

COS Billing, LLC

Medical Billing Services for Practitioners and Agencies

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December 2024

Ending 2024 and Preparing for 2025

Changes to Billing Policy

Billing should be sent to us on a monthly basis, bi-monthly at the very least. If for any reason your claims are older than two months, then you must request permission via email to send your claims.

Once we receive your email request, if we agree to file any claims older than two months, we will charge an additional administrative fee.

Going forward, we will charge time taken for phone conversations, questions and inquiries not related to benefit verifications and status of claims. This will be based on our hourly rate with a minimum quarter-hour charge.

Benefits

New policy benefits are generally not loaded into the insurance company's system until the first week of the new year, so they may not be immediately available. In some cases, it may take even longer. Please be aware of this.

Benefit verifications must include:

- the patient's name
- the patient's date of birth
- a copy of the patient's insurance card

We cannot verify if we only receive a copy of the insurance card.

Insurance and Claim Filing

Please confirm that your patient's insurance has not changed as of January 1, 2025.

2024 and 2025 claims cannot be filed on the same form.

Optum/UMR – a 90837 one-hour session can require authorization for certain policies.

Deductibles

Both in-network and out-of-network deductibles will begin again on January 1, 2025.

The updated Medicare deductible for 2025 is \$257.00.

Medicare and Telehealth Update

After perusing the Medicare website and speaking to Medicare representatives, we have found the following:

"For behavioral or mental telehealth, all patients can continue to receive telehealth in an originating site or their resident, with no originating site requirement or geographic location restrictions."