4 ways to make Medicare's wellness codes work for your practice

By Debra Beaulieu-Volk

The now three-year-old codes for Medicare's annual wellness visit "look good on paper, [but] they don't work out in practice," Paul Speckart, M.D., an internist in San Diego, recently told *MedPage Today*.

Speckart is far from the only physician citing trouble billing for Medicare's three wellness codes (G0402, G0438 and G0439). Only 12 percent of eligible beneficiaries had Medicare billings for these services in 2013, according to data from the Centers for Medicare & Medicaid Services (CMS).

There are several reasons physicians have difficulty drawing Medicare patients to the zero-copay wellness visits, not the least of which is an expectation that doctors will address all their problems during appointments of any type.

But primary care physicians who have learned to incorporate these preventive visits into their practices have learned to love them, according to the article. Here are some strategies that have worked:

- Create an explanatory letter for Medicare beneficiaries about what a wellness visit entails and how it differs from a physical.
- Incorporate the elements of a physical or chronic-disease management visit into a wellness visit, explaining to patients that they will have a 20 percent copay for the problem-oriented part of the appointment.
- Turn wellness visits over to lead nurses by incorporating preventive care and immunizations into the intake work they do already. The physician may see the patient briefly at the end of the visit, similarly to the partnership model used by dental hygienists and dentists.
- If a patient raises a critical problem during a wellness visit, aim to get a new visit scheduled within a day. If the doctor reviews the new complaint the same day, the practice can add a second visit service to the wellness visit claim with a modifier that enables payment for both.

To learn more:
- read the article

Related Articles:
Medicare will cover lung cancer screenings
CMS rolls out second phase of initiative to prevent nursing home resident hospitalizations
Practices on top of preventive care for chronically ill
4 ways to better serve aging patients