

# INITIAL PREVENTIVE PHYSICAL EXAMINATION (IPPE)

1. Information here pertains to Medicare only. Medicaid and private payer guidelines and codes may vary.
2. Medicare Advantage Plan patients are entitled to the same benefits, but may be required to stay in a MAP provider network to prevent copay or payment on deductible.

**Initial Preventive Physical Examination (IPPE), also known as, the “Welcome to Medicare Preventive Visit”**

## REQUIRED CONTENT:

Pt self-assessment. Provider physical exam, Ht, Wt, visual acuity, BMI or waist circumference. Assess: past medical/family hx, current meds, substance use, risk factors for depression/other mood disorders, functional ability, safety. Discuss end-of-life planning if patient consents. Counsel and refer to appropriate health/preventive services. Intensive Behavioral Therapy for Cardiovascular and Intensive Behavioral Therapy for Obesity may be billed the same day as the IPPE.

<b>ICD-10 Codes</b>	Any appropriate billable code is accepted. See the ICD-10-CM Tabular List of Diseases and Injuries in the latest ICD-10-CM Official Codes book as there are many notes to be adhered to for choosing a billable code. See also Chap 21 (Z00-Z99). Z00-Z99 are reasons for encounters other than A00-Y89 which are diagnoses or problems. For further guidance, check with your MAC
<b>HCPCS/CPT –</b> If a separate, necessary E/M service (to treat an illness or injury) done in same visit, 99201-99215 with -25 modifier may also be billed, & E/M service applies to deductible & coinsurance.	G0402 – IPPE G0403 – EKG for IPPE G0404 – EKG tracing for IPPE G0405 – EKG interpret & report for IPPE EKG not required, but if performed, would report both G0402 and the EKG code An E/M service applies to deductible and coinsurance
<b>Eligible Providers</b>	Physician (MD or DO), PA, NP, or CNS. “Incident to” rules do <b>not</b> apply.
<b>Locations</b>	Primary care settings only*
<b>Beneficiary Eligibility Criteria</b>	All beneficiaries with Part B
<b>Frequency</b>	Once per lifetime, within 1st 12 months of Part B benefit. After this, use Annual Wellness Visit code (G0402,G0438, or G0439).
<b>Beneficiary Pays</b>	G0402 No copay, Not applied to deductible

## MEDICARE DEFINITIONS:

*ABCs of Initial Preventive Physical Exam*, Medicare Learning Network, ICN 006904 January 2015.  
*IBT for Obesity*, MLN, ICN 907800 August 2012.  
*Cardiovascular Services*, MLN, ICN 907784, July 2012.

## REFERENCE:

*Cardiovascular Disease Services*, Medicare Learning Network, ICN 907784, July 2012.

*“Primary Care Setting” per Medicare – provides integrated, accessible personal health care services by clinicians accountable for addressing a large majority of personal health needs and has sustained partnerships with patients, in context of family/ community, CMS Manual System, Pub 100-03 Medicare National Coverage Determinations, Transmittal 139, November 23, 2011, Change Request 7637*

