G0438 & G0439

ANNUAL WELLNESS VISIT

FACT SHEET

Description

CPT Codes

- G0438 Annual wellness visit, includes a personalized prevention plan of service (PPPS), first visit
- G0439 Annual wellness visit, includes a personalized prevention plan of service (PPPS), subsequent visit

Medicare Billing

First annual wellness visit (only one initial AWV per beneficiary per lifetime).

Medical Necessity

Medicare covers an eligible beneficiary who is no longer within 12 months after the effective date of their first Medicare Part B coverage period and who has not received either an initial preventive physical examination or an annual wellness visit providing a personalized prevention plan within the past 12 months by a healthcare professional:

- A physician who is a Doctor of Medicine or osteopathy
- A physician assistant, nurse practitioner, or clinical nurse specialist
- A medical professional (including a health educator, a registered dietitian, or nutrition professional, or other licensed practitioner) or a team of such medical professionals, working under the direct supervision (as defined in §410.32(b)(3)(ii)) of a physician.

First annual wellness visit providing personalized prevention plan services means the following services furnished to an eligible beneficiary by a health professional that include, and take into account the results of, **a self-reported health risk assessment**.

Health risk assessment means, for the purposes of this section, an evaluation tool that meets the following criteria:

i. Collects self-reported information about the beneficiary
ii. Can be administered independently by the beneficiary or administered by a health professional prior to or as part of the AWV encounter
iii. Is appropriately tailored to and takes into account the communication needs of populations, persons with limited English proficiency, and persons with health literacy needs
iv. Takes no more than 20 minutes to complete
v. Addresses, at a minimum, the following topics:

A. Demographic data, including but not limited to age, gender, race, and ethnicity
B. Self-assessment of health status, frailty, and physical functioning
C. Psychosocial risks, including but not limited to, depression/life satisfaction, stress, anger, loneliness/social isolation, pain, and fatigue
D. Behavioral risks, including but not limited to, tobacco use, physical activity, nutrition and oral health, alcohol consumption, sexual health, motor vehicle safety (seat belt use), and home safety
E. Activities of daily living (ADLs), including but not limited to, dressing, feeding, toileting, grooming, physical ambulation (including balance/risk of falls), and bathing
F. Instrumental activities of daily living (IADLs), including but not limited to, shopping, food preparation, using the telephone, housekeeping, laundry, mode of transportation, responsibility for own medications, and ability to handle finances

Review of the individual's functional ability and level of safety means, at minimum, assessment of the following topics:

i. Hearing impairment
ii. Ability to successfully perform activities of daily living
iii. Fall risk
iv. Home safety

A subsequent *annual wellness visit providing personalized prevention plan services* means the following services furnished to an eligible beneficiary by a health professional that include, and take into account the results of, a self-reported health risk assessment.

This Fact Sheet is for informational purposes only and is not intended to guarantee payment for services, all services submitted to Medicare must meet Medical Necessity guidelines. The definition of "medically necessary" for Medicare purposes can be found in Section 1862(a)(1)(A) of the Social Security Act – Medical Necessity (http://www.ssa.gov/OP_Home/ssact/title18/1862.htm).

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Supporting Documentation

1. Beneficiary's name
2. Date of service (DOS)
3. Progress Notes from provider supporting indication/medical necessity including:
    a. Medical and family history
    b. Use of medications and supplements
    c. List of providers and suppliers
    d. Cognitive Assessment
    e. Depression Screening
    f. Functional ability and safety
    g. Establish screening schedule for beneficiary testing
    h. Establish list of risk factors and conditions
    i. Educational counseling programs for health risks
4. For subsequent annual wellness visits Progress Notes from provider establishing
    a. Review (and administration, if needed) of an updated health risk assessment
    b. Updated medical and family history
    c. List of providers and suppliers
    d. Use of medications and supplements
    e. Cognitive Assessment
    f. Depression Screening
    g. Functional ability and safety screening schedule for beneficiary testing
    h. List of risk factors and conditions
    i. Educational counseling programs for health risks
5. Appropriate signatures and credentials of person rendering the services

Appropriate Signatures

- Signature and credentials of person performing the service must meet CMS requirements
- Amendments/corrections/delayed entries are properly identified

For more information regarding signature requirements, please view the following resources:

- CGS Administrators, LLC, J15 Part B Medical Review https://www.cgsmedicare.com/partb/mr/signatures.html
- https://www.cgsmedicare.com/partb/cert/signatures.pdf
- CMS MLN Fact Sheet, *Complying with Medicare Signature Requirements*.
- https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/downloads/signature_requirements_fact_sheet_icn905364.pdf
- CMS IOM Pub. 100-08, Medicare Program Integrity Manual, Chapter 3, Section 3.3.2.4, *Signature Requirements*. https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/pim83c03.pdf

References

- CMS IOM Pub. 100-04, Chapter 12, Sections 30.6.1.1, 30.6.6 and 100.1.1.C: https://www.cms.gov/regulations-and-guidance/guidance/manuals/downloads/clm104c12.pdf
- CMS IOM Pub. 100-04, Chapter 18, Section 140: https://www.cms.gov/regulations-and-guidance/guidance/manuals/downloads/clm104c18pdf.pdf
- CMS IOM Pub. 100-02, Medicare Benefit Policy Manual, Chapter 15: https://www.cms.gov/regulations-and-guidance/guidance/manuals/downloads/bp102c15.pdf
- MLN6775421 – Medicare Wellness Visits: https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/preventive-services/medicare-wellness-visits.html