

Report on Medicare Compliance Volume 28, Number 42. November 25, 2019 Checklist for Medicare Wellness Visits and Simultaneous E/M Services

This checklist can be used to help ensure billing compliance for services provided above and beyond Medicare annual wellness visits (AWVs), says Marion Salwin, director of physician and regulatory compliance at Trinity Health in Livonia, Michigan. Medicare covers AWVs for beneficiaries, who pay no copays and deductibles, "but they often also want their chronic conditions assessed as well, and the requirements of AWVs may not include assessments of the condition," she says. AWVs are limited, and physicians often provide additional services. "Nothing prohibits them from doing more," and "from a patient standpoint, we want to make sure we can minimize their visits to a doctor's office." The left side of the checklist has Medicare requirements for AWVs, and the right side lists the signs, symptoms and comorbidities of an evaluation and management visit that are above and beyond the AWV. "I developed the tool so that this could be used by physicians, by auditors as a checklist, and for coders and billers when assigning appropriate codes," she says. Contact Salwin at <u>marion.salwin@trinity-health.org</u>.

This document is only available to subscribers. Please log in or purchase access.

Purchase Login

Copyright © 2024 by Society of Corporate Compliance and Ethics (SCCE) & Health Care Compliance Association (HCCA). No claim to original US Government works. All rights reserved. Usage is governed under this website's <u>Terms of Use</u>.