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**Medicare Preventive Services:
Initial Preventive Physical Exam & Annual Wellness Visit
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Historically, the Centers for Medicare and Medicaid Services (CMS) have not paid for preventive care or for routine physical examinations. But there are parts of the Accountable Care Act (ACA) which provide benefits which suggest that CMS is getting serious about Preventive Health Services which have the potential for moving us toward the fulfillment of the Triple Aim: improved care (processes), improve health (outcomes) and decreased costs (sustainability).

The ACA has made provision for the following Preventive Health Services at little or no cost to Medicare beneficiaries. The new Intensive Behavioral Therapy codes for obesity and cardiovascular disease along with the Initial Preventive Physical Exam (IPPE), the Annual Wellness Visit Initial and Annual Wellness Visit Subsequent are significant advances in recognizing the value of preventive care and in recognizing the expertise of those who have the tools to provide those services.

Along with the Transitions of Care Management Codes which have been published this year, these preventive codes encourage the “right stuff” in primary healthcare delivery. SETMA is determined to support and to promote these efforts by utilizing them in our practice. **The key to these codes is that there is no deductible and CMS pays the provider for the full allowable benefit.** This is a savings to patients and it is also a revenue benefit to the healthcare provider. The payment for the IPPE is approximately \$159 with no cost to the patient. If a screening EKG and/or screening abdominal ultrasound is warranted and ordered at this time, the fee is paid in addition to the IPPE fee and it is paid without deductible, also.

One of the difficulties of these benefits is for a provider to remember who is eligible to receive this benefit. In order to facilitate the use of these codes and to provide a no-cost benefit to our patients, SETMA has deployed an electronic means of alerting the provider to the fact that the patient qualifies for this benefit.

Outlined in green below, there are three preventive-care, wellness visit codes authorized by CMS. They differ by when they are allowed to be performed and by the fact that in the case of the IPPE an EKG and an Abdominal Ultrasound can be ordered. The code descriptions are:

- **G0402 Initial Preventive Physical Examination (IPPE)** (Also called the Welcome to Medicare Preventive Visit)
- **G0438 Annual Wellness Visit, Initial (AWV)** Annual wellness visit, including a personalized prevention plan of service (PPPS), first visit.
- **G0439 Annual Wellness Visit, Subsequent (AWV)** Annual Wellness visit, including a personalized prevention plan of service (PPPS), subsequent visit. Annual Wellness Visits can be for either new or established patients as the code does not differentiate. The initial AWW, G0438, is performed on patients that have been enrolled with Medicare for more than one year.

The screenshot shows a web-based form titled "Evaluation and Management". On the left, there are sections for "Acute Dx" and "Chronic Dx" with a list of medical conditions. The main area contains several columns of checkboxes for different types of visits and services, categorized by "New Patients" and "Established" status. A red instruction states: "In order to see the SUBMIT button, you MUST answer the E-Prescribing code question below in red." At the bottom right, there is a section for "Medicare Preventive" with a sub-section for "Eligibility" containing three codes: G0402 Initial Preventive Physical Exam, G0438 Annual Wellness Visit, Initial, and G0439 Annual Wellness Visit, Subsequent. These three codes are highlighted with a green box. Below this is an "E-Prescribing" section with a red question: "Was at least one prescription during the encounter generated and submitted electronically?" and two radio buttons for "Yes" and "No".

The G0402 code denotes the **Welcome to Medicare Visit** (also called the **Initial Preventive Physical Exam (IPPE)**). It must be performed within one year of becoming eligible for Medicare and it is a once in the patient’s life-time benefit. It is not for a routine physical examination and does not provide for payment of laboratory services except a screening EKG and, when the patient is qualified, an Abdominal Ultrasound for screening for an abdominal aortic aneurysm. There are five codes related to the IPPE which are:

- **G0402** Initial Preventive Physical Examination (Welcome to Medicare Preventive Visit)
- **G0403** EKG with interpretation and report, performed as a screening for the IPPE
- **G0404** EKG without interpretation and report

- **G0405** EKG interpretation and report only
- **G0389** Abdominal Ultrasound – once in a lifetime benefit – deductible waived, must meet criteria for screening (see below)

Just above the three codes is a button entitled **Eligibility** (outlined in green below).

The screenshot shows the 'Evaluation and Management' form. On the left, there are lists for 'Acute Dx', 'Chronic Dx', 'New Patients', 'Established', and 'Nursing Home'. The right side contains 'New Patients' and 'Established' sections with various procedure codes. Under the 'Medicare Preventive' section, there is a button labeled 'Eligibility' which is highlighted with a green box. Below this, there are checkboxes for 'E-Prescribing' and 'E-Referral'.

When that Eligibility button is clicked, the Medicare Preventive Exam template appears. On this template all the elements of the three preventive care examinations appear. In order to bill for any of the Medicare Preventive codes, all of the elements listed on this template must be fulfilled. Until they are, if you click the **Calculate Code Eligibility** button, you will be informed that there is no code for which you can bill.

The screenshot shows the 'Medicare Preventive Exams' form. It contains a list of 11 questions that must be completed to bill for any Medicare Preventive Exam. Each question has a 'No' button and a 'Click To Complete' button. Below the list, there is a button labeled 'Calculate Code Eligibility' which is highlighted with a green box. At the bottom, there are 'OK' and 'Cancel' buttons.

When any of the required elements are not fulfilled, they will appear in red as above. In order to fulfill an incomplete element of the exam (those in red), simply click on the “**Click to Complete**” button to the right of each element which has not been met. You will be taken to the place in the EMR where that evaluation can be completed and documented. You will then be returned to the above template. Once all of the elements are fulfilled – see the template below – all will turn black.

Medicare Preventive Exams

1. ALL of the items below must be completed to bill for ANY of the Medicare Preventive Exams.

Has the patient's medical and family history been updated/reviewed today?	Yes	Click To Complete
Has the patient's list of providers been updated/reviewed today?	Yes	Click To Complete
Have the patient's vital signs been recorded today?	Yes	Click To Complete
Has the functional assessment been updated/reviewed today?	Yes	Click To Complete
Has the depression assessment been updated/reviewed today?	Yes	Click To Complete
Has the fall risk assessment been updated/reviewed today?	Yes	Click To Complete
Has the patient's code status been documented?	Yes	Click To Complete
Has the patient's visual acuity been recorded today?	No	Click To Complete
Has either the HEDIS or NUP template been accessed today in order to create a list of future screening needs for this patient?	Yes	Click To Complete

2. Click below to calculate which Medicare Preventive Exam for which the patient qualifies.

Calculate Code Eligibility

*You may NOT bill for any Medicare Preventive Exams as you have not met all of the criteria listed above.
You may NOT bill for any Medicare Preventive Exams for this patient as it appears they do not qualify.*

OK Cancel

When you deploy the “**Click to Complete**” button next to the “visual acuity” element of the Medicare Preventive exam, you are taken to the template in SETMA’s EMR where the visual acuity is documented. See below in green.

The screenshot shows a medical template with various input fields. The 'Visual Acuity' section is highlighted with a red border. It includes a dropdown menu for 'Visual Acuity' (set to 'With Glasses'), a checked radio button for 'No Glasses', and three rows of input fields for visual acuity measurements (e.g., 20 / 20, OS 20 / 20, OD 20 / 20, OU 20 / 20). The 'Return' button at the top right is also visible.

Once you document the visual acuity, click the “return” button at the top right of the template.

This screenshot shows the same medical template as above, but the 'Return' button at the top right is now highlighted with a green border. The 'Visual Acuity' section is no longer highlighted, indicating that the return action has been completed.

This takes you right back to the Medicare Preventive Exams template and now you see that the element in the exam – visual acuity – which was red is now black.

At this point, you click the “**Calculate Code Eligibility**” which is shown on the following template outlined in green.

Medicare Preventive Exams

1. ALL of the items below must be completed to bill for ANY of the Medicare Preventive Exams.

Has the patient's medical and family history been updated/reviewed today?	<input type="checkbox"/> Yes	<input type="button" value="Click To Complete"/>
Has the patient's list of providers been updated/reviewed today?	<input type="checkbox"/> Yes	<input type="button" value="Click To Complete"/>
Have the patient's vital signs been recorded today?	<input type="checkbox"/> Yes	<input type="button" value="Click To Complete"/>
Has the functional assessment been updated/reviewed today?	<input type="checkbox"/> Yes	<input type="button" value="Click To Complete"/>
Has the depression assessment been updated/reviewed today?	<input type="checkbox"/> Yes	<input type="button" value="Click To Complete"/>
Has the fall risk assessment been updated/reviewed today?	<input type="checkbox"/> Yes	<input type="button" value="Click To Complete"/>
Has the patient's code status been documented?	<input type="checkbox"/> Yes	<input type="button" value="Click To Complete"/>
Has the patient's visual acuity been recorded today?	<input type="checkbox"/> Yes	<input type="button" value="Click To Complete"/>
Has either the HEDIS or HQP template been accessed today in order to create a list of future screening needs for the patient?	<input type="checkbox"/> Yes	<input type="button" value="Click To Complete"/>

2. Click below to calculate which Medicare Preventive Exam for which the patient qualifies.

You may bill for a G0438 Medicare Preventive Exam. Click OK to close this template and the G0438 code will be selected for you on the HAT screen.

Don't forget to click Submit on the next screen.

When the resulting eligibility code is an Annual Wellness Visit Initial (G0438) or an Annual Wellness Visit Subsequent (G0439), the following template will appear with the eligible code outlined in green.

Medicare Preventive Exams

1. ALL of the items below must be completed to bill for ANY of the Medicare Preventive Exams.

Has the patient's medical and family history been updated/reviewed today?	<input type="checkbox"/> Yes	<input type="button" value="Click To Complete"/>
Has the patient's list of providers been updated/reviewed today?	<input type="checkbox"/> Yes	<input type="button" value="Click To Complete"/>
Have the patient's vital signs been recorded today?	<input type="checkbox"/> Yes	<input type="button" value="Click To Complete"/>
Has the functional assessment been updated/reviewed today?	<input type="checkbox"/> Yes	<input type="button" value="Click To Complete"/>
Has the depression assessment been updated/reviewed today?	<input type="checkbox"/> Yes	<input type="button" value="Click To Complete"/>
Has the fall risk assessment been updated/reviewed today?	<input type="checkbox"/> Yes	<input type="button" value="Click To Complete"/>
Has the patient's code status been documented?	<input type="checkbox"/> Yes	<input type="button" value="Click To Complete"/>
Has the patient's visual acuity been recorded today?	<input type="checkbox"/> Yes	<input type="button" value="Click To Complete"/>
Has either the HEDIS or HQP template been accessed today in order to create a list of future screening needs for the patient?	<input type="checkbox"/> Yes	<input type="button" value="Click To Complete"/>

2. Click below to calculate which Medicare Preventive Exam for which the patient qualifies.

You may bill for a G0438 Medicare Preventive Exam. Click OK to close this template and the G0438 code will be selected for you on the HAT screen.

Don't forget to click Submit on the next screen.

At this point, click “OK.” This action closes the Medicare Preventive Exam pop-up and the E&M template appears.

With this tool deployed in SETMA's EMR, every patient who is eligible for this service will receive it. It is believed by CMS and SETMA that this will improve care, improve health and will lower cost of care.