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Reminder – Medicare Now Provides Coverage for Eligible Medicare Beneficiaries of a One-Time Ultrasound Screening for Abdominal Aortic Aneurysms (AAA) When Referred for this Screening as a Result of the Initial Preventive Physical Examination (“Welcome to Medicare” Physical Exam)

Key Words

SE0711, Ultrasound, Screening, AAA, Abdominal, Aortic, Aneurysm, Preventive

Provider Types Affected

All Medicare fee-for-service (FFS) physicians, providers, suppliers, and other health care professionals, who furnish or provide referrals for and/or file claims for the initial preventive physical examination (IPPE) and the ultrasound screening for AAA

Key Points

- In January 2005, the Medicare program expanded the number of preventive services available to Medicare beneficiaries to include coverage under Medicare Part B of a one-time IPPE, as a result of Section 611 of the Medicare Prescription Drug, Improvement, and Modernization Act (MMA) of 2003.
- This one-time IPPE is also referred to as the “Welcome to Medicare” physical exam and is for all Medicare beneficiaries whose Medicare Part B effective date began on or after January 1, 2005.
- On January 1, 2007, Medicare further expanded the number of preventive benefits, as provided for in Section 5112 of the Deficit Reduction Act (DRA) of 2005, to include coverage under Medicare Part B of a one-time preventive ultrasound screening for the early detection of AAA for at-risk beneficiaries as part of the IPPE. Both benefits (the IPPE and AAA) are subject to certain eligibility and other limitations.
- The Centers for Medicare & Medicaid Services (CMS) needs the provider’s help:
 - To ensure that patients that are new to Medicare receive their “Welcome to Medicare” physical exam within the first six months of their effective date in Medicare Part B; and
 - To ensure that beneficiaries at risk for AAA receive a referral for the preventive ultrasound screening as part of their “Welcome to Medicare” physical exam.

Benefit Coverage Summary

The IPPE (“Welcome to Medicare” Physical Exam)

- Effective for dates of service on or after January 1, 2005, Medicare beneficiaries whose Medicare Part B effective date is on or after January 1, 2005, are covered for a one-time IPPE visit.
- The IPPE must be received by the beneficiary within the first six months of their Medicare Part B effective date.
- The IPPE is a preventive evaluation and management (E/M) service that includes the following seven components:
 - A review of an individual's medical and social history with attention to modifiable risk factors;
 - A review of an individual's potential (risk factors) for depression;
 - A review of the individual's functional ability and level of safety;
 - An examination to include an individual's height, weight, blood pressure measurement, and visual acuity screen;
 - Performance of an electrocardiogram (EKG) and interpretation of the EKG;
 - Education, counseling, and referral based on the results of the review and evaluation services described in the previous five elements; and
 - Education, counseling, and referral, including a brief written plan such as a checklist provided to the individual for obtaining the appropriate screenings and other preventive services that are covered as separate Medicare Part B benefits.
- This 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. **Medicare does not provide coverage for routine physical exams.**
- The Part B deductible and coinsurance/co-payment apply to this benefit, except when the IPPE is provided in a Federally Qualified Health Center (FQHC). Then there is no deductible and only the coinsurance/co-payment applies.
- Other preventive services and screenings covered under Medicare Part B include: adult immunizations (flu, pneumococcal, and hepatitis B), bone mass measurements, cardiovascular screening, diabetes screening, glaucoma screening, screening mammograms, screening Pap test and pelvic exam, colorectal and prostate cancer screenings, diabetes self-management training, medical nutrition therapy for beneficiaries diagnosed with diabetes or renal disease, and smoking and tobacco-use cessation counseling. Benefits are subject to certain eligibility and other limitations.

NOTE: The IPPE (“Welcome to Medicare”) physical exam does not include any clinical laboratory tests. The physician, qualified non-physician practitioner, or hospital may also provide and bill separately for the preventive services and screenings that are currently covered and paid for by Medicare Part B. (See the **Important Links** section below for links to MLN Matters articles MM3771 and MM3638, which provide detailed coverage criteria and billing information about the IPPE benefit.)

Preventive Ultrasound Screening for AAA

- Effective for dates of service on or after January 1, 2007, Medicare will pay for a one-time preventive ultrasound screening for AAA for beneficiaries who are at risk (has a family history of AAA or is a man age 65 to 75 who has smoked at least 100 cigarettes in his lifetime).
- Eligible beneficiaries must receive a referral for the screening as a result of their “Welcome to Medicare” physical exam. There is no Part B deductible applied to this benefit, but coinsurance/co-payment applies.

IMPORTANT NOTE: Only Medicare beneficiaries who receive a referral from their physician or other qualified non-physician practitioner for the preventive ultrasound screening, as part of their “Welcome to Medicare” physical exam, will be covered for the AAA benefit. (See the **Important Links** section below for a link to *MLN Matters* article MM5235, which provides detailed coverage criteria and billing information about the AAA benefit.)

Important Links

The related MLN Matters article can be found at

<http://www.cms.hhs.gov/MLNMattersArticles/downloads/SE0711.pdf> on the CMS website.

For more information about Medicare’s coverage criteria and billing procedures for the AAA and IPPE benefits, providers may refer to the following MLN Matters articles:

- MM5235 (2006), Implementation of a One-Time Only Ultrasound Screening for Abdominal Aortic Aneurysms (AAA), Resulting from a Referral from an Initial Preventive Physical Examination, <http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM5235.pdf>,
- MM3771 (2005), MMA – Clarification for Outpatient Prospective Payment system (OPPS) Hospitals Billing the Initial Preventive Physical Exam (IPPE), <http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM3771.pdf>, and
- MM3638 (2004), MMA – Initial Preventive Physical Examination, <http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM3638.pdf> on the CMS website.

CMS has also developed a variety of educational products and resources to help health care professionals and their staff, become familiar with coverage, coding, billing, and reimbursement for all preventive services covered by Medicare:

- The MLN Preventive Services Educational Products Web page provides descriptions and ordering information for all provider specific educational products related to preventive services and is located at http://www.cms.hhs.gov/MLNProducts/35_PreventiveServices.asp on the CMS website.
- The CMS website provides information for preventive service covered by Medicare. Visit <http://www.cms.hhs.gov>, select “Medicare”, and scroll down to “Prevention”.

Providers may visit <http://www.medicare.gov> for products to share with their Medicare patients.