "sometimes therapy," to permit physicians and certain Non-Physician Practitioners (NPPs), including nurse practitioners, physician assistants, and clinical nurse specialists, to render these services outside a therapy plan of care when appropriate.

Further, these HCPCS/CPT codes are considered communication technology-based (CTB) services so other NPPs can render these services, such as psychologists and social workers, in addition to therapists (physical therapists, occupational therapists, and speech-language pathologists) whether in private practice or those that are facility-based. Also, these codes for CTB services replace codes for similar services that CMS included in CR 11791. For the five codes below (2 HCPCS and 3 CPT codes), CY 2021 rulemaking made these codes permanent,

meaning they are no longer restricted by the effectiveness timeline of the Public Health Emergency (PHE) for COVID-19. The HCPCS codes and long descriptors include:

- **HCPCS code G2250** - Remote assessment of recorded video and/or images submitted by an established patient (e.g., store and forward), including interpretation with follow-up with the patient within 24 business hours, not originating from a related service provided within the previous 7 days nor leading to a service or procedure within the next 24 hours or soonest available appointment. HCPCS code G2250 replaced HCPCS code G2010.
- **HCPCS code G2251** - Brief communication technology-based service, e.g., virtual check-in, by a qualified health care professional who cannot report evaluation and management services, provided to an established patient, not originating from a related e/m service provided within the previous 7 days nor leading to a service or procedure within the next 24 hours or soonest available. HCPCS code G2251 replaced HCPCS code G2012.

The CPT Editorial Panel for CY 2020 created CPT codes 98970, 98971, and 98972. During MPFS rulemaking for CY 2021, CMS decided to use these codes in place of G2061, G2062, and G2063, since their descriptors were similar. The CPT codes and their long descriptors are:

- **CPT 98970** - Qualified nonphysician health care professional online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 5-10 minutes. CPT code 98970 replaced HCPCS code G2061.
- **CPT 98971** - Qualified nonphysician health care professional online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 11-20 minutes. CPT code 98971 replaced HCPCS code G2062.
- **CPT 98972** - Qualified nonphysician health care professional 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. CPT code 98972 replaced HCPCS code G2063.

CR 11971 added the CPT codes for telephone assessment as “sometimes therapy” codes effective for the duration of the PHE for COVID-19. As with the other CTB services noted above, therapists in private practice and therapists who work for institutional providers may furnish these services. The CPT codes and their long descriptors are:

- **CPT 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.
- **CPT 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.

- **CPT 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.

We are removing the following HCPCS codes from the therapy code list, effective for dates of service on and after January 1, 2021:

- G2010
- G2012
- G2061
- G2062
- G2063.

ADDITIONAL INFORMATION

The official instruction, CR 12126, issued to your MAC regarding this change is available at <https://www.cms.gov/files/document/r10542cp.pdf>.

If you have questions, your MACs may have more information. Find their website at <http://go.cms.gov/MAC-website-list>.

DOCUMENT HISTORY

Date of Change	Description
December 31, 2020	Initial article released.

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