

CODING & DOCUMENTATION

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Smoking cessation and obesity counseling

Q Will Medicare reimburse me for providing counseling for smoking cessation or diet and exercise at every visit?

A The answer depends on how often the patient is seen for counseling. For smoking cessation, Medicare covers two levels of counseling – intermediate and intensive. Two quit attempts are covered each year; each attempt may include a maximum of four sessions. The appropriate codes for symptomatic patients are 99406 (“Smoking and tobacco use cessation counseling visit; intermediate, greater than three minutes up to 10 minutes”) and 99407 (“... intensive, greater than 10 minutes”). The corresponding codes for asymptomatic patients are G0436 (“Smoking and tobacco use cessation counseling visit for the asymptomatic patient; intermediate, greater than three minutes up to 10 minutes”), and G0437 (“... intensive, greater than 10 minutes”).

Medicare covers up to 12 months of obesity counseling for beneficiaries who have a BMI of 30 kg/m² or greater and who are competent and alert at the time of counseling. A qualified primary care physician or other primary care provider must perform the counseling in a primary care setting. This could include one face-to-face visit every week for month 1 and one face-to-face visit every other week for months 2 to 6. If the beneficiary loses at least 3 kg (6.6 lbs.) during that time, one face-to-face visit every month for months 7 to 12 is also covered. Submit G0447 (“Face-to-face behavioral counseling for obesity, 15 minutes”).

Pre-employment physicals

Q If a patient requires a pre-employment physical within a year of a completed annual physical, will the insurer cover it? Should I just fill out the forms using information from the last physical?

A You could bill the pre-employment physical using the appropriate evaluation and management code and diagnosis code V70.5, “Health examination of defined subpopulations,” which should help clarify that this encounter is different from the annual physical you

previously billed. If instead you choose to complete the form using findings from the original physical, keep in mind that you are attesting that the patient’s health is the same as it was on that day. You may charge the patient a nominal fee for this service or investigate the possibility that the patient’s new employer will pay. Be sure to tell the patient up front to whom the service will be billed.

New-patient criteria

Q CPT defines a new patient as “one who has not received any professional services from the physician or another physician of the exact same specialty and subspecialty who belongs to the same group practice, within the past three years.” What date should we use to determine whether it has been three years?

A Use the patient’s last date of service to determine whether the three-year period has passed.

Incomplete annual wellness visits

Q Can I be paid for providing a Medicare annual wellness visit (AWV) when a patient refuses or is unable to provide all required information?

A No. The AWV includes a number of required elements that depend on the patient providing information. For example, completing a health risk assessment (HRA) is required. If the patient chooses not to or can’t provide the information required in the HRA, the service provided would not meet the billing requirements. **FPM**

Editor’s note: Although this department attempts to provide accurate information, some payers may not agree with the advice given. You should refer to current coding manuals and payer policies.

About the Author

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