








# Medicare Advantage Simplified Payer Grid

Visit Types							
<b>'Welcome to Medicare' Visit (IPPE)</b>	Once in a lifetime. Within the first 12 months of enrollment into Medicare Part B/Medicare Advantage coverage.						
<b>Initial (First) AWV</b>	Once in a lifetime. After the first 12 months of enrollment in Medicare Part B/Medicare Advantage coverage <b>AND</b> 12 months after the IPPE (if provided).						
<b>Subsequent AWV Frequency</b>	Once <u>per calendar year</u> . Can be <b>&lt;365 days</b> from the last AWV.			Once <u>every 12 months</u> . Must be <b>&gt;365 days</b> from the last AWV.			
<b>Routine Physical – Bundle with AWV?</b>	YES – IPPE, AWV	NO	YES – AWV	NO	YES – IPPE, AWV	YES – AWV	NO
<b>Problem-Focused – Bundle with AWV?</b>	YES	YES	YES	NO	YES	YES	YES
<b>Can a physical exam replace the AWV?</b>	YES	NO	YES	YES	NO	NO	NO
<b>Which physical exam codes replace the AWV G-code?</b>	Can bill as stand-alone: <b>99385-99387, 99395-99397</b>  Must bill with ICD-10 (Z00.00 or Z00.01) in the primary position: <b>99203-99205, 99213-99215, 99343-99345, 99349-99350, 99391, 99393, 99394</b>	N/A	Can bill as stand-alone: <b>99381-99387, 99391-99397</b>	Can be billed as stand-alone: <b>99381-99387, 99391-99397</b>  <i>*Aetna does not require First or Subsequent AWVs to be done, <b>however</b>, does require at least <u>1 PCP office visit per year</u> and <u>2 PCP office visits per year</u> for patients with specified chronic conditions</i>	N/A	N/A	N/A
<b>BILLING CODES Visit Types</b>	<b>IPPE ('Welcome to Medicare')</b>	<b>Initial (First) AWV</b>	<b>Subsequent AWV</b>	<b>AWV + Physical Exam</b>		<b>AWV + Problem-Focused Visit</b>	
	G0402	G0438	G0439	G0402/G0438/G0439 + 993XX + modifier -25		G0438/G0439 + 992XX + modifier -25	
<b>Additional Services Provided with AWV</b>	<b>Abdominal Aortic Aneurysm Screening U/S</b>		<b>ECG Screening (routine with 12 leads)</b>		<b>Visual Acuity Screening</b>		<b>Advanced Care Planning</b>
	Once in a lifetime *Must have certain risk factors for AAA		Once in a lifetime *IPPE only / *Performed as <u>screening</u> only		*IPPE only ( <u>Required</u> )		Annually – each AWV (if patient agrees)
<b>BILLING CODES Additional Services</b>	G0389		G0403 – with interpretation <u>and</u> report G0404 – tracing only; without interpretation or report G0405 – interpretation only		99172		99497 – First 30 min, face-to-face 99498 – Each additional 30 min (list separately in addition to code for primary procedure)

\*NWH ONLY