



Medicare Coding Guide

Due to the Affordable Care Act (ACA), when physicians order certain evidence-based preventive services for patients, the insurance company may cover the cost of the service, with the patient having no cost-sharing responsibility (zero-dollar). The ACA requires that most private insurance plans provide zero-dollar coverage for the preventive services recommended by four ACA designated organizations (the **U.S. Preventive Services Task Force (USPSTF)**, the **Advisory Committee on Immunization Practices (ACIP)**, **Women’s Preventive Services Initiative**, and **Bright Futures**).

As coverage is directly aligned with these evidence-based recommendations, it is important to recognize which patient populations are eligible for each preventive service without cost-sharing and which patients may require cost-sharing for the same services. This Medicare Coding Guide helps physicians ensure that they are coding services correctly to be eligible for zero-dollar coverage. Click [here](#) for more information.

Preventive Service	Coverage Guidance	CPT Codes	HCPCS Codes	Co-pay/Co-insurance Waived?	Deductible Waived?	Telehealth Eligible?	Notes
Alcohol Misuse Screening and Counseling	<p>All Medicare beneficiaries are eligible for alcohol screening.</p> <p>Medicare beneficiaries are eligible for counseling if they:</p> <ul style="list-style-type: none"> • Screen positive (those who misuse alcohol but whose levels or patterns of alcohol consumption do not meet criteria for alcohol dependence) • Are competent and alert at the time counseling is provided • Get counseling from qualified primary care physicians or other primary care practitioners in a primary care setting 		G0442, G0443	Yes	Yes	Yes	
Annual Wellnes Visit	<p>All Medicare beneficiaries who:</p> <ul style="list-style-type: none"> • Are not within 12 months after the effective date of their first Medicare Part B coverage period and • Have not received an Initial Preventive Physical Examination (IPPE) or AWW within the past 12 months 	99497, 99498	G0438, G0439, G0468	Yes	Yes	Yes	Copayment/ coinsurance and deductible waived for Advance Care Planning when furnished as an optional element of an AWW

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Bone Mass Measurements	<p>Certain Medicare beneficiaries who fall into at least one of the following categories:</p> <ul style="list-style-type: none"> • Women determined by their physician or qualified nonphysician practitioner (NPP) to be estrogen deficient and at clinical risk for osteoporosis • Individuals with vertebral abnormalities • Individuals getting (or expecting to get) glucocorticoid therapy for more than 3 months • Individuals with primary hyperparathyroidism • Individuals being monitored to assess response to U.S. Food and Drug Administration (FDA)-approved osteoporosis drug therapy 	76977, 77078, 77080, 77081, 77085	G0130	Yes	Yes		
Cardiovascular Disease Screening	All Medicare beneficiaries without apparent signs or symptoms of cardiovascular disease	80061, 82465, 83718, 84478		Yes	Yes		
Colorectal Cancer Screening	<p>For colorectal cancer screening using multitarget sDNA test:</p> <p>All Medicare beneficiaries who fall into all of the following categories:</p> <ul style="list-style-type: none"> • Aged 50 to 85 years • Asymptomatic • At average risk of developing colorectal cancer <p>For screening colonoscopies, fecal occult blood tests (FOBTs), flexible sigmoidoscopies, and barium enemas:</p> <p>All Medicare beneficiaries who fall into at least one of the following categories:</p> <ul style="list-style-type: none"> • Aged 50 and older who are at normal risk of developing colorectal cancer • At high risk of developing colorectal cancer 	81528, 82270, 00812	G0104, G0105, G0106, G0120, G0121, G0328	Yes*	Yes	*For G0106 and G0120, co-pay applies	

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Counseling to Prevent Tobacco Use	<p>Outpatient and hospitalized Medicare beneficiaries for whom all of the following are true:</p> <ul style="list-style-type: none"> • Use tobacco, regardless of whether they exhibit signs or symptoms of tobacco-related disease • Competent and alert at the time of counseling • Counseling furnished by a qualified physician or other Medicare-recognized practitioner 	99406, 99407		Yes	Yes	Yes	
Depression Screening	All Medicare beneficiaries	96127	G0444	Yes	Yes	Yes	
Diabetes Screening	<p>Medicare beneficiaries with certain risk factors for diabetes or diagnosed with pre-diabetes</p> <p>Medicare beneficiaries previously diagnosed with diabetes are not eligible for this benefit</p>	82947, 82950, 82951		Yes	Yes		
Diabetes Self-Management Training (DSMT)	<p>Certain Medicare beneficiaries when all of the following are true:</p> <ul style="list-style-type: none"> • Diagnosed with diabetes • Received an order for DSMT from the physician or qualified NPP treating the Medicare beneficiary's diabetes 		G0108, G0109	No	No	Yes	
Glaucoma Screening	<p>Medicare beneficiaries who fall into at least one of the following high risk categories:</p> <ul style="list-style-type: none"> • Individuals with diabetes mellitus • Individuals with a family history of glaucoma • African-Americans aged 50 and older • Hispanic-Americans aged 65 and older 		G0117, G0118	No	No		
Hepatitis B Virus (HBV) Screening	<p>Certain Medicare beneficiaries who fall into any of the following categories:</p> <ul style="list-style-type: none"> • Asymptomatic, nonpregnant adolescents and adults at high risk for HBV infection • Pregnant women 	Preg Female: 86704, 86706, 87340, 87341	Asymp-tomatic, Nonpreg-nant, High Risk: G0499				

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Hepatitis B Virus (HBV) Vaccine and Administration	Certain Medicare beneficiaries at intermediate or high risk for contracting hepatitis B	90739, 90740, 90743, 90744, 90746, 90747	G0010	Yes	Yes		
Hepatitis C Virus (HCV) Screening	<p>Certain adult Medicare beneficiaries who fall into at least one of the following categories:</p> <ul style="list-style-type: none"> • High risk for HCV infection • Born between 1945 and 1965 • Had a blood transfusion before 1992 		G0472	Yes	Yes		
Human Immunodeficiency Virus (HIV) Screening	Certain Medicare beneficiaries without regard to perceived risk or who are at increased risk for HIV infection, including anyone who asks for the test, or pregnant women.	80081	G0432, G0433, G0435, G0475	Yes	Yes		
Influenza Virus Vaccine and Administration	All Medicare beneficiaries	90662, 90756, 90630, 90653, 90654, 90655, 90656, 90657, 90658, 90660, 90661, 90672, 90673, 90674, 90682, 90685, 90686, 90687, 90688, 90689	Q2034, Q2034, Q2035, Q2036, Q2037, Q2038, G0008	Yes	Yes		

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Initial Preventive Physical Examination (IPPE)	All new Medicare beneficiaries who are within the first 12 months of their first Medicare Part B coverage period		G0402, G0403, G0404, G0405, G0468	Yes*	Yes*		*For G0403, G0404, and G0405 both co-pay and deductible apply
Intensive Behavioral Therapy (IBT) for Cardiovascular Disease (CVD)	<p>All Medicare beneficiaries who are:</p> <ul style="list-style-type: none"> • Competent and alert at the time counseling is provided • Furnished counseling by a qualified primary care physician or other primary care practitioner and in a primary care setting 		G0446	Yes	Yes	Yes	
Lung Cancer Screening Counseling and Annual Screening for Lung Cancer With Low Dose Computed Tomography (LDCT)	<p>Medicare beneficiaries who meet all of the following categories:</p> <ul style="list-style-type: none"> • Aged 55 through 77 • Asymptomatic (no signs or symptoms of lung cancer) • Tobacco smoking history of at least 30 pack-years (one pack-year = smoking one pack per day for one year; 1 pack = 20 cigarettes) • Current smoker or one who has quit smoking within the last 15 years • Receive a written order for lung cancer screening with LDCT that meet CMS requirements 		G0296, G0297	Yes	Yes	Yes	
Medical Nutrition Therapy (MNT)	<p>Certain Medicare beneficiaries when all of the following are true:</p> <ul style="list-style-type: none"> • Receive a referral from their treating physician • Diagnosed with diabetes or renal disease or received a kidney transplant within the last 36 months • Service provided by a registered dietitian or nutrition professional 	97802, 97803, 97804	G0270, G0271	Yes	Yes	Yes	

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Medicare Diabetes Prevention Program Expanded Model	<p>Enrolled in Medicare Part B (or getting Medicare benefits through a Medicare Advantage [Part C] Plan)</p> <ul style="list-style-type: none"> • Body Mass Index (BMI) of at least 25 (23 if the beneficiary self-identifies as Asian) on the date of the first core session • Meet one of the three following blood test requirements within the 12 months before attending the first core session: <ol style="list-style-type: none"> 1. A hemoglobin A1c test with a value between 5.7 percent and 6.4 percent 2. A fasting plasma glucose test of 110–125 mg/dL 3. A 2-hour plasma glucose test (oral glucose tolerance test) of 140–199 mg/dL • No previous diagnosis of diabetes prior to the date of the first core session (except for gestational diabetes) • Do not have end-stage renal disease (ESRD) • Has not previously received MDPP services 		G9873, G9874, G9875, G9876, G9877, G9878, G9879, G9880, G9881, G9882, G9883, G9884, G9885, G9890, G9891	Yes	Yes		
Pneumococcal Vaccine and Administration	All Medicare beneficiaries	90670, 90732	G0009	Yes	Yes		
Prolonged Preventive Services	Coverage varies according to individual Medicare preventive service		G0513, G0514	Yes	Yes	Yes	
Prostate Cancer Screening	All male Medicare beneficiaries aged 50 and older (coverage begins the day after 50th birthday)		G0102, G0103	Yes*	Yes*		For G0102 both co-pay and deductible apply
Screening for Cervical Cancer with Human Papillomavirus (HPV) Tests	All asymptomatic female Medicare beneficiaries aged 30 to 65 years		G0476	Yes	Yes		

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Screening for Sexually Transmitted Infections (STIs) and High Intensity Behavioral Counseling (HIBC) to Prevent STIs	<p>Certain Medicare beneficiaries when all of the following are true:</p> <ul style="list-style-type: none"> Sexually active adolescents and adults at increased risk for STIs Referred for this service by a primary care provider and provided by a Medicare-eligible primary care provider in a primary care setting 	86631, 86632, 87110, 87270, 87320, 87490, 87491, 87810, 87800, 87590, 87591, 87850, 86592, 86593, 86780, 87340, 87341	G0445	Yes	Yes	Yes	
Screening Mammography	All female Medicare beneficiaries aged 35 and older	77063, 77067		Yes	Yes		
Screening Pap Tests	All female Medicare beneficiaries		G0123, G0124, G0141, G0143, G0144, G0145, G0147, G0148, P3000, P3001, Q0091	Yes	Yes		

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Screening Pelvic Examinations (includes a clinical breast examination)	All female Medicare beneficiaries		G0101	Yes	Yes		
Ultrasound Screening for Abdominal Aortic Aneurysm (AAA)	<p>Medicare beneficiaries when all of the following are true:</p> <ul style="list-style-type: none"> • Certain risk factors for AAA • They received a referral from their physician, physician assistant, nurse practitioner, or clinical nurse specialist 		76706	Yes	Yes		