

# Wellness Wednesday: Screening Pelvic Examinations

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# Today's Presenters

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# Objectives

- Provide an overview of the Medicare preventive service: screening pelvic examination
- Encourage providers to promote and educate beneficiaries in life-saving preventive services and screenings
- Assist providers in billing so that claim denials can be avoided

# Agenda

- Overview of Medicare's Preventive Services Program
- Screening Pelvic Examination
- Resources and References
- Questions and Answers

# Preventive Services Overview

- CMS recognizes the importance of disease prevention, early detection and lifestyle modifications that support the health of Medicare beneficiaries
- Medicare pays for many preventive benefits, including educating Medicare beneficiaries about potentially life-saving services and screenings



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 EDUCATIONAL TOOL  
 KNOWLEDGE • RESOURCES • TRAINING


Print-Friendly Version

## Medicare Preventive Services

× Select a Service

FAQs

Resources

Alcohol Misuse Screening & Counseling 	Annual Wellness Visit 	Bone Mass Measurements	Cardiovascular Disease Screening Tests	Cervical Cancer Screening	Colorectal Cancer Screening	Counseling to Prevent Tobacco Use 
Depression Screening 	Diabetes Screening	Diabetes Self-Management Training 	Flu Shot & Administration	Glaucoma Screening	Hepatitis B Screening	Hepatitis B Shot & Administration
Hepatitis C Screening	HIV Screening	IBT for Cardiovascular Disease 	IBT for Obesity 	Initial Preventive Physical Exam	Lung Cancer Screening 	Mammography Screening
Medical Nutrition Therapy 	Medicare Diabetes Prevention Program	Pap Tests Screening	Pneumococcal Shot & Administration	Prolonged Preventive Services 	Prostate Cancer Screening	STI Screening & HIBC to Prevent STIs 
Screening Pelvic Exams	Ultrasound AAA Screening					

▲ Quick Start
 Eliminate Health Disparities

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# Deductible and Coinsurance Waived for Certain Preventive Services

- For DOS on/after 1/1/2011
  - Medicare deductible and coinsurance waived for preventive services included in this presentation
  - [CR 7012, “Waiver of Coinsurance and Deductible for Preventive Services, Section 4104 of Patient Protection and Affordable Health Care Act, Removal of Barriers to Preventive Services in Medicare”](#)

# Did You Know

- A beneficiary must be enrolled in Medicare Part B in order to be covered for any Medicare preventive services

# Polling Question #1

- What is your role in the Medicare Program for your facility?
  - Biller
  - Clinician
  - Intake/admissions
  - Compliance
  - Administrator

# Polling Question #2

- How many years of Medicare experience do you have?
  - I am new to Medicare
  - 1–5 years
  - 6–10 years
  - Over 10 years

# Polling Question #3

- How experienced are you with performing, documenting, and/or billing Medicare preventive services?
  - This is all new to me
  - I am semicomfortable but ready to learn more
  - I am pretty comfortable but will benefit from this as a refresher course

# Screening Pelvic Examination

# Background

- Balanced Budget Act Section 4102 provides screening pelvic examination
  - Effective for DOS on/after 1/1/1998

# Benefits of Screening Pelvic Examination

- Detection of precancers, infections, STDs
- Evaluation of size and position of pelvic organs
- Detection, prevention, treatment of breast masses, lumps, breast cancer
- Maintenance of general overall health of lower genitourinary tract



# Screening Pelvic Examination

- Complete physical examination of a woman's external and internal reproductive organs
- Includes a clinical breast examination
- Should include at least seven of the following elements
  - Inspection and palpation of breasts
  - Digital rectal examination
  - External genitalia
  - Urethral meatus

# Screening Pelvic Examination

- Urethra
- Bladder
- Vagina
- Cervix
- Uterus
- Adnexa/parametria
- Anus and perineum

# Who Is Covered

- All female beneficiaries
  - Asymptomatic, or
  - High-risk category or detected presence of cancer or other abnormality

# High-Risk Categories

- High-risk categories for cervical and vaginal cancer
  - Early onset of sexual activity
  - Multiple sexual partners
  - History of a sexually transmitted disease
  - Fewer than three negative or any Pap smear tests within previous seven years
  - DES exposed: daughters of women who took DES during pregnancy

# Frequency of Screening Pelvic Examination

- If evidence shows woman is in one of high-risk categories or examination indicated presence of cervical or vaginal cancer or other abnormality during preceding three years in a woman of childbearing age
  - Covered once every 12 months
    - At least 11 full months have passed since last covered screening pelvic exam

# Frequency of Screening Pelvic Examination

- Asymptomatic female beneficiaries
  - Covered once every 24 months
    - At least 23 full months have passed since last covered pelvic exam

# Who Can Perform

- Doctor of medicine or osteopathy
- Qualified NPP
  - CNM
  - PA
  - NP
  - CNS
- Does not have to be ordered by a physician/practitioner

# Documentation and Billing Requirements

- Patient's medical record must show that all coverage requirements are met
- ICD-10-CM diagnosis code (see next slides)
- Line item reporting
  - Revenue code 0770/052X
  - **HCPCS code G0101** (Cervical or vaginal cancer screening: pelvic and clinical breast exam)



# ICD-10 Diagnosis Codes – Asymptomatic

ICD-10 Code	Descriptor
Z01.411	Encounter for gynecological examination (general) (routine) with abnormal findings
Z01.419	Encounter for gynecological examination (general) (routine) without abnormal findings
Z12.4	Encounter for screening for malignant neoplasm, cervix
Z12.72	Encounter for screening for malignant neoplasm, vagina
Z12.79	Encounter for screening for malignant neoplasm, other genitourinary organs
Z12.89	Encounter for screening for malignant neoplasm, other sites

# ICD-10 Diagnosis Codes – High-Risk

ICD-10 Code	Descriptor
Z72.51	High-risk heterosexual behavior
Z72.52	High-risk homosexual behavior
Z72.53	High-risk bisexual behavior
Z77.29	Contact with and (suspected) exposure to other hazardous substances
Z77.9	Other contact with and (suspected) exposures hazardous to health
Z91.89	Other specified personal risk factors, not otherwise classified
Z92.89	Personal history of other medical treatment

# TOBs and Revenue Codes

Facility Type	TOB	Revenue Code
Hospital inpatient Part B	12X	0770
Hospital outpatient	13X	0770
SNF inpatient Part B	22X	0770
SNF outpatient	23X	0770
CAH	85X	0770
RHC	71X	052X
FQHC	77X	052X

# Billing Instructions for FQHC

- If screening pelvic exam is only service provided, bill as encounter
  - Report encounter on line 1
    - Revenue code 0521, payment code, facility's payment code charges
  - Report screening pelvic exam on line 2
    - Revenue code 0521, HCPCS code G0101, actual charges
  - Generates PPS payment

# Billing Instructions for RHC

- If screening pelvic exam is only service provided, bill as encounter
  - Report screening pelvic exam on line 1
    - Revenue code 0521, HCPCS code G0101, total charges
  - Generates AIR payment

# Billing Instructions for FQHC/RHC

- If screening pelvic exam provided with billable encounter, bill as incident to service
  - Report screening pelvic exam on additional claim line
    - Revenue code 0770, HCPCS code G0101, actual charges
  - Does not generate additional payment

# Payment

Facility Type	Payment
Hospital inpatient Part B	OPPS
Hospital outpatient	OPPS
SNF inpatient Part B	MPFS
SNF outpatient	MPFS
CAH	Method I: 101% of reasonable cost for TC Method II: 101% of reasonable cost TC, plus 115% of MPFS non-facility rate for PC
RHC	AIR
FQHC	FQHC PPS

# Beneficiary Cost-Sharing

- Deductible waived
- Coinsurance/copayment waived
- Affordable Care Act Section 4104



# Why Screening Pelvic Examination Claims Are Denied

- Beneficiary who is low-risk has received covered pelvic screening within past two years
- Beneficiary who is high-risk has received covered pelvic screening during past year

# Avoiding Screening Pelvic Examination Denials

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HIQACOP                CWF  PART A  INQUIRY REPLY                PAGE 06 OF 15
IP-REC  CN XXXXXXXXXXXX  NM XXXXXXX  IT X  DB XXXXXXXXXXX  SX F      INT 13201

PREVENTIVE SERVICE    TECH DTE  PROF DTE | PREVENTIVE SERVICE    TECH DTE  PROF DTE
MMDDCCYY MMDDCCYY | MMDDCCYY MMDDCCYY
CARDIOVASC (80061)    01012005 01012005 | PCB EXAM (G0101)    07012001 07012001
CARDIOVASC (82465)    01012005 01012005 | PV 90732,90669,90670 VACCINTD VACCINTD
CARDIOVASC (82718)    01012005 01012005 | PROSTATE (G0102)    GDRNOELG GDRNOELG
CARDIOVASC (84478)    01012005 01012005 | PROSTATE (G0103)    GDRNOELG GDRNOELG
COLORECTAL (G0104)    01011998 01011998 | PAP TEST (Q0091)    07012005 07012005
COLORECTAL (G0105)    01011998 01011998 | DIABETES (82947)    05012012 01012005
COLORECTAL (G0106)    01011998 01011998 | DIABETES (82950)    01012005 01012005
COLORECTAL (G0120)    01011998 01011998 | DIABETES (82951)    01012005 01012005
COLORECTAL (G0121)    07012001 07012001 | GLAU (G0117,G0118) 01012002 01012002
FOB TEST (G0107)      01011998 01011998 | MAMM (G0202,G0203) 04012001 08012002
FOB TEST (G0328)      01012004 01012004 | MAMM (76092)        01011998 08012002
FOB TEST (82270)      01012007 01012007 | MAMM (77057)        01012007 01012007
IPP EXAM (G0344)      SRVNOELG SRVNOELG | PAPT (P3000,G0123, 07012001 07012001
IPP EXAM (G0366)      SRVNOELG SRVNOELG | G0143,G0144,
IPP EXAM (G0367)      SRVNOELG 00000000 | G0145,G0147,
IPP EXAM (G0368)      00000000 SRVNOELG | G0148)
PF1=INQ  SCREEN      PF3/CLEAR=END      PF7=PREV      PF8=NEXT
  
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# What You Should Do Now

- Ensure that registration staff knows to check CWF to verify beneficiary is eligible for preventive service
- Update procedures/chargemaster with correct coding information
- Become familiar with preventive services regulations for any additions or updates
- Submit claims in compliance with preventive service billing guidelines

# Polling Question #4

- An asymptomatic beneficiary is covered for an annual screening pelvic examination.
  - True
  - False

# Resources and References

# CMS Resources

- [CMS Manuals web page](#)
  - Regulations and Guidance > Manuals > Internet-Only Manuals (IOMs)
- [CMS Preventive Services web page](#)
  - Medicare > Preventive Services

# CMS Internet-Only Manuals

- CMS IOM Publications
  - 100-02, *Medicare Benefit Policy Manual*, Chapter 15
    - Section 280.4 – Screening Pap Smears
  - 100-03, *Medicare National Coverage Determinations (NCD) Manual*, Chapter 1, Part 4
    - Section 210.2 – Screening Pap Smears and Pelvic Examinations for Early Detection of Cervical or Vaginal Cancer
  - 100-04, *Medicare Claims Processing Manual*, Chapter 18
    - Section 40 – Screening Pelvic Examinations

# CMS Medicare Learning Network

- [MLN Matters® Articles](#)
- [MLN Products](#)
  - Preventive Services Educational Products Web page
  - MLN Products Catalog
  - Web-based training



# CMS Articles

- [MM6085 – Screening Pelvic Examination](#)
- [SE1142 Revised – Preventive Services Educational Resource for Health Care Professionals](#)
  - Lists available educational resources related to Medicare-covered preventive services

# MLN Products

- [MLN Booklet ICN 909032 – \*Screening Pap Tests and Pelvic Examinations\*](#)
- [Preventive Services Quick Reference Chart ICN 006559](#)

# Thank You!

- Follow-up email
  - Attendees will be provided a Medicare University Course Code
- Questions?

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