

Part B Insider (Multispecialty) Coding Alert

CCI: Several Medicare Screenings Now Bundle Into E/M Visits

But CCI 18.2 does allow a modifier when medically necessary, separate procedures are performed.

The CCI released version 18.2, effective July 1, 2012, revealing 2,521 new active pairs and 88 code pair deletions, said **Frank D. Cohen, MPA, MBB**, senior analyst with The Frank Cohen Group, LLC, in his analysis of the changes. Of the over 2,500 new pairings, 122 had a retroactive effective date of January 1, 2012 while the remaining 2399 went into effect on July 1. All of the code bundle deletions were effective June 30.

Medicare 'G' Codes in the Spotlight

If your physician sees a patient and you want to report an office visit (99201-99215, 99217-99219, 99231-99239) in addition to the following screening, therapy, and counseling G codes -- be forewarned. You have new edits preventing you from doing just that.

Be aware that the following G codes are column 2 codes to the above mentioned E/M codes:

- G0442 -- Annual alcohol misuse screening, 15 minutes
- G0443 -- Brief face-to-face behavior counseling for alcohol misuse, 15 minutes
- G0445 -- High-intensity behavioral counseling to prevent sexually transmitted infections, face-to-face, individual, includes: education, skills training, and guidance on how to change sexual behavior, performed semi-annually, 30 minutes
- G0446 -- Annual face-to-face intensive behavioral therapy for cardiovascular disease, individual, 15 minutes
- G0447 -- Face-to-face behavioral counseling for obesity, 15 minutes.

Notable absent from this list is new preventive code G0444 (Annual depression screening, 15 minutes). However, although this code does not bundle into office visit codes such as 99201-99215, it does bundle into the initial annual wellness visit code G0438 and the Welcome-to-Medicare exam code G0402.

In all of these cases, the modifier indicator is \"1,\" meaning you can separate these edits with a modifier, such as modifier 25 (Significant, separately identifiable evaluation and management service by the same physician on the same day of the procedure or other service). However, you must have documentation to substantiate breaking this edit.

For tips on how to differentiate \"separately identifiable\" procedures, read \"Procedures Are Bundled? In Some Cases You Can Still Bill Them Together\" on page 202.