



Preventive Medicine, Preventive Medicine Counseling

■ DAVID STERN, MD, CPC

Q. How do you code for a Sexually Transmitted Diseases (STD) screening visit in a patient who has no symptoms? Can you use a preventive medicine code (99387-99397) and still receive reimbursement?

A. You would code based on the service provided. If you performed a physical and collected the specimen to send to the lab, then you would bill the appropriate preventive medicine Evaluation and Management (E/M) code. If the only service you provided was collection of the specimen to send to the lab, then you would only bill CPT code 99000, "Handling and/or conveyance of specimen for transfer from the office to a laboratory." Unfortunately, some insurance companies do not reimburse for this code.

If requirements were met for preventive medicine counseling, you could bill using CPT codes 99401-99404:

Preventive medicine counseling and/or risk factor reduction intervention(s) provided to an individual (separate procedure);

99401 - Approximately 15 minutes

99402 - Approximately 30 minutes

99403 - Approximately 45 minutes

99404 - Approximately 60 minutes

These codes are used to report services provided face-to-face by a physician or other qualified health care professional for the purpose of promoting health and preventing illness or injury. Risk factor reduction services are used for individuals who do not have a specific illness for which the counseling might otherwise be used as part of treatment.

The ICD-9 codes used should also be related to the reason for the screening. Use diagnosis code V01.6 for "contact with or exposure to a venereal disease," V74.5 for screening for "venereal disease," V73.88 for screening of "other specified chlamydial

diseases," or V73.98 for screening of an "unspecified chlamydial diseases."

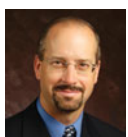
Q. When is it appropriate to use 99401-99404 versus 99381-99397? What is the difference?

A. Preventive medicine services—CPT codes 99381-99397—are typically performed when a patient comes in for a routine preventive examination. Even though you would typically perform counseling services regarding diet, exercise, etc. along with the examination, the purpose of the visit was a routine "check up"—not a visit to treat or follow up on an actual problem.

In the case of the preventive counseling visit—CPT codes 99401-99404—the patient presents to discuss a change in routine or behavior that he or she would like to make. For example, an established patient in overall good health comes to your office to discuss a diet and exercise program. You spend 15 minutes discussing exercise programs, health risks, benefits, etc. This scenario generally does not happen very frequently in the urgent care setting.

Q. We are not contracted as an urgent care clinic, but meet all of the requirements for an urgent care clinic. Can we get reimbursed if we use the S9088 code?

A. It is unlikely that any payors will reimburse for S9088 for a clinic that is not contracted as an urgent care center. Even urgent care centers often have trouble receiving reimbursement for S9088, but some are able to add reimbursement to S9088 in negotiations. Getting this added, however, is more likely for centers that can show that they offer higher-acuity services or centers that are always staffed with board-certified emergency medicine physicians.



David E. Stern, MD is a certified professional coder and board certified in Internal Medicine. He was a Director on the founding Board of UCAOA and has received the organization's Lifetime Membership Award. He is CEO of Practice Velocity, LLC (www.practicevelocity.com), PV Billing and NMN Consulting, providers of software, billing and urgent care consulting services. Dr. Stern welcomes your questions about urgent care in general and about coding issues in particular.

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