

# Medicare Reimbursement for Telehealth During & After the Public Health Emergency

Updated: October 2022

## Background

During the COVID-19 Public Health Emergency (PHE) declaration, the Centers for Medicare & Medicaid Services (CMS) expanded access to specific telehealth services. The expansion of telehealth services has allowed hospitalists to reach and treat more patients, while reducing the spread of COVID-19. Expanded coverage for telehealth has also helped patients in underserved and remote areas who otherwise may not have access to care. CMS has grouped telehealth services into categories, as follows:

- Categories 1 and 2 include codes that have gone through CMS' normal regulatory process and are permanently on the telehealth list.
- Category 3 includes codes that will remain on the Medicare telehealth list until at least the end of 2023, depending on how long the PHE continues. After the PHE expires, CMS may consider permanently adding codes from Category 3 to the telehealth list.
- Temporary telehealth codes were added to the Medicare Telehealth Services List during the PHE on a temporary basis, but not placed into Category 1, 2, or 3. They will no longer be reimbursable via telehealth 151 days after the PHE expires.

## What is the current state of codes hospitalists may use?

The table below includes the Current Procedural Terminology (CPT®)<sup>1</sup> codes commonly used by hospitalists that are eligible for reimbursement as telehealth services, including those expanded under the PHE.

### List of Medicare Telehealth Services for Codes Typically Used by Hospitalists

Code	Description	Status	Code	Description	Status
99217	Observation care discharge	Available up Through Dec. 31, 2023	99225	Subsequent observation care	Available up Through Dec. 31, 2023
99218	Initial observation care	Temporary Addition for the PHE for the COVID-19 Pandemic*	99231	Subsequent hospital care	Permanently on Telehealth List
99219	Initial observation care	Temporary Addition for the PHE for the COVID-19 Pandemic*	99232	Subsequent hospital care	Permanently on Telehealth List
99220	Initial observation care	Temporary Addition for the PHE for the COVID-19 Pandemic*	99233	Subsequent hospital care	Permanently on Telehealth List
99221	Initial hospital care	Temporary Addition for the PHE for the COVID-19 Pandemic*	99234	Observ/hosp same date	Temporary Addition for the PHE for the COVID-19 Pandemic*
99222	Initial hospital care	Temporary Addition for the PHE for the COVID-19 Pandemic*	99235	Observ/hosp same date	Temporary Addition for the PHE for the COVID-19 Pandemic*
99223	Initial hospital care	Temporary Addition for the PHE for the COVID-19 Pandemic*	99236	Observ/hosp same date	Temporary Addition for the PHE for the COVID-19 Pandemic*
99224	Subsequent observation care	Available up Through Dec. 31, 2023	99238	Hospital discharge day	Available up Through Dec. 31, 2023
			99239	Hospital discharge day	Available up Through Dec. 31, 2023
			99291	Critical care first hour	Available up Through Dec. 31, 2023
			99292	Critical care additional 30 min.	Available up Through Dec. 31, 2023

## What is SHM doing about telehealth?

SHM remains strongly supportive of maintaining payment for telehealth services, including many hospital-based services, after the expiration of the PHE. We continue to urge CMS to consider adding inpatient and observation initial visit (99218-99220, 99221-99223) and hospital inpatient or observation care for the evaluation and management of a patient including admission and discharge on the same date (99234-99236) to the Medicare Telehealth list as Category 3. We will continue to advocate for hospitalists on issues of telehealth and encourage our members to share their experiences with telehealth.

\* Ends 151 days after PHE expires.

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