

## Part B Insider (Multispecialty) Coding Alert

### Part B Revenue Booster: Collect for New Medicare Preventive Services With These 'G' Code Additions

**Services became payable within the last two months, so you can begin billing MACs for them.**

Eager to begin seeing Medicare patients for the newly-sanctioned alcohol misuse visits, cardiovascular screens, and depression screenings? Now you can collect for these services with some freshly-issued 'G' codes that MACs began accepting recently.

Background: Primary care providers can now collect for an annual alcohol misuse screening at no cost to the patient. If the screening turns up positive for alcohol misuse, Medicare will cover four behavioral counseling sessions each year to treat the alcohol issues. In addition, CMS estimates that one in six people age 65 and older suffers from depression. To that end, Medicare now covers annual screening for depression by primary care practices.

#### Consider These Alcohol Screening Payment Specs

CMS covers annual alcohol screening for beneficiaries who meet the following criteria, according to MLN Matters article MM7633.

- Patients who misuse alcohol, but "whose levels or patterns of alcohol consumption do not meet criteria for alcohol dependence (defined as at least three of the following: tolerance, withdrawal symptoms, impaired control, preoccupation with acquisition and/or use, persistent desire or unsuccessful efforts to quit, sustains social, occupational, or recreational disability, use continues despite adverse consequences); and
- Competent and alert at the time of counseling; and
- Counseling is furnished by qualified primary care physicians "or other primary care practitioners in a primary care setting."

During the annual screening visit, which took effect on Oct. 14, you'll report new code G0442 (Annual alcohol misuse screening, 15 minutes). Patients who qualify for follow-up alcohol misuse counseling will be billed using G0443 (Brief face-to-face behavior counseling for alcohol misuse, 15 minutes).

#### Look to G0444 for Depression Screening

Effective Oct. 14, Medicare now reimburses depression screenings for Medicare patients, and you'll report G0444 (Annual depression screening, 15 minutes) to your MAC for this service. Although CMS does not recommend any particular depression screening tools, the agency advises that the tool used is left to the discretion of the primary care clinician.

You can collect for depression screening once every 12 months per beneficiary, CMS says in Transmittal 2359.

#### Cardiovascular Screening? Turn to G0446

Primary care practitioners can also collect for free annual cardiovascular disease prevention visit to all beneficiaries effective Nov. 8, 2011.

Under the new coverage limitations, CMS will cover the free intensive cardiovascular risk reduction visit, which includes the following three components:

- Encouraging aspirin use for preventing cardiovascular disease "when the benefits outweigh the risks for men age 45-79 years and women 55-79 years"

- Screening for high blood pressure in adults age 18 years and older
- Intensive behavioral counseling to promote a healthy diet in patients with hyperlipidemia, hypertension, advancing age, and other risk factors for cardiovascular and diet-related chronic disease issues

You'll report G0446 (Annual face-to-face intensive behavioral therapy for cardiovascular disease, individual, 15 minutes) for this service, according to CMS transmittal 157, published on Nov. 23.