

EFFECTIVE DATE: 07|05|2007

POLICY LAST UPDATED: 09|04|2018

OVERVIEW

This policy documents our reimbursement policy when and Preventive Evaluation and Management (E & M) Service and new or established E & M are filed on the same day by the same provider.

MEDICAL CRITERIA

Not applicable.

PRIOR AUTHORIZATION

Not applicable.

POLICY STATEMENT

If a preventive medicine service and an office evaluation and management service are performed on the same date by the same provider or same group (same specialty), only one service will be reimbursed. Payment will be allowed on the first service that is submitted. Modifier 25 does not affect the allowance. Participating physicians and providers may not charge the member for the service that is not separately reimbursed, as the allowance is for the combined services. Only one copayment will apply for the office visit.

If a patient is seen on a separate encounter by the same provider or provider group (same specialty) on the same date for a problem that was not present during the preventive services exam, a separate office service may be reported and paid. (As claims systems will not be able to identify this unusual circumstance, claims will need to be submitted with documentation). The appropriate copayment will apply for the second visit on the same date of service.

Services are covered if an E & M service and preventive visit are provided on the same date by a provider from a different specialty

COVERAGE

Not applicable.

BACKGROUND

Not applicable.

CODING

Evaluation and Management Codes
99201-99215

Preventive Medicine Services
99381-99387
99391-99397

RELATED POLICIES

None.

PUBLISHED

Not applicable.

REFERENCES

None.

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