G0511: General Care Management

June 2025

Background

In 2018, the Centers for Medicare and Medicaid Services (CMS) established separate payment for rural health clinics and federally qualified health centers to furnish chronic care management services with the use of HCPCS code G0511. To better understand the services being provided and the utilization of these services, and promote transparency in billing and payment, CMS is unbundling HCPCS code G0511 in 2025. Beginning July 1, 2025, G0511 will no longer be reimbursed under the physician fee schedule. This does not apply to HCPCS code G0512 for behavioral health.

Effective January 1, 2025, CMS will begin a 6-month transition period where G0511 OR the individual codes (listed below) will be accepted. The individual codes will be required September 30th, 2025.

Payment

Payment will be made at the national non-facility PFS payment rate when the individual code is on an RHC or FQHC claim. Payment rates will be updated annually based on the PFS amounts. Patient cost sharing will apply.

Individual codes

- <u>Care Management</u> (Chronic, Complex Chronic, Principal, Behavioral Health): 99437, 99439, 99487, 99489, 99490, 99491, G0323
- Chronic Pain Management: G3002, G3003
- General Behavioral Integration Services: 99484
- Remote Physiologic and Therapeutic Monitoring: 98975, 98976, 98977, 98980, 98981, 99453, 99454, 99457, 99458
- Physiologic Monitoring: 99091, 99474
- Community Health Integration: G0019, G0022
- Principal Illness Navigation and Peer Support: G0023, G0024, G0140, G0146
- Advanced Primary Care Management Services: G0556, G0557, G0558

This resource is based on information provided in <u>CMS' 2025 Physician Fee Schedule Final Rule</u>. Additional CMS resources can be found at CMS' <u>RHC Center</u> and <u>FQHC Center</u>. Applicable ASCO resources have been linked above.

