



Care Management: Advance Care Planning

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Today's Presenters

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Objectives

- Care Management: Making all-inclusive care plan a reality and by offering these sessions, we hope that our J6 and JK providers have a better understanding on codes available that describe care management

Agenda

- Care Management Continued Series
 - Advanced Care Planning
 - Behavioral Health Integration
 - Cognitive Assessments
 - Principal Care Management/Chronic Care Management
 - Transitional Care Management
- General
- Coding
- Billing
- Documentation
- Resources

Care Management Team



Care Management: Advanced Care Planning (ACP)

Advanced Care Planning: General

- Voluntary face-to-face service between physician/NPP and patient to discuss health care wishes
- Discussion advance directives with or without completing legal forms
- Advance directives appoints an agent and/or records person's wishes about their medical treatment based on their values and preferences
- Examples of advanced directives include
 - Living wills, instruction directives, health care proxy, health care power of attorney

Advanced Care Planning: Coding

- 99497: Advance care planning including explanation and discussion of advance directives such as standard forms (with completion of such forms, when performed), by physician or other qualified health care professional; first 30 minutes, face-to-face with patient, family member(s), and/or surrogate
- 99498: Advance care planning; each additional 30 minutes

Advanced Care Planning: Billing

- Medicare waives ACP coinsurance and Part B deductible when
 - Rendered on same day as covered AWW (HCPCS codes G0438 or G0439)
 - Offered by same provider as covered AWW
 - Billed with modifier –33 (Preventive Services)
- If Medicare denies the AWW for exceeding the once-per-year limit, Medicare can still make the ACP payment as separate Medicare Part B medically necessary service
 - Medicare applies the deductible and coinsurance to ACP service

Advanced Care Planning: Documentation

- Total time spent must be documented in medical record
- Advance care planning is preventive service only when provided in conjunction with annual wellness visit and reported with modifier 33

Advanced Care Planning: Resources

- [42 Code of Federal Regulations, Part 489, Subpart I \(Advance Directives policy\)](#)
- [2016 Hospital Outpatient Prospective Payment Systems Final Rule \(OPPS policy for ACP services\) Pages 70469–70470](#)
- [2016 Medicare Physician Fee Schedule Final Rule \(Medicare PFS policy for ACP services\) Pages 70955–70959](#)
- [Advance Care Planning \(information for Medicare patients\)](#)
- [CMS IOM Publication 100-02, Medicare Benefit Policy Manual, Chapter 15, Covered Medical and Other Health Services, Section 280.5.1](#)
- [CMS IOM Publication 100-04, Medicare Claims Processing Manual, Chapter 18, Preventive and Screening Services, Section 140.8](#)
- MLN® Educational Tool: [Medicare Wellness Visits](#) (know the differences between Medicare AWW and IPPE)
- [National Hospice and Palliative Care Organization \(download your state's advance directives\)](#)

Thank You!

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

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