Billing Compliance Alert

SIU SOM Office of Compliance and Ethics

Tobacco-Use Cessation Counseling

Smoking Cessation Counseling CPT Codes

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99406	Smoking and tobacco use cessation counseling visit; intermediate, greater than 3 minutes
	up to 10 minutes.
99407	Smoking and tobacco use cessation counseling visit, intensive; greater than 10 minutes.

ICD-10-CM Codes

F17.210, F17.211, F17.213, F17.218, F17.219, F17.220, F17.221, F17.223, F17.228, F17.229, F17.290, F17.291, F17.293, F17.298, F17.299, T65.211A, T65.212A, T65.213A, T65.214A, T65.221A, T65.222A, T65.223A, T65.224A, T65.291A, T65.292A, T65.293A, T65.294A, and Z87.891.

NOTE: Additional ICD-10 codes may apply

Who Is Covered

<u>Medicare:</u>

Outpatient and hospitalized Medicare beneficiaries who meet the following criteria:

- Who use tobacco, regardless of whether they exhibit signs or symptoms of tobacco-related disease;
- Who are competent and alert at the time of counseling; and
- Who get counseling furnished by a qualified physician or other Medicare-recognized practitioner (i.e., Physician, Physician's Assistant, Nurse Practitioner, Clinical Nurse Specialist, and Clinical Psychologist).

Medicaid:

Medicaid provides coverage for the following individuals:

- Pregnant women;
- Up to 60-day post-partum women age 21 and over; and
- Children through age 20
 - NOTE: Tobacco use cessation provided to parent(s) and guardian(s) who use tobacco is recommended as part of anticipatory guidance. Anticipatory guidance is considered to be included in the office visit fee; it is **not** separately reimbursed.

What is Covered - Frequency

Medicare:

Medicare Part B coverage includes 2 attempts each year. Each attempt may include a maximum of 4 intermediate or intensive sessions. A total of 8 sessions are covered in a 12-month period. The qualified practitioner and the patient have flexibility to choose between intermediate or intensive cessation strategies for each session.

Medicaid:

For pregnant and up to 60-day post-partum women age 21 and over, a maximum of three quit attempts per calendar year, with up to four individual face-to-face counseling sessions per quit attempt. The 12 maximum counseling sessions include any combination of the two procedure codes listed (99406,

99407). Please note: children through age 20 are not restricted to the maximum twelve counseling sessions.

These counseling sessions must be provided by, or under the supervision of, a physician, or by any other health care professional who is legally authorized to furnish such services under State law, and who is authorized to provide Medicaid covered services other than tobacco cessation services.

Documentation Requirements

- 1. The total time spent providing smoking cessation counseling must be documented in the record.
 - a. Time spent includes only the **face-to-face** by a physician or other Medicare-recognized practitioner.
 - b. Time spent by resident or other ancillary staff may **<u>not</u>** be used to bill for smoking cessation services.
- 2. Document the type of counseling provided (e.g., referred to Quitline, provided education material, recommended nicotine replacement therapy, etc.), what was discussed during the session, resources available and follow-up. Refer to the Meaningful Use (MU) Risk Factors form in the EHR for additional options or free text.
- 3. The Meaningful Use (MU) Risk Factors form should be used to document smoking cessation counseling provided and time spent counseling the patient.
- 4. They are distinct from E/M codes and may be reported separately when performed by adding modifier 25 to show the Evaluation and Management is a separately identifiable service from smoking and tobacco use cessation counseling services. Time spent providing these services may not be used as a basis for E/M code selection.
- 5. Do not report 99406 with code 99407.

Sources:

Medicare Learning Network (MLN) Preventative Service, ICN 006559, October 2016 Handbook for Practitioners Rendering Medical Services, Chapter 200, Section 220.12 Handbook for Practitioners of Healthy Kids Services, Chapter HK-200, Section 203.10.2 MLN RHCs HCPCS Reporting Requirement and Billing Updates, SE1611 October 2016

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Revision History	Author	Description of Revision	Approval
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April 29, 2016	Brooke Whitlow	Updated – No Changes	Candice Long, Chief Compliance Officer
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