

Annual Wellness Visit: Social Determinants of Health Risk Assessment

Related CR Release Date: May 2, 2024 MLN Matters Number: MM13486

Effective Date: January 1, 2024 Related Change Request (CR) Number: CR 13486

Implementation Date: October 7, 2024 Related CR Transmittal Numbers: R12599BP

& R12599CP

Related CR Title: A Social Determinants of Health Risk Assessment in the Annual Wellness Visit Policy Update in the Calendar Year 2024 Physician Fee Schedule Final Rule

Affected Providers

- Hospitals
- Physicians
- Other providers billing Medicare Administrative Contractors (MACs) for services they provide to Medicare patients

Action Needed

Make sure your billing staff knows:

- A social determinants of health (SDOH) risk assessment is now an optional annual wellness visit (AWV) element
- The eligibility and billing requirements for doing the SDOH as part of the AWV

Background

The AWV includes the establishment, or update, of:

- The patient's medical and family history
- A health risk assessment
- A personalized prevention plan

The AWV includes the initial visit (HCPCS code G0438) and the subsequent visit (HCPCS code G0439). The AWV also includes the frequency limitations that require that eligible patients:

 Are no longer within 12 months of the effective date of their first Medicare Part B coverage period





MLN Matters: MM13486 Related CR 13486

 Haven't received either an Initial Preventive Physical Examination (IPPE) or AWV within the past 12 months

Before January 1, 2024, Medicare didn't cover and pay for a SDOH risk assessment. In the CY 2024 Physician Fee Schedule (PFS) <u>final rule</u>, CMS established HCPCS code G0136, Administration of a standardized, evidence-based SDOH risk assessment tool, 5-15 minutes, not more often than every 6 months. When you provide in conjunction with certain evaluation and management or behavioral health services, we require that the SDOH risk assessment is standardized, evidence based, and that any documented health related social need is identified in the medical record.

When you provide the SDOH as an additional element of the AWV, we also require that the SDOH risk assessment is:

- Optional at the discretion of the clinician and patient,
- Separately payable from the AWV with no applicable patient Part B coinsurance and deductible when part of the same visit with the same date of service (DOS) as the AWV, and
- Subject to the same health professional eligibility and frequency limitations as the AWV.

Eliqible Health Professionals

We require that the SDOH risk assessment, as an additional element of the AWV, must be done by clinicians identified within the definition of AWV "Health Professional" per 42 CFR 410.15(a). This includes a:

- Physician who's a doctor of medicine or osteopathy
- Physician assistant, nurse practitioner, or clinical nurse specialist
- Medical professional or a team of such medical professionals, working under the direct supervision of a physician

Coinsurance and Deductible

Patient cost sharing, Part B coinsurance, and deductible isn't applicable to the AWV, and doesn't apply to the SDOH risk assessment when you provide as an additional element of the AWV. The SDOH risk assessment does include applicable Part B coinsurance and deductible when you provide outside of an AWV, including in conjunction with certain evaluation and management or behavioral health services.

Additional Requirements

When you provide the SDOH risk assessment as an additional element of the AWV, you must give it in a manner that all communication with the patient is appropriate for the patient's educational, developmental, and health literacy level, and is culturally and linguistically appropriate.





MLN Matters: MM13486 Related CR 13486

Billing Clarification

When you provide the SDOH risk assessment as an additional element of the AWV, report HCPCS code G0136 for the SDOH risk assessment with Modifier –33, with the same DOS on the same claim as G0438 or G0439.

You may provide elements of the AWV over a period of multiple days. In these situations, the DOS you report on the claim is the DOS when you complete the entirety of the AWV.

For example, a patient may provide their input for an SDOH risk assessment through an online portal on a Monday and the health professional interprets the patient's SDOH risk assessment input and applies that information toward the establishment or update of a personalized prevention plan as part of the remainder of the AWV on a Tuesday. In this scenario, the DOS for both the SDOH risk assessment and the AWV is the DOS when you complete the entirety of the AWV. In this scenario, the medical record documentation should show that the service started on one day and was completed on another day (the DOS reported on the claim). If we request documentation, you must submit medical records for both days. In addition, bill the services based on the time involved as described by CPT code and the DOS you complete the entire AWV.

More Information

We issued CR 13486 to your MAC as the official instruction for this change. The CR has 2 transmittals:

- Transmittal R12599CP updates the Medicare Claims Processing Manual
- Transmittal R12599BP updates the Medicare Benefit Policy Manual

For more information, <u>find your MAC's website</u>.

Document History

Date of Change	Description
May 3, 2024	Initial article released.

View the Medicare Learning Network® Content Disclaimer and Department of Health & Human Services Disclosure.

The Medicare Learning Network®, MLN Connects®, and MLN Matters® are registered trademarks of the U.S. Department of Health & Human Services (HHS).

CPT only copyright 2023 American Medical Association. All rights reserved.



