

Billing Codes Information

HCPCS codes for preventative visits

G0402-Initial Preventative Physical Examination (IPPE) AKA “Welcome to Medicare” visit

This code is to be used when services are provided during the first 12 months the patient is enrolled in Medicare part B. The deductible and coinsurance are waived.

G0403-Electrocardiogram, routine, 12 leads, with interpretation and report.

This is performed as screening for the initial preventative and physical exam.

G0404-Electrocardiogram, routine, 12 leads, tracing only, without interpretation And report.

This is performed as screening for the initial preventative and physical exam.

G0405-Electrocardiogram, routine, 12 leads, interpretation and report only

This is performed as screening for the initial preventative and physical exam.

G0438-Annual Wellness Visit (AWV) includes a personalized prevention plan

This code can only be used for a beneficiary who is no longer within the first 12 months after the effective date of part B coverage and if he/she has not already received IPPE or AWV within the last 12 months. Medicare pays for only one Initial AWV per beneficiary per lifetime and all other subsequent wellness visits need to be billed as Subsequent Annual wellness visits.

G0439-Subsequent Annual Wellness visit, includes personalized Prevention plan

This code is to be used subsequent to the submission of initial Annual Wellness Visit, even if the patient switches to a new doctor.

E&M service during the same encounter as IPPE or AWV

When a physician provides a significant, separately identifiable medically necessary E&M service in addition to IPPE or AMV, CPT codes 99201-99215 can be reported depending on the clinically appropriate exam and services. CPT code modifier 25 must be appended to medically necessary E&M service identifying this service as significant, separately identifiable service from IPPE or AWV code reported.