CODING & DOCUMENTATION

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Medicare annual wellness exam during a home visit

Q Can the Medicare annual wellness visit be performed as part of a home visit?
A Nothing in the Medicare annual wellness visit rules prohibits providing an annual wellness visit in conjunction with a home visit. If you bill a home visit code in addition to the annual wellness visit code, you should append modifier 25 to the home visit code to indicate that it was a significant and separately identifiable service and be sure that your documentation substantiates this fact. To learn more about annual wellness visits, see https://www.cms.gov/MLNMattersArticles/downloads/MM7079.pdf.

Modifier 25 for new patient visits?

Q Is it appropriate to use modifier 25 when billing for a significant and separately identifiable service provided to a new patient?

Payment for physician assistants

Q Are physician assistants (PAs) allowed to see new patients? Is payment for their services less than that for physicians?
A Under Medicare, midlevel providers, including PAs, can see new patients and bill their services directly under their own Medicare billing numbers. Payment is provided at a reduced rate of 85 percent. A PA could be paid at the physician’s rate for providing an established patient office visit, but only if billed under the “incident-to” rules, which require that the physician has seen the patient for the initial visit and established the treatment plan the PA is adhering to at the follow-up visit. The rules also require that the physician be on site during the follow-up visit. For more information about Medicare’s incident-to billing rules, see https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/downloads/se0441.pdf. Private payers’ policies vary. You should consult with your major payers to learn more.

IUD removal

Q What is the proper ICD-9 code for removal of an intrauterine device (IUD)?
A Use V25.12, “Encounter for removal of intrauterine contraceptive device.” If symptoms prompt the IUD removal, report their corresponding codes as secondary diagnoses to support the rationale for removing the IUD.

Will ICD-9 codes be updated this year?

Q If the proposed rule to delay implementation of ICD-10 from Oct. 1, 2013 to Oct. 1, 2014 becomes final, will ICD-9 be updated this fall as usual, or will the current freeze stay in place?
A We won’t know for certain until the federal rule-making process is complete and a final rule is published in the Federal Register. If there are significant updates to ICD-9 this fall, FPM will inform you of them.

Editor’s note: While this department attempts to provide accurate information and useful advice, third-party payers may not accept the coding and documentation recommended. You should refer to the current CPT and ICD-9 manuals and the Documentation Guidelines for Evaluation and Management Services for the most detailed and up-to-date information.

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DO YOU HAVE A CODING OR DOCUMENTATION QUESTION?
Send questions to fpmedit@aafp.org. We can’t respond to all questions we receive, but we will publish answers to selected questions.