



The Initial Preventive Physical Examination

Promoting Good Health Through Disease Prevention and Detection 3/25/2025

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Objective

Provide an overview of the IPPE

Encourage providers to promote and educate beneficiaries in life-saving preventive services and screenings

Assist providers in billing for IPPE so claim denials may be avoided





Today's Presenters

- Provider Outreach and **Education Consultants**
 - Jeanine Gombos, LPN
 - Andrea Freibauer











Agenda

- Preventive Services Overview
- IPPE Coverage, Components and Billing
- IPPE FAQs
- Resources and References
- Questions







Preventive Services Overview

Preventive Services Overview

- CMS recognizes the importance of disease prevention, early detection and lifestyle modifications that support the health of Medicare beneficiaries
- Medicare pays for over 30 preventive benefits, including
 - Shots and vaccines
 - Wellness visits
 - Diabetes-related services
 - Tests and screenings
 - Counseling and therapies
 - Mental health services





Did You Know

 A beneficiary must be enrolled in Medicare Part B to be covered for any Medicare preventive services







Medicare Preventive Services: Quick Reference Chart

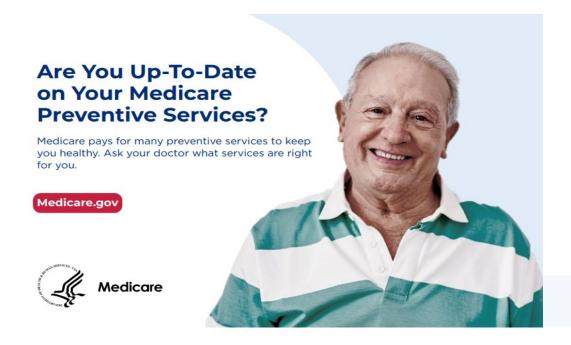
MLN006559 - Medicare Preventive Services





How Can Medicare Beneficiaries Keep Track of Their Preventive Services?

 Are You Up-To-Date on Your Medicare Preventive Services checklist



- One time "Welcome to Medicare" preventive visit—get this visit within the first 12 months you have Medicare Part B (Medical Insurance)
- Yearly "Wellness" visit—get this visit 12 months after your "Welcome to Medicare" preventive visit or 12 months after your Part B coverage starts
- Abdominal aortic aneurysm screenings
- Alcohol misuse screenings & counseling
- Bone mass measurements
- Cardiovascular behavioral therapy
- Cardiovascular disease screenings (cholesterol, lipids, triglycerides)
- □ Cervical & vaginal cancer screenings
- Colorectal cancer screenings
- Counseling to prevent tobacco use & tobaccocaused disease
- COVID-19 vaccines
- Depression screenings

- Diabetes screenings
- Diabetes self-management training
- Flu shots
- Glaucoma screenings
- Hepatitis B shots
- ☐ Hepatitis B Virus (HBV) infection screenings
- Hepatitis C screenings
- HIV (Human Immunodeficiency Virus) screenings
- Lung cancer screenings
- ☐ Mammograms (Breast cancer screenings)
- Medical nutrition therapy services
- Medicare Diabetes Prevention Program
- Obesity behavioral therapy
- Pneumococcal shots
- Prostate cancer screenings
- Sexually transmitted infection screenings & counseling

For more details about Medicare's coverage of preventive services, including your costs in Original Medicare, visit Medicare.gov/publications to view or print the booklet "Your Guide to Medicare Preventive Services."

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Deductible and Coinsurance Waived for Certain Preventive Services

- For DOS on or after 1/1/2011
 - Medicare deductible and coinsurance waived for most preventive services
 - <u>CR 7012</u>, "Waiver of Coinsurance and Deductible for Preventive Services, Section 4104 of Patient Protection and Affordable Health Care Act, Removal of Barriers to Preventive Services in Medicare"





IPPE Coverage, Components and Billing

Background

- Medicare Modernization Act of 2003, Section 611 added IPPE as new Medicare preventive service
 - Also known as "Welcome to Medicare Visit"
 - IPPE is not routine annual physical examination
- Benefits of IPPE
 - Promotes good health for Medicare patients
 - Early identification/detection of disease or risk factors for disease
 - Beneficiary education and counseling
 - May lead to referrals for additional preventive services/screenings



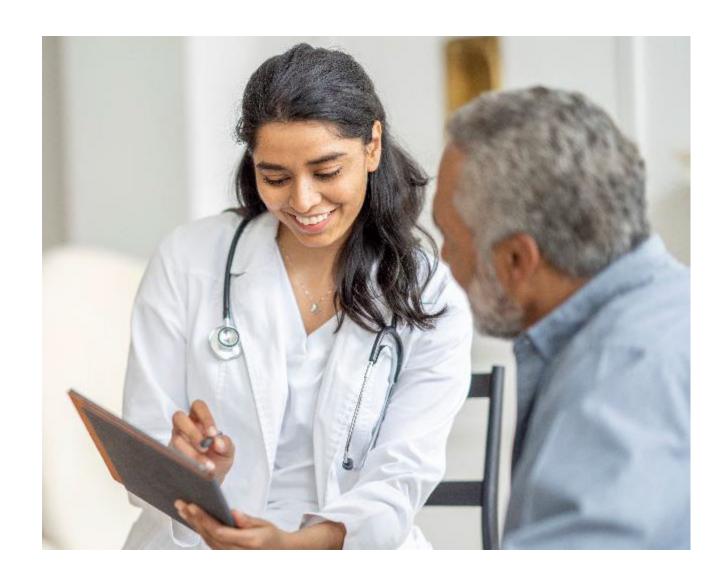
Eligibility and Frequency

- Beneficiaries whose Part B coverage began within past 12 months
- Not eligible for new IPPE if dropped Part B coverage and then later reenrolled
- One exam covered per lifetime
 - Must be performed within 12 months of date beneficiary's coverage begins under Part B



Who Can Perform?

- Physician
- Qualified NPP
 - NP
 - PA
 - CNS





Nine Components of the IPPE

- Must perform and document all components for valid IPPE
 - 1. Review beneficiary's medical and social history
 - 2. Review beneficiary's potential depression risk factors
 - 3. Review beneficiary's functional ability and safety level
 - 4. Exam
 - 5. End-of-life planning, upon patient agreement
 - 6. Review current opioid prescriptions
 - 7. Screen for potential SUDs
 - 8. Educate, counsel, and refer based on previous components
 - 9. Educate, counsel, and refer for other preventive services



1. Review Medical and Social History

- At a minimum, collect
 - Past medical and surgical history (illnesses, hospital stays, operations, allergies, injuries, and treatments)
 - Current medications, supplements, and other substances beneficiary may be using
 - Family history (review beneficiary's family and medical events, including hereditary conditions that place them at increased risk)
 - Diet
 - Physical activities
 - Social activities and engagement
 - Alcohol, tobacco, and illegal drug use history
- Learn information about Medicare's <u>substance use disorder (SUD)</u> <u>services coverage</u>



2. Review Potential Depression Risk Factors

- Depression risk factors include
 - Current or past experiences with depression
 - Other mood disorders
- Use most appropriate depression screening tool
 - Must be one recognized by national professional medical organizations
 - APA's <u>Depression Assessment Instruments</u>





3. Review Functional Ability and Safety Level

- At a minimum, review beneficiary's
 - Ability to perform activities of daily living (ADLs)
 - Fall risk
 - Hearing impairment
 - Home and community safety, including driving when appropriate
- Methods to use
 - Direct patient observation
 - Appropriate screening questions
 - Standardized questionnaires recognized by national professional medical organizations
- Medicare offers <u>cognitive assessment and care plan services</u> for patients who show signs of impairment



4. Exam

- Measure beneficiary's
 - Height
 - Weight
 - BMI (or waist circumference, if appropriate)
 - Blood pressure
 - Balance
 - Gait
- Perform visual acuity screen
- Other measurements deemed appropriate based on medical and social history and current clinical standards



5. End-of-Life Planning

- Verbal or written information physician or practitioner offers beneficiary about
 - Their ability to prepare an advance directive in case an injury or illness prevents them from making their own health care decisions
 - If you agree to follow their advance directive
 - Includes <u>psychiatric advance directives</u>





6. Review Current Opioid Prescriptions

- For beneficiary with current opioid prescription
 - Review any potential OUD risk factors
 - Evaluate pain severity and current treatment plan
 - Provide information about non-opioid treatment options
 - Refer to specialist, as appropriate
 - Medicare covers monthly <u>chronic pain management and treatment services</u>
- HHS Pain Management Best Practices Inter-Agency Task Force Report





7. Screen for Potential SUDs

- Review beneficiary's potential SUD risk factors
 - Refer for treatment as appropriate
- Screening tool can be used, but not required
 - <u>National Institute on Drug Abuse</u> screening and assessment tools
- Implementing Drug and Alcohol Screening in Primary Care

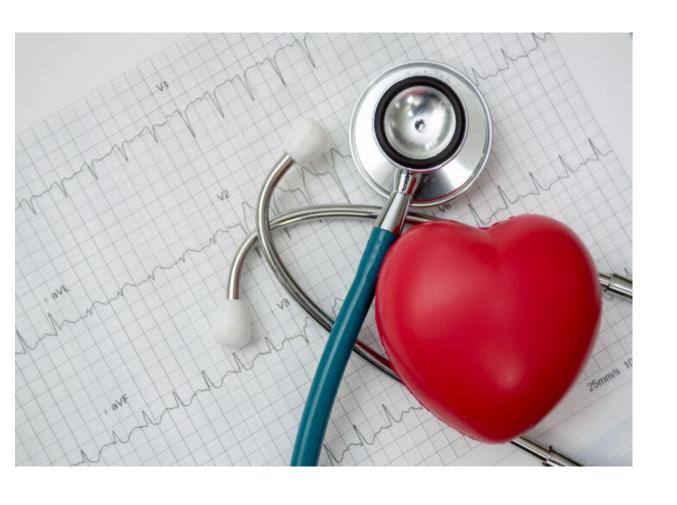




8. and 9. Educate, Counsel and Refer

- Provide beneficiary with appropriate education, counseling, and referrals based on previous components
- Include brief written plan (such as checklist) for beneficiary to receive
 - Once-in-a-lifetime screening ECG, as appropriate
 - Appropriate screenings and other covered preventive services





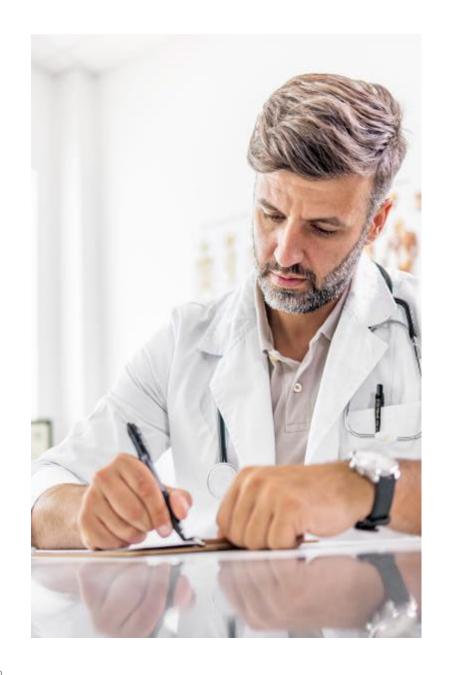
Not Included in IPPE

- Other preventive services covered/paid separately under Medicare Part B
- Technical component of EKG (billed separately to Part B)
 - No separate billing for professional component of EKG



Documentation

- Must show all required components performed
- Appropriate E/M screening tools
- Written medical plan
- Referrals (as applicable)







TOBs

ТОВ	Description	ТОВ	Description
12X	Hospital Inpatient (Part B)	71X	RHC
13X	Hospital Outpatient	77X	FQHC
22X	SNF Inpatient (Part B)	85X	CAH



Billing Requirements

- Line-item billing
 - Appropriate revenue code
 - HCPCS code(s)
 - G0402 IPPE; face-to-face visit for new beneficiaries within first 12 months of Part B enrollment
 - G0403 Routine EKG with 12 leads; performed as screening for IPPE, with interpretation and report
 - G0404 Routine EKG with 12 leads; performed as screening for IPPE, tracing only (no interpretation, no report)
 - G0405 Routine EKG with 12 leads; performed as screening for IPPE, interpretation and report only (no tracing)
 - One (1) unit



Additional Instructions for RHC/FQHC

• RHC

- If only IPPE provided, bill as stand-alone visit
 - Report CG modifier on IPPE line
- If IPPE provided with another billable visit, bill two visits
 - Report modifier CG on additional E/M line
 - Claim generates additional AIR

FQHC

- Report on claim
 - IPPE payment code G0468
 - IPPE qualifying visit HCPCS code G0402
 - Claim generates PPS payment with IPPE adjustment
- Any additional services billed as incident to IPPE
 - No separate payment made



Reporting Modifier 25 on IPPE Claims

- When significant, separately identifiable medically necessary E/M provided in addition to IPPE
 - Use CPT code 99202–99205 or 99211–99215 with modifier 25
 - Does not apply to RHC/FQHC claims
- OPPS hospitals billing for G0402 and G0404
 - Report modifier 25 with G0402



Payment

Facility Type	Methodology		
Hospital (IP, OP, Part B)	OPPS or reasonable cost		
SNF	TC payment made for screening ECG based on MPFS		
RHC	AIR		
FQHC	PPS w/IPPE adjustment		
CAH	All: 101% reasonable cost for technical component Method II: 115% MPFS nonfacility rate for professional component (reported under revenue code 096X, 097X or 098X)		





Beneficiary Cost-Sharing

- IPPE
 - Deductible waived
 - Coinsurance waived
- Screening EKG
 - Deductible applies
 - Coinsurance applies

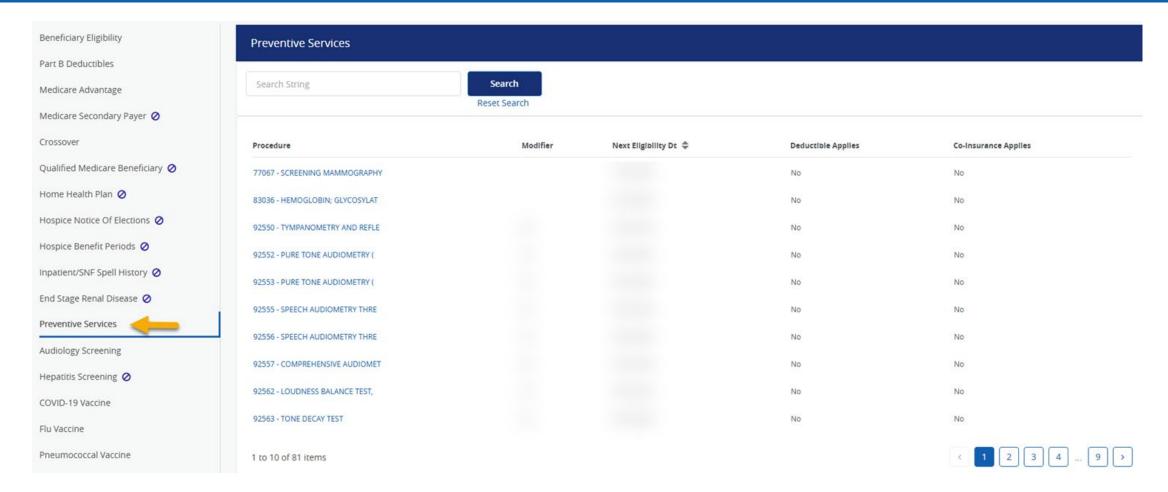


Avoiding IPPE Rejections

- Common rejections
 - IPPE performed outside of first 12 months of Part B coverage
 - Second IPPE billed for same beneficiary
- Verify eligibility using NGSConnex and/or FISS DDE
 - NGSConnex User Guide Preventive Services
 - FISS DDE Provider Online Guide Beneficiary Eligibility



NGSConnex Preventive Services Lookup





FISS DDE Beneficiary Eligibility Lookup

From Inquiries Submenu (01) choose Beneficiary/CWF (10)

```
MAP1702
                   NATIONAL GOVERNMENT SERVICES, #13001 UAT
                                                             ACMFA561 08/08/23
MXG9282
                              INQUIRY MENU
                                                             A20233CP 14:25:57
      BENEFICIARY/CWF
                                    ZIP CODE FILE
                                                             19
      DRG (PRICER/GROUPER)
                                    OSC REPOSITORY INQUIRY
      CLAIM SUMMARY
                                    CLAIM COUNT SUMMARY
                                                             56
      REVENUE CODES
      HCPC CODES
                                    ANSI REASON CODES
      DX/PROC CODES ICD-9
                                    CHECK HISTORY
      ADJUSTMENT REASON CODES 16
                                    DX/PROC CODES ICD-10
      REASON CODES
                                    CMHC PAYMENT TOTALS
                                                             1C
                                    PROV PRACTICE ADDR QUER
      INVOICE NO/DCN TRANS
                                    NEW HCPC SCREEN
                                                             1F
  ENTER MENU SELECTION:
    PLEASE ENTER DATA - OR PRESS PF3 TO EXIT
```



FISS DDE Beneficiary Eligibility Lookup

- From initial Eligibility Detail Inquiry screen
 - Enter MBI and hit enter
 - Press PF8 to scroll through various screens until reach Preventive Services screens
 - MAP175J and MAP175M









Eligibility Detail Inquiry Screen

```
MAP1751
                    NATIONAL GOVERNMENT SERVICES #06101 UAT
                                                                ACMFA621 02/27/25
PXK1325
          sc
                            ELIGIBILITY DETAIL INQUIRY
                                                                A20252BB 06:34:27
MID
                     CURR XREF HIC
                                                   PREV XREF HIC
TRANSFER HIC
                                 C-IND
                                             LTR DAYS
LN
                          FΝ
                                               MI
                                                     SEX
                           ELIG FROM
                                                ELIG THRU
DOB
              DOD
                                              2
4
6
ADDRESS: 1
         5
     ZIP:
                          CURRENT ENTITLEMENT
PART A EFF DT
                       TERM DT
                                       PART B EFF DT
                                                              TERM DT
 CURRENT
                          BENEFIT PERIOD DATA
FRST BILL DT
                       LST BILL DT
                                            HSP FULL DAYS
                                                              HSP PART DAYS
                  SNE PART DAYS
SNF FULL DAYS
                                     INP DED REMAIN
                                                                BLD DED PNTS
                          PSYCHIATRIC
PSY DAYS REMAIN
                      PRE PHY DAYS USED
                                                                  INTRM DT IND
                                              PSY DIS DT
    PLEASE ENTER DATA - MID, LN, FN, SEX, DOB AND ELIG FROM/THRU.
PRESS PF3-EXIT PF8-NEXT PAGE
```



FISS DDE Beneficiary Eligibility Lookup

- All eligibility fields will report
 - Next eligible date when applicable
 - Start date of benefit if service not utilized by beneficiary to date
- If eligibility date not available, will show three or four position alpha code to indicate reason why
 - PTB Beneficiary not entitled to Part B
 - RCVD Beneficiary already received service
 - DOD Beneficiary not eligible due to DOD
 - GDR Beneficiary not eligible due to gender
 - AGE Beneficiary not eligible due to age
 - SRV Beneficiary not eligible for the service
 - VAC Beneficiary already vaccinated
 - 0000 Service not applicable





FISS DDE Preventive Services Screen MAP175J

```
MAP175J
                     NATIONAL GOVERNMENT SERVICES #06101 UAT
 PXK1325
           SC
                                      ACCEPTED
                                                                 A20252BB 06:47:01
 MID
                       NM
                                           DB
                                                          SX
PRVN SERVC TECH D PROF D
                                            D PROF D
                                                         AAA /
CARD/82465 080109
                  080109
                                               080109
           080109
                                               010124
                            PROS/G0103 080109
                            PAPT/00091 080109
                                               080109
                                                         IPPE/G0405 080109 080109
                            GLAU/
                                        080109 080109
                                                         PULM/G0424 0072
                                                                            0072
                                                                    0000
                                                                            0000
                  080109
                                        080109 080109
                                                         CR
                            PAPT/
                                        080109 080109
                                                         ICR
                                                                     0000
                                                                            0000
                                                             /G0438 0000
                   TERM
                            HIBC/G0445 110811 110811
                                                                            010111
           080109 080109
                                        092816 092816
                                                         AWV /G0439 0000
                                                                            010111
                                                         BEHV/G0447 112911 112911
    /82270 080109 080109
                            SETS/93668 0072
                            CCBB/G0327
                                        080124
                                                         APRP/G0465
                   SRV
IPPE/G0366 SRV
                   SRV
                            AUDG/
                                        070123 070123
                   0000
                            HIVP/
                                               093024
IPPE/G0368 0000
                   SRV
                            HIVS/
                                               093024
DIAB/82947 080109 080109
                            HPBV/
                                               093024
DIAB/82950 080109 080109
       PROCESS COMPLETED
                                 PLEASE CONTINUE
                 PF6-SCROLL FWD
                                 PF7-PREV PAGE
                                                 PF8-NEXT PAGE
```





FISS DDE Preventive Services Screen MAP175M

```
MAP175M
                     NATIONAL GOVERNMENT SERVICES #06101 UAT
 PXK1325
                                     ACCEPTED
           sc
                                                                A20252BB 06:48:35
 MID
                       NM
                                          DΒ
                                                         SX .
                            PRVN SERVC TECH D PROF D
                                                        PRVN SERVC TECH D PROF D
    SERVC TECH D PROF D
                            BONE/77085 080109 080109
                            COCS/
                                       100914
                            LDCT/G0297 AGE
                                              AGE
                            HPVS/G0476 AGE
                                       041315 SRV
                            BONE/0508T 080109 080109
                            BONE / 0554T
          010111 010111
                  101411
                            BONE / 0558T
                            ABPM/93784 070219 070219
BONE / 77078 080109
                                       012120 012120
                                               AGE
                            LDCT/71271 AGE
HCAS/G0472 060214 060214
                                 PLEASE CONTINUE
                PF5-SCROLL BKWD PF7-PREV PAGE
                                                  PF8-NEXT PAGE
```





- Is the IPPE the same as a patients yearly physical?
 - No. The IPPE isn't a routine physical that some patients may get periodically from their physician or other qualified nonphysician practitioner (NPP)
 - The IPPE is an introduction to Medicare and covered benefits, and it focuses on health promotion, disease prevention and detection to help patients stay well. We encourage providers to inform patients about the AWV during their IPPE
 - The <u>Social Security Act</u> explicitly prohibits Medicare coverage of routine physical exams



Are clinical lab tests part of the IPPE?

No. The IPPE doesn't include clinical lab tests, but you may make appropriate referrals for these tests as part of the IPPE





 Does the deductible, coinsurance, or copayment apply for the IPPE?

No. We waive the coinsurance, copayment, and Part B deductible for the IPPE (HCPCS code G0402)

Neither is waived for the screening electrocardiogram (ECG) (HCPCS codes G0403, G0404 or G0405)



• If a patient enrolls in Medicare in 2024, can they get the IPPE in 2025 if it wasn't performed in 2024?

A patient who hasn't had an IPPE and whose Part B enrollment began in 2024 can get an IPPE in 2025 if it's within 12 months of the patient's Part B enrollment effective date

Make sure you verify beneficiary eligibility for an IPPE before performing



Resources and References

CMS Resources and References

- Preventive Services
- MLN Educational Tool®: <u>MLN006559 Medicare Preventive</u> <u>Services</u>
- MLN Educational Tool®: MLN6775421 Medicare Wellness Visits
- CMS IOM Publications
 - 100-02, Medicare Benefit Policy Manual, Chapter 15, Section 280, Preventive and Screening Services
 - 100-04, Medicare Claims Processing Manual, Chapter 18, Preventive and Screening Services
 - Section 80 Initial Preventive Physical Examination (IPPE)
- MCD Search



NGS Resources and References

- NGS website
 - Education > Specialties > Preventive Services
 - Links to CMS references
 - Subscribe to NGS Email Updates
 - News
 - Events
 - Provider Contact Center



Resources and References - Beneficiaries

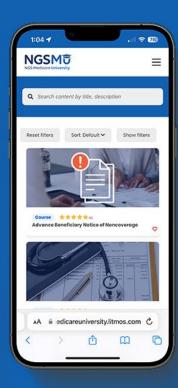
- Medicare.gov
 - Preventive Services
 - Are You Up-To-Date on Your Medicare Preventive Services checklist
- Medicare & You: Medicare's Preventive Benefits YouTube











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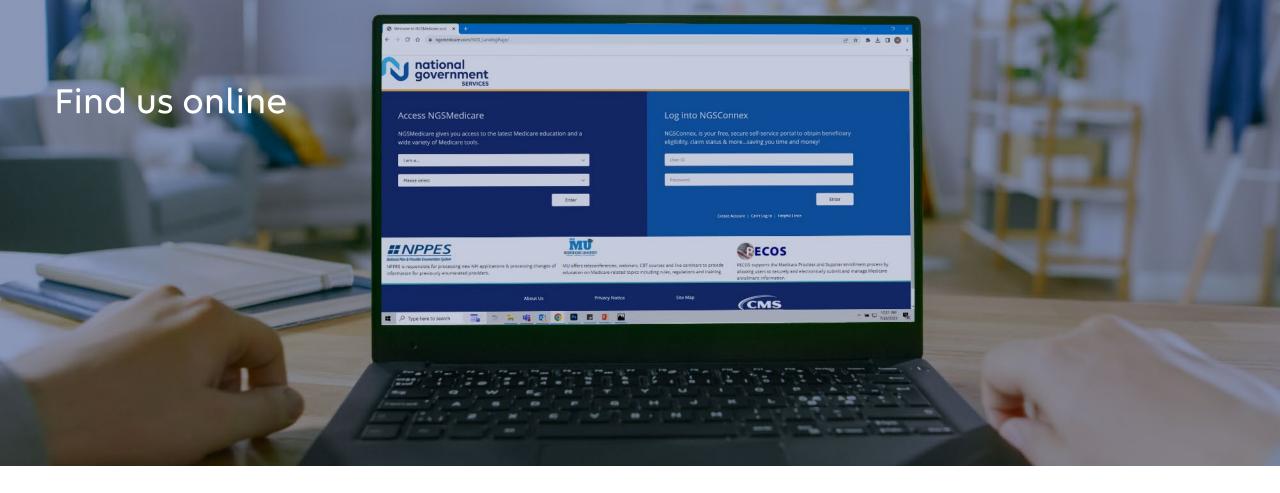














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Online resources, event calendar, LCD/NCD, and tools



IVR System

The interactive voice response system (IVR) is available 24-hours a day, seven days a week to answer general inquiries



NGSConnex

Web portal for claim information



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Questions?

Thank you!