

Part B Insider (Multispecialty) Coding Alert

Counseling: Can You Bill For A Get-To-Know-You Visit?

Don't bill the patient for a marketing service, expert warns

A new patient is thinking of moving over to your practice, but she wants to meet the physician first to make sure it's a good fit. Can you bill for this visit?

Some physicians would like to. After all, it's 20 to 30 minutes of the physician's time. But billing for this service can be tricky at best.

"What's the medical necessity of the visit?" asks **Devona Slater**, consultant with **Auditing for Compliance and Education** in Leawood, KS. "It's really a marketing service."

You may be able to [bill for the service](#) using preventive medicine codes 99401-99404, notes **George Ward**, billing supervisor with **South Of Market Health Care** in San Francisco. But Medicare and many other payers don't reimburse those codes, Ward adds. And Slater questions whether this service even qualifies as preventive care.

If you're determined to obtain payment for this service, you'll have to convince the patient to sign an advance beneficiary notice (ABN) and pay for the visit out-of-pocket, Ward warns.

Beware: "Do you charge to market to your patients?" asks Slater. "If you want to charge people to become a patient, that's your right," but this may be an unpopular stance.

Consider 3 Solutions

1. If the physician does decide to meet with the patient for free, then you should establish a regular charge for the service and then waive it, says Ward. That way, your records won't look as though the physician is providing services for free on an arbitrary basis.
2. The best approach is to perform some kind of history, exam and medical decision-making, Slater says. For example, if the patient has prescriptions that need to be renewed, the doctor needs to perform a medical evaluation before writing a prescription - and then you can bill for the service.
3. If the doctor talks to the patient about a chronic illness or recurring problem, then you may be able to bill for it under counseling and coordination of care, says consultant **Maxine Lewis** with **Medical Coding Reimbursement Management** in Cincinnati. In that case, you have to document how long the visit took and how much time the doctor spent discussing the problem.