



QUICK REFERENCE INFORMATION:

The ABCs of Providing the Initial Preventive Physical Examination

The goals of the Initial Preventive Physical Examination (IPPE), also known as the "Welcome to Medicare Preventive Visit," are health promotion and disease prevention and detection. This document explains the components included in the IPPE. You must provide, or provide and refer, all components of the IPPE prior to submitting a claim for the IPPE.

Components of the IPPE

A CQUIRE BENEFICIARY HISTORY	ELEMENTS
1. Review of the beneficiary's medical and social history	 At a minimum, obtain the following: Past medical/surgical history (experiences with illnesses, hospital stays, operations, allergies, injuries, and treatments); Current medications and supplements (including calcium and vitamins); Family history (review of medical events in the beneficiary's family, including diseases that may be hereditary or place the beneficiary at risk); History of alcohol, tobacco, and illicit drug use; Diet; and Physical activities.
2. Review of the beneficiary's potential risk factors for depression and other mood disorders	Use any appropriate screening instrument for persons without a current diagnosis of depression recognized by national professional medical organizations to obtain current or past experiences with depression or other mood disorders.
 Review of the beneficiary's functional ability and level of safety 	Use any appropriate screening questions or standardized questionnaires recognized by national professional medical organizations to review, at a minimum, the following areas: Hearing impairment, Activities of daily living, Falls risk, and Home safety.

B EGIN EXAMINATION	ELEMENTS
4. An examination	Obtain the following: Height, weight, and blood pressure; Visual acuity screen; Measurement of body mass index; and Other factors deemed appropriate based on the beneficiary's medical and social history and current clinical standards.
5. End-of-life planning	 End-of-life planning is a required service, upon the beneficiary's consent. End-of-life planning is verbal or written information provided to the beneficiary regarding: The beneficiary's ability to prepare an advance directive in the case that an injury or illness causes the beneficiary to be unable to make health care decisions, and Whether or not the physician is willing to follow the beneficiary's wishes as expressed in the advance directive.

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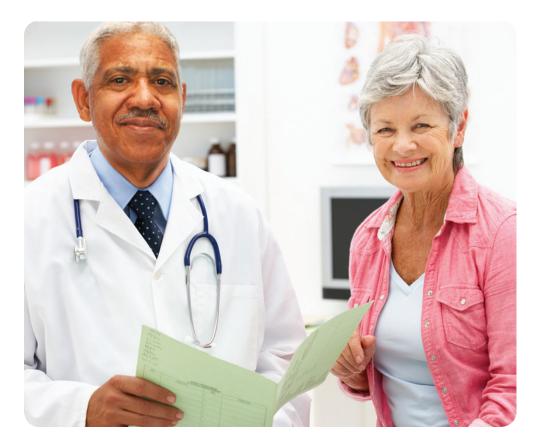
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Components of the IPPE (cont.)

	C OUNSEL BENEFICIARY	ELEMENTS
	 6. Education, counseling, and referral based on the previous five components 	Based on the results of the review and evaluation services provided in the previous five components, provide education, counseling, and referral as appropriate.
C	7. Education, counseling, and referral for other preventive services	Includes a brief written plan, such as a checklist, to be given to the beneficiary for obtaining a screening electrocardiogram (EKG), as appropriate, and the appropriate screenings and other preventive services that are covered as separate Medicare Part B benefits. (See below for a list of Medicare-covered preventive services.)

MEDICARE PART B PREVENTIVE SERVICES	
Annual Wellness Visit (AWV) NOTE: A beneficiary who is currently eligible for the IPPE is not yet eligible for an AWV.	Intensive Behavioral Therapy (IBT) for Obesity (effective November 29, 2011)
Bone Mass Measurements	Medical Nutrition Therapy (MNT)
Cardiovascular Screening Blood Tests	Prostate Cancer Screening
Colorectal Cancer Screening	Seasonal Influenza, Pneumococcal, and Hepatitis B Vaccinations and their Administration
Counseling to Prevent Tobacco Use for Asymptomatic Patients	Screening and Behavioral Counseling Interventions in Primary Care to Reduce Alcohol Misuse (effective October 14, 2011)
Diabetes Screening Tests	Screening for Depression in Adults (effective October 14, 2011)
Diabetes Self-Management Training (DSMT)	Screening Mammography
Glaucoma Screening	Screening Pap Tests and Pelvic Examination
Human Immunodeficiency Virus (HIV) Screening	Sexually Transmitted Infections (STIs) Screening and High Intensity Behavioral Counseling (HIBC) to Prevent STIs (effective November 8, 2011)
IBT for Cardiovascular Disease (effective November 8, 2011)	Ultrasound Screening for Abdominal Aortic Aneurysm (AAA)





Notes on Medicare Part B Preventive Services

A Medicare beneficiary with certain risk factors for AAAs may receive a referral, if appropriate, for a one-time preventive ultrasound screening for the early detection of AAAs. **Important:** Eligible beneficiaries must receive a referral for an ultrasound screening for AAA as a result of an IPPE.

Use the following Healthcare Common Procedure Coding System (HCPCS) codes, listed in the table below, when filing claims for the IPPE.

IPPE HCPCS CODES	BILLING CODE DESCRIPTIONS
G0402	Initial preventive physical examination; face-to-face visit, services limited to new beneficiary during the first 12 months of Medicare enrollment
G0403	Electrocardiogram, routine ECG with 12 leads; performed as a screening for the initial preventive physical examination with interpretation and report
G0404	Electrocardiogram, routine ECG with 12 leads; tracing only, without interpretation and report, performed as a screening for the initial preventive physical examination
G0405	Electrocardiogram, routine ECG with 12 leads; interpretation and report only, performed as a screening for the initial preventive physical examination

Who Is Eligible to Receive the IPPE?

Medicare covers an IPPE for all newly enrolled beneficiaries who receive the IPPE within the first 12 months after the effective date of their first Medicare Part B coverage period. This is a one-time benefit.

Preparing Eligible Medicare Beneficiaries for the IPPE

Providers can help eligible Medicare beneficiaries get ready for their IPPE by encouraging them to come prepared with the following information:

- Medical records, including immunization records;
- Family health history, in as much detail as possible; and
- A full list of medications and supplements, including calcium and vitamins how often and how much of each is taken.

Frequently Asked Questions

Who may perform the IPPE?

Either a physician (a doctor of medicine or osteopathy) or a qualified non-physician practitioner (a physician assistant, nurse practitioner, or certified clinical nurse specialist) must furnish the IPPE.

Is the IPPE the same as a beneficiary's yearly physical?

No, the IPPE is not a "routine physical checkup" that some seniors may receive every year or two from their physician or other qualified non-physician practitioner. For a newly enrolled beneficiary, the IPPE is an introduction to Medicare and covered benefits, and focuses on health promotion and disease prevention and detection to help beneficiaries stay well. Medicare does not cover routine physical examinations.

Are clinical laboratory tests part of the IPPE?

No, the IPPE does not include any clinical laboratory tests, but you may want to make referrals for such tests as part of the IPPE, if appropriate.

Do deductible or coinsurance/copayment apply for the IPPE?

No, coverage for the IPPE is provided as a Medicare Part B benefit. Medicare waives both the coinsurance or copayment and the Medicare Part B deductible for the IPPE (HCPCS code G0402). Neither is waived for the screening EKG (HCPCS codes G0403, G0404, or G0405).

If a beneficiary enrolled in Medicare in 2011, can be or she have the IPPE in 2012 if it was not performed in 2011?

A beneficiary, who has not yet had an IPPE and whose initial enrollment in Medicare Part B began in 2011, is eligible for an IPPE in 2012, as long as it is done within 12 months of the beneficiary's first Medicare Part B enrollment effective date.

Can I bill a separate Evaluation and Management (E/M) service at the same visit as the IPPE?

Medicare may pay for a significant, separately identifiable medically necessary E/M service (Current Procedural Terminology [CPT] codes 99201 – 99215) billed at the same time as the IPPE when billed with modifier -25. That portion of the visit must be medically necessary to treat the beneficiary's illness or injury, or to improve the functioning of a malformed body member.

Which diagnosis code should I use for the IPPE?

You must report a diagnosis code; however, the Centers for Medicare & Medicaid Services (CMS) does not require a specific diagnosis code for the IPPE. Therefore, you may choose any appropriate diagnosis code.

Resources

Resources				
RESOURCE	WEBSITE			
"The Guide to Medicare Preventive Services"	http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/ Downloads/mps_guide_web-061305.pdf			
"Medicare Benefit Policy Manual" – Publication 100-02	Chapter 15 http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/bp102c15.pdf			
"Medicare Claims Processing Manual" – Publication 100-04	Chapter 12, Section 30.6.1.1 http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/clm104c12.pdf Chapter 18, Section 80 http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/clm104c18.pdf			
Medicare Learning Network [®] (MLN) Guided Pathways to Medicare Resources	The MLN Educational Web Guides MLN Guided Pathways to Medicare Resources help providers gain knowledge on resources and products related to Medicare and the CMS website. For more information about preventive services, refer to the "Coverage of Preventive Services" section in the "MLN Guided Pathways to Medicare Resources – Basic Curriculum for Health Care Professionals, Suppliers, and Providers" booklet at http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNEdWebGuide/Downloads/Guided_Pathways_Basic_Booklet.pdf on the CMS website.			
MLN Matters [®] Article MM6223, "Update to the Initial Preventive Physical Examination (IPPE) Benefit"	http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/ Downloads/MM6223.pdf			
Preventive Services MLN Page	http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/ PreventiveServices.html			



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