

## Internal Medicine Coding Alert

### Reader Questions: EKG Essential on 'Welcome to Medicare' Claims

Question: I am confused about coding for "Welcome to Medicare" (WTM) exams. How can I tell if the internist satisfied all of the requirements for the code?

Minnesota Subscriber

Answer: It is important to note that WTM exams are much less frequent and more involved than standard preventive medicine services. Patients can only receive the exam once per lifetime, and it has to happen in the first six months of the patient's Medicare enrollment.

Also, in order to report G0344 (Initial preventive physical examination; face-to-face visit, services limited to new beneficiary during the first six months of Medicare enrollment), the internist needs to provide the following for the patient during the encounter:

- a medical, family and social history
- a depression screening
- a review of the patient's functional ability and safety level
- a physical exam
- education, counseling and referral based on exam results
- a written plan recommending screening or preventive services for the patient
- an electrocardiogram (EKG). If the internist does not perform the test, he must order it and document the results on the medical chart.

EKG alert: If the internist performs the EKG in the office using his own equipment, you can report G0366 (Electrocardiogram, routine ECG with at least 12 leads; with interpretation and report, performed as a component of the initial preventive physical examination) in addition to G0344.

If he only performs the EKG tracing, report G0367 (Tracing only, without interpretation and report, performed as a component of the initial preventive examination) with G0344. When the internist supplies interpretation and report only, report G0368 (Interpretation and report only, performed as a component of the initial physical examination) with G0344.

Note: For WTM exams, Medicare payers are looking for two codes to ensure that the physician performed all the exam's components: G0344 for the examination and counseling components, and G0366-G0368 for the EKG. Some Medicare payers may deny a claim with G0344 as the sole code.