# Initial Preventive Physical Examination (IPPE)

- **Review of medical and social health history, and preventive services education**
- **Covered only once, within 12 months of Part B enrollment**
- **Patient pays nothing (if provider accepts assignment)**

# Annual Wellness Visit (AWV)

- **Visit to develop or update a personalized prevention plan, and perform a health risk assessment**
- **Covered once every 12 months**
- **Patient pays nothing (if provider accepts assignment)**

# Routine Physical Examination (See Section 90)

- **Exam performed without relationship to treatment or diagnosis for a specific illness, symptom, complaint, or injury**
- **Not covered by Medicare; prohibited by statute**
- **Patient pays 100% out-of-pocket**

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The IPPE is also known as the “Welcome to Medicare” preventive visit. The goals of the IPPE are health promotion, disease prevention, and detection.

**Medicare pays for one beneficiary IPPE per lifetime** not later than the first 12 months after the beneficiary’s eligibility date for Medicare Part B benefits.

This booklet explains the elements in the IPPE. You must provide all components of the IPPE prior to submitting a claim for the service.

**NOTE:** The IPPE is a separate service from the AWV. For more information about the AWV, refer to the Medicare Learning Network’s® (MLN’s) [Annual Wellness Visit](#) booklet.

### COMPONENTS OF THE IPPE

<table>
<thead>
<tr>
<th>Action</th>
<th>Elements</th>
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| 1. Review the beneficiary’s medical and social history | At a minimum, collect information about:  
- Past medical and 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 conditions that may be hereditary or place the beneficiary at risk)  
- History of alcohol, tobacco, and illicit drug use  
- Diet  
- Physical activities  
- We encourage providers to pay close attention to opioid use during this part of the IPPE, which includes opioid use disorders (OUD). If a patient is using opioids, assess the benefit for other, non-opioid pain therapies instead, even if the patient does not have OUD but is possibly at risk. Refer to the [CMS Roadmap to Address the Opioid Epidemic](#) fact sheet for more information on combating opioid misuse.  
For more information about Medicare Coverage of Substance Abuse Services and mental health services, refer to the MLN’s [Screening, Brief Intervention, and Referral to Treatment (SBIRT)](#) booklet. |
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<tr>
<td>2. Review the beneficiary’s potential risk factors for depression and other mood disorders</td>
<td>Use any appropriate screening instrument. You may select from various available standardized screening tests designed for this purpose. For more information, refer to the Depression section on the Substance Abuse and Mental Health Services Administration—Health Resources and Services Administration’s Screening Tools website.</td>
</tr>
</tbody>
</table>
| 3. Review the beneficiary’s functional ability and level of safety | Use appropriate screening questions or standardized questionnaires recognized by national professional medical organizations to review, at a minimum, the following areas:  
- Activities of daily living  
- Fall risk  
- Hearing impairment  
- Home safety |
| 4. Exam | Obtain the following:  
- Height, weight, body mass index, and blood pressure  
- Visual acuity screen  
- Other factors deemed appropriate based on the beneficiary’s medical and social history and current clinical standards |
| 5. End-of-life planning, on beneficiary agreement | End-of-life planning is verbal or written information provided to the beneficiary about:  
- The beneficiary’s ability to prepare an advance directive in case an injury or illness causes them to be unable to make health care decisions  
- If you are willing to follow the beneficiary’s wishes expressed in an advance directive |
| 6. Educate, counsel, and refer based on the previous five components | Based on the results of the review and evaluation services in the previous components, provide appropriate education, counseling, and referral. |
| 7. Educate, counsel, and refer for other preventive services | Includes a brief written plan, such as a checklist, for the beneficiary to obtain:  
- A once-in-a-lifetime screening electrocardiogram (EKG/ECG), as appropriate  
- The appropriate screenings and other preventive services Medicare covers including the Annual Wellness Visit |
IPPE CODING, DIAGNOSIS, AND BILLING

Coding

Use the following HCPCS codes to file claims for the IPPE and screening ECG.

IPPE HCPCS Codes and Descriptors

<table>
<thead>
<tr>
<th>IPPE HCPCS Codes</th>
<th>Billing Code Descriptors</th>
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<tr>
<td>G0402</td>
<td>Initial preventive physical examination; face-to-face visit, services limited to new beneficiary during the first 12 months of medicare enrollment</td>
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<tr>
<td>G0403</td>
<td>Electrocardiogram, routine ecg with 12 leads; performed as a screening for the initial preventive physical examination with interpretation and report</td>
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<tr>
<td>G0404</td>
<td>Electrocardiogram, routine ecg with 12 leads; tracing only, without interpretation and report, performed as a screening for the initial preventive examination</td>
</tr>
<tr>
<td>G0405</td>
<td>Electrocardiogram, routine ecg with 12 leads; interpretation and report only, performed as a screening for the initial preventive physical examination</td>
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<tr>
<td>G0468*</td>
<td>Federally qualified health center (fqhc) visit, ippe or awv; a fqhc visit that includes an initial preventive physical examination (ippe) or annual wellness visit (awv) and includes a typical bundle of medicare-covered services that would be furnished per diem to a patient receiving an ippe or awv</td>
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</table>

* For more information on how to bill HCPCS G0468 refer to the Medicare Claims Processing Manual, Chapter 9, Section 60.2.

Diagnosis

You must report a diagnosis code when submitting a claim for the IPPE. Since you are not required to document a specific diagnosis code for the IPPE, you may choose any diagnosis code consistent with the beneficiary’s exam.

Billing

Medicare covers an IPPE when performed by a:

- Physician (a doctor of medicine or osteopathy)
- Qualified non-physician practitioner (a physician assistant, nurse practitioner, or certified clinical nurse specialist)
When you furnish a significant, separately identifiable, medically necessary Evaluation and Management (E/M) service along with the IPPE, Medicare may pay for the additional service. Report the additional Current Procedural Terminology (CPT) code (99201–99215) 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.

FREQUENTLY ASKED QUESTIONS (FAQs)

What are the other Medicare Part B preventive services?

- Advance Care Planning (ACP) as an Optional Element of an AWV
- Alcohol Misuse Screening and Counseling
- Annual Wellness Visit (AWV)
- Bone Mass Measurements
- Cardiovascular Disease Screening
- Colorectal Cancer Screening
- Counseling to Prevent Tobacco Use
- Depression Screening
- Diabetes Screening
- Diabetes Self-Management Training (DSMT)
- Glaucoma Screening
- Hepatitis C Virus (HCV) Screening
- Human Immunodeficiency Virus (HIV) Screening
- Influenza, Pneumococcal, and Hepatitis B Vaccinations and their Administration
- Intensive Behavioral Therapy (IBT) for Cardiovascular Disease (CVD), also known as a CVD risk reduction visit
- Intensive Behavioral Therapy (IBT) for Obesity
- Medical Nutrition Therapy (MNT)
- Prostate Cancer Screening
- Screening for Cervical Cancer with Human Papillomavirus (HPV) Tests
- Screening for Lung Cancer with Low Dose Computed Tomography (LDCT)
- Screening for Hepatitis B Virus (HBV) Infection
- Screening for Sexually Transmitted Infections (STIs) and High Intensity Behavioral Counseling (HIBC) to Prevent STIs

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• Screening Mammography
• Screening Pap Tests
• Screening Pelvic Examination (includes a clinical breast examination)
• Ultrasound Screening for Abdominal Aortic Aneurysm (AAA)

Visit the MLN’s Preventive Services Educational Tool for additional information on each Medicare preventive service.

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

No. The IPPE is not a routine physical that some older adults may get periodically from their physician or other qualified non-physician practitioner. 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. CMS encourages providers to inform beneficiaries about the Annual Wellness Visit and perform such visits. The Social Security Act (SSA) explicitly prohibits Medicare coverage for routine physical examinations.

Are clinical laboratory tests part of the IPPE?

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

Do deductible or coinsurance/copayment apply for the IPPE?

No. Medicare waives both the coinsurance/copayment and the Medicare Part B deductible for the IPPE (HCPCS code G0402). Neither is waived for the screening ECG (HCPCS codes G0403, G0404, or G0405).

If a beneficiary enrolls in Medicare in 2017, can he or she have the IPPE in 2018 if it was not performed in 2017?

A beneficiary who has not yet had an IPPE and whose initial enrollment in Medicare Part B began in 2017 is eligible for an IPPE in 2018 as long as it is done within 12 months of the beneficiary’s first Medicare Part B enrollment effective date.

CMS suggests providers check with their Medicare Administrative Contractor (MAC) for options that are available to verify beneficiary eligibility. Contact your MAC for more information.
**RESOURCES**

The [Medicare Preventive Services webpage](http://example.com) lists educational products for Medicare Fee-For-Service providers and their staff about preventive services, coverage, coding, billing, payment, and claim filing procedures.

**IPPE Resources**

<table>
<thead>
<tr>
<th>Resource</th>
<th>Website</th>
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<tbody>
<tr>
<td>42 Code of Federal Regulations 410.16 (policy governing IPPE service)</td>
<td><a href="http://example.com">eCFR.gov/cgi-bin/text-idx?SID=36118cf6acf7b03ff0dbd7d0e2814720&amp;mc=true&amp;node=pt42.2.410&amp;rgn=div5#se42.2.410_116</a></td>
</tr>
<tr>
<td>CMS Provider Minute: Preventive Services (pointers to help you submit correct documentation and avoid claim denials)</td>
<td><a href="http://example.com">Youtube.com/watch?v=-tuMWM4KeZg&amp;feature=youtu.be&amp;list=PLaV7m2-zFKpiib1UvmCh1Q2cBKi1SGk-V</a></td>
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<tr>
<td>Medicare Claims Processing Manual, Chapter 9, Section 60.2</td>
<td><a href="http://example.com">CMS.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/clm104c09.pdf</a></td>
</tr>
<tr>
<td>Medicare Claims Processing Manual, Chapter 12, Section 30.6.6</td>
<td><a href="http://example.com">CMS.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/clm104c12.pdf</a></td>
</tr>
<tr>
<td>Medicare Diabetes Prevention Program (MDPP) Expanded Model</td>
<td><a href="http://example.com">Go.CMS.gov/MDPP</a></td>
</tr>
<tr>
<td>MLN Matters® Article MM9271, Advance Care Planning (ACP) as an Optional Element of an Annual Wellness Visit (AWV)</td>
<td><a href="http://example.com">CMS.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/MM9271.pdf</a></td>
</tr>
<tr>
<td>MLN Matters Article SE1338, Improve Your Patients’ Health with the Initial Preventive Physical Examination (IPPE) and Annual Wellness Visit (AWV)</td>
<td><a href="http://example.com">CMS.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/SE1338.pdf</a></td>
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<tr>
<td>MLN Matters Articles on Medicare-covered Preventive Services</td>
<td><a href="http://example.com">CMS.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/Downloads/MLNPrevArticles.pdf</a></td>
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<td>Preventive Services Educational Tool</td>
<td>CMS.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/MLN-Publications-Items/CMS1243319.html</td>
</tr>
<tr>
<td>Reducing Opioid Misuse</td>
<td>CMS.gov/about-cms/story-page/reducing-opioid-misuse.html</td>
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## Hyperlink Table

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<tr>
<td>Contact Your MAC</td>
<td><a href="http://go.cms.gov/MAC-website-list">http://go.cms.gov/MAC-website-list</a></td>
</tr>
<tr>
<td>Depression Section</td>
<td><a href="https://www.integration.samhsa.gov/clinical-practice/screening-tools#depression">https://www.integration.samhsa.gov/clinical-practice/screening-tools#depression</a></td>
</tr>
<tr>
<td>Initial Preventive Physical Examination</td>
<td><a href="https://www.ecfr.gov/cgi-bin/text-idx?SID=36118cf6acf7b03f0dbd7d0e2814720&amp;mc=true&amp;node=pt42.2.410&amp;rgn=div5#se42.2.410_116">https://www.ecfr.gov/cgi-bin/text-idx?SID=36118cf6acf7b03f0dbd7d0e2814720&amp;mc=true&amp;node=pt42.2.410&amp;rgn=div5#se42.2.410_116</a></td>
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<tr>
<td>Medicare Preventive Services Webpage</td>
<td><a href="https://www.cms.gov/Medicare/Prevention/PreventionGenInfo">https://www.cms.gov/Medicare/Prevention/PreventionGenInfo</a></td>
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