



Part B Preventive Services: Glaucoma Screening and Preventive Services Resources

8/1/2024

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Today's Presenters



- Arlene Dunphy, CPC
 - Provider Outreach and Education Consultant
- Michele Poulos
 - Provider Outreach and Education Consultant





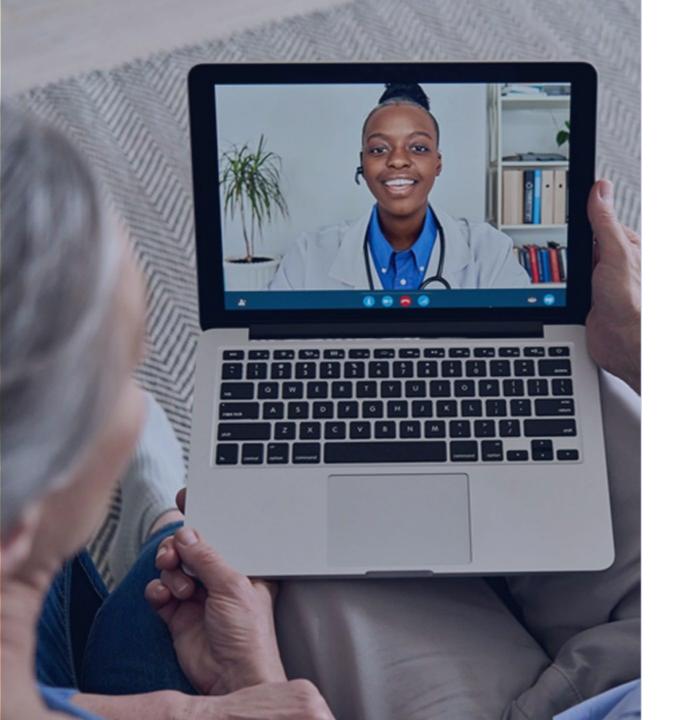


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Objective

Provide coverage criteria for the screening glaucoma benefit and promote awareness of the preventive benefits covered by Medicare.







Agenda

- Screening for Glaucoma Coverage
- Preventive Services Resources
- Other Resources
- NGSConnex







Screening for Glaucoma Coverage

Risk Factors

- Age
- Race
- Family history
- Medical history





Glaucoma Screening

- High-risk patients
 - Individuals with diabetes mellitus
 - Individuals with a family history of glaucoma
 - Black or African-Americans age 50 and over
 - Hispanics or Latinos age 65 and over





Glaucoma Screening Components

- Includes
 - Dilated eye examination with an intraocular pressure (IOP) measurement and
 - Direct ophthalmoscopy examination **or** a slit-lamp bio microscopic examination





Eligible Providers

 Furnished by or under direct supervision of an optometrist or ophthalmologist





Billing: Procedure Code (HCPCS)

Code	Description
G0117	Glaucoma screening for high-risk patients furnished by an optometrist or ophthalmologist
G0118	Glaucoma screening for high-risk patients furnished under the direct supervision of an optometrist or ophthalmologist



Billing: Diagnosis Code (ICD-10-CM)

ICD-10-CM Code	Description
Z13.5	Encounter for screening for eye and ear disorders





Frequency

- Maximum of once every 12 months
 - 11 full months must have past





Cost-Sharing and Reimbursement

- Cost-sharing
 - Deductible applies
 - Coinsurance applies
- Reimbursement
 - Medicare Physician Fee Schedule
 - Our website > Fee Schedule Lookup
 - Nonparticipating provider reduction and limiting charge provisions apply



Common Remittance Denials

- Benefit maximum for this time period has been reached
- Services not covered unless patient is classified as at high risk





Documentation

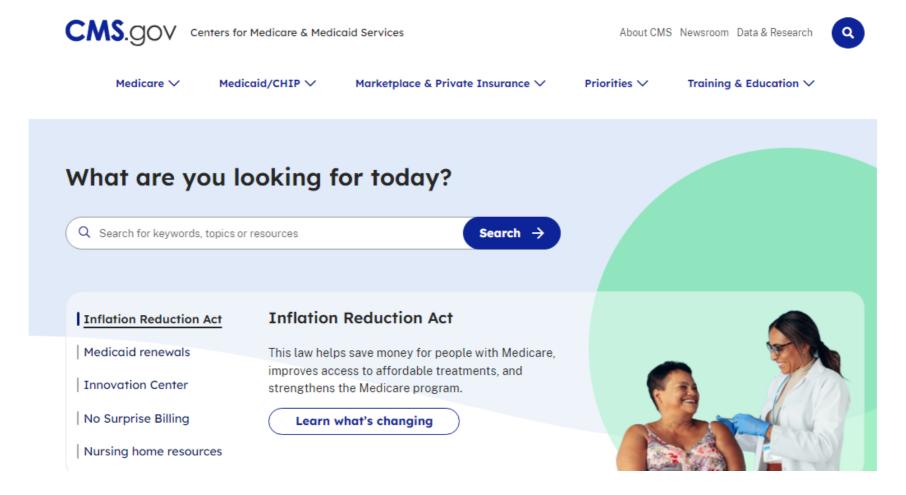
- One of the high-risk groups
- Appropriate screening was performed
- Legible signature of person performing service with credentials





Preventive Services Resources

CMS Website





CMS Website - Prevention





CMS Website - Preventive Services

Preventive Services

Flu Shot

Preventive Services

PrEP for HIV: Prepare for Potential Medicare Part B Coverage

On July 12, 2023, <u>CMS proposed to transition coverage</u> of Preexposure Prophylaxis (PrEP) using FDAapproved antiretroviral drugs (oral or injectable) to prevent HIV to Medicare Part B. Currently, HIV PrEP drugs may be covered under Medicare Part D.

It's critical that your patients have uninterrupted access to their HIV PrEP drugs. We expect to release a final National Coverage Decision (NCD) in late September 2024, and we expect the final NCD will be similar to the proposed NCD. We're encouraging you to prepare your systems now so you're able to immediately transition to Part B coverage if we release a final NCD.

Review our <u>fact sheet (PDF)</u> and <u>frequently asked questions (PDF)</u> to learn more about how you can prepare for the possible upcoming coverage change, including information about enrollment, billing, claims processing, and coding.

Medicare covers many preventive services to keep your patients healthy. Preventive services can help find health problems early, when treatment works best, and can help keep your patients from getting certain diseases. Talk to your patients about which preventive services are right for them and how often they need them.

If you're a person with Medicare, learn about all preventive services.

Learn more about billing for Medicare-covered preventive services:

- > Shots & vaccines
- Wellness visits
- > Diabetes-related services
- > Tests & screenings
- > Counseling & therapies
- > Mental health services
- > Resources





CMS Website - Preventive Services



Flu Shot

Get payment allowances & effective dates for the 2023-2024 season.

This content is for health care providers. If you're a person with Medicare, learn more about flu shots.

Consider giving a preferred vaccine to your patients 65 and older. Preferred vaccines are potentially more effective than standard dose flu vaccines. There are 3 recommended vaccines:

- 1. Fluzone High-Dose Quadrivalent vaccine
- 2. Flublok Quadrivalent recombinant flu vaccine
- 3. Fluad Quadrivalent adjuvanted flu vaccine

If one of these recommended vaccines isn't available, give your patients a standard-dose flu vaccine instead.

Frequency & Coverage

- The CDC recommends annual flu shots for everyone 6 months and older each flu season. September and October are the best times for most people to get vaccinated.
- Medicare Part B covers the seasonal flu shot.
- We cover additional flu shots if medically necessary. Patients can get flu shots twice in a calendar year during 2 different flu seasons, and we'll pay for both shots.
- · Your patients pay nothing if you accept assignment. There's no copayment, coinsurance, or deductible.
- Find out when your patients are eligible for the flu shot (PDF). We give information for dates of service in the last 18 months:
 - CPT or HCPCS codes
 - Dates of service
 - NPIs who administered the shots





CMS Website - Preventive Services

Preventive Services

Flu Shot

Preventive Services

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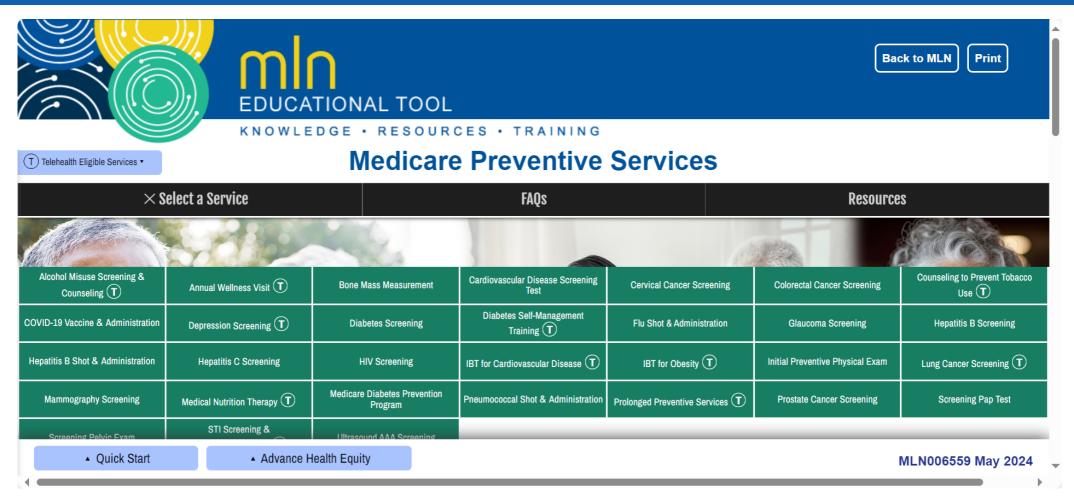


- Annual wellness visits
- Initial preventive physical exam
- Medicare wellness visits educational tool





MLN[®] Educational Tool – Medicare Preventive Services Chart (MLN006559)





Glaucoma Screening

Select another service Glaucoma Screening Print **HCPCS & CPT Codes** G0117 — Glaucoma screening for high risk patients furnished by an optometrist or ophthalmologist What's Changed? G0118 — Glaucoma screening for high risk patient furnished under the direct supervision of an optometrist or ophthalmologist No changes from the last quarter ICD-10 Codes Z13.5 Note: Additional ICD-10 codes may apply. Find individual change requests and specific ICD-10-CM service codes we cover on the CMS ICD-10 webpage. Find your MAC's website for more information. **Medicare Covers** Patients with Medicare Part B who meet at least 1 of these high-risk criteria: · People with diabetes mellitus · People with glaucoma in their family history Black or African Americans aged 50 and older · Hispanics or Latinos aged 65 and older · Quick Start · Advance Health Equity MLN006559 May 2024



Other Resources

CMS Resources

- CMS Internet-Only Manuals (IOMs)
- CMS IOM Publication 100-04, Medicare Claims Processing Manual, Preventive and Screening Services, Chapter 18
- CMS IOM Publication 100-02, Medicare Benefit Policy Manual, Chapter 15
- CMS Preventive Services web page
- National Correct Coding Initiative



CMS Medicare Learning Network

- MLN Matters® Articles
- MLN Publications & Multimedia





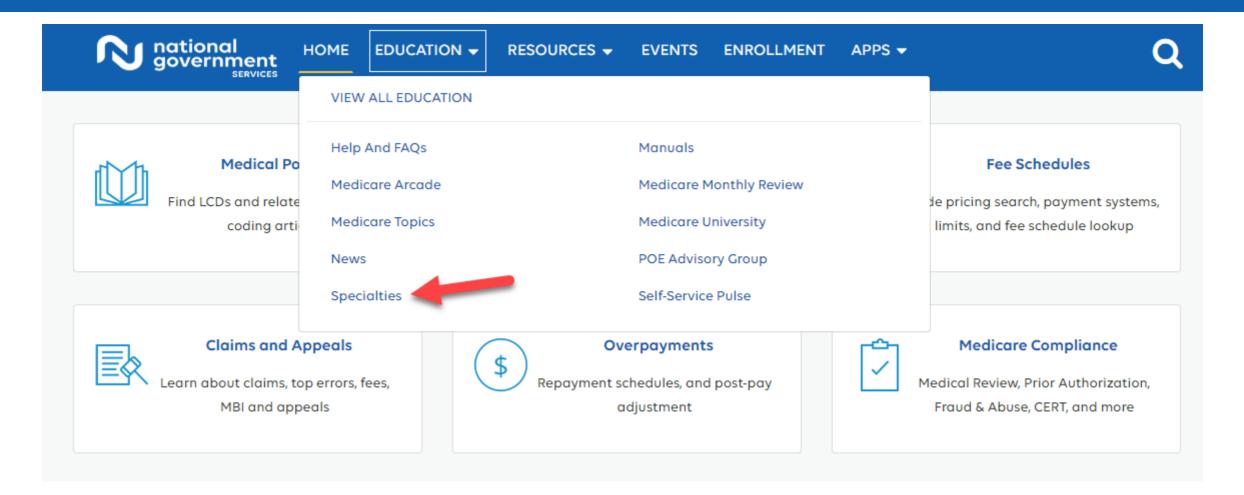
Resources

- MLN® Educational Tool: <u>Medicare Preventive Services Quick</u> Reference Chart ICN 006559
- Evaluation & Management Visits
- Preventive Services Guide NGSMedicare





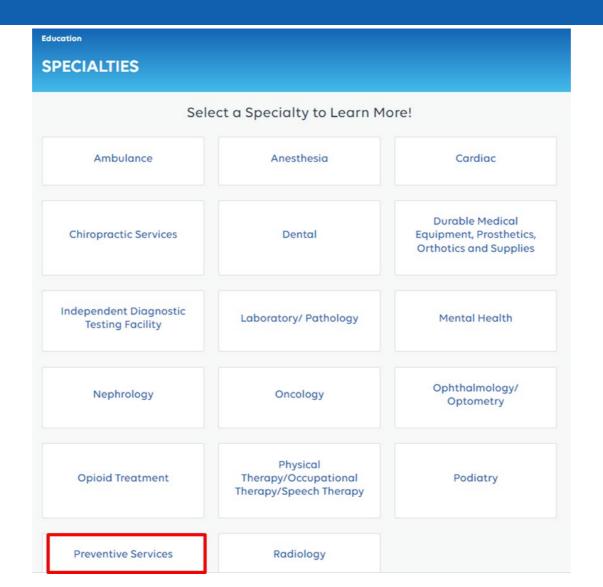
NGS Website - Education







NGS Website – Specialties







NGS Website – Preventive Services Manual

PREVENTIVE SERVICES

Preventive Services Guide

Alcohol Misuse and Counseling

Annual Wellness Visit Screening

Bone Mass Measurements

Cardiovascular Disease Screening Tests

Colorectal Cancer Screening

Counseling to Prevent Tobacco Use

Depression Screening

Diabetes Screening

Diabetes Self-Management Training

Glaucoma Screening

Hepatitis B Virus Screening

Hepatitis B Virus Vaccine and Administration

Hepatitis C Virus Screening

Preventive Services Guide

Alcohol Misuse and Counseling

The USPSTF recommended statement definitions:

- Risky, hazardous, or harmful drinking which places an individual at risk for future problems with alcohol consumption. Alcohol consumption becomes hazardous or risky when consuming:
 - greater than seven drinks per week, or greater than three drinks per occasion for women and persons 65 years and older, and
 - o greater than 14 drinks per week, or greater than four drinks per occasion for men.

Alcohol dependence is defined as having at least three of the following:

- Tolerance
- Withdrawal symptoms
- · Impaired control
- · Preoccupations with acquisition and/or use
- · Persistent desire or unsuccessful efforts to quit
- · Sustained social, occupational or recreational disability
- Continuous use despite adverse consequences





NGSConnex

What Is NGSConnex?

- NGSConnex
 - Need Internet access and email address
 - No cost.
- Provides
 - Claim status
 - Beneficiary eligibility
 - Financial data
 - Provider demographics
 - Ability to order duplicate remittances
 - Initiate a redetermination/reopening request
 - Initiate ADR responses
 - My inquiries





Eligibility

- Preventive services
 - Verify when a beneficiary has last received a preventive service and find out when next eligible to receive

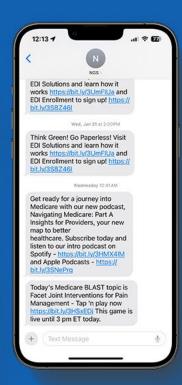


Questions?

Thank you!







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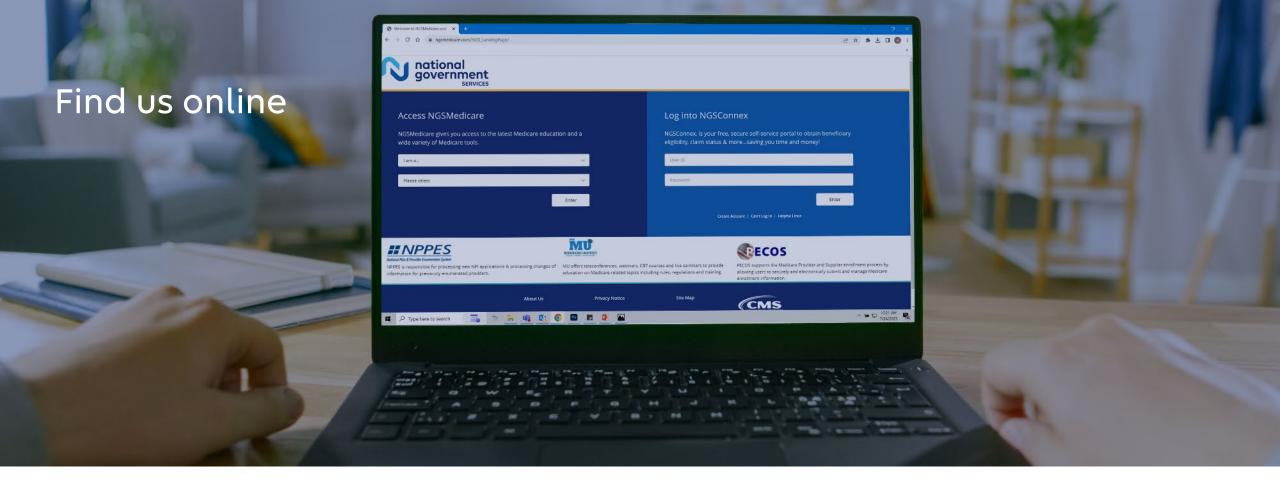
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IVR System

The interactive voice response system (IVR) is available 24-hours a day, seven days a week to answer general inquiries



NGSConnex

Web portal for claim information



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