

The Challenge of Reimbursement – Coding and Billing Tips

Physical activity assessment, prescription and counseling is often performed in the context of chronic disease management. The use of ICD10 codes and appropriate CPT codes to reflect time and complexity is a reasonable strategy for many office visits. Although reimbursement for lifestyle-related charges and services is variable, providers may find these tips helpful.

Select an Appropriate Diagnostic Code:

ICD-10 Codes (Unknown if These are Reimbursed as Stand-alone Codes)

- “Lack of physical exercise” Z72.3 (historical data is lacking regarding payer reimbursement for this code)
- Exercise counseling Z71.89
- Obesity E66.9
- Physical deconditioning R53.81
- Sedentary lifestyle Z91.89
- Muscular deconditioning R29.898

In most cases, physical activity assessment, prescription and referral is performed within the context of another condition (i.e. high blood pressure, type 2 diabetes, obesity, depression) or during a preventive health examination.

Select an Appropriate Billing Code:

CPT Codes:

- There is no specific CPT code for physical activity counseling
- Physicians and physical therapists may use therapeutic exercise codes (CPT 97110) when teaching patients exercises to develop muscle strength and endurance, joint range of motion, and flexibility

Bill for Time Using E&M (Evaluation and Management) Codes.

- 99213 (established patient E&M visit) can be used to bill if > 50% of a 15-minute office visit was spent face-to-face by a physician with the patient counseling and coordinating care.
 - The wRVU value for a 99213 E&M visit is 0.67
- 99214 (established patient E&M visit), can be used to bill if > 50% of the 25-minute office visit was spent face-to-face by a physician with the patient counseling and coordinating care.
 - The wRVU value for a 99214 E&M visit is 1.10
- 99215 (established patient E&M visit) can be used to bill if > 50% of a 40-minute office visit was spent face-to-face by a physician with the patient counseling and coordinating care.
 - The wRVU value for a 99215 E&M visit is 1.77
- PA counseling done within the context of a preventive care visit is typically covered without additional charge to the patient.

Providers need it all: Coding, Billing AND Documentation

- Coding: ICD-10 for high blood pressure and type 2 diabetes PLUS ICD-10 Lack of physical exercise
- Billing: 99214 for 25 minutes of face-to-face time with the patient
- Documentation: 50% of patient visit spent counseling on physical activity and/or exercise

Tips:

- Start with the PAVS (Physical Activity Vital Sign – can be embedded in the electronic health record)
- Clinical support staff can be trained to ask and record/document the responses
- Physician's job is to interpret the PAVS and provide advice and/or counseling
- “Bill for time” is often the best strategy for reimbursement (with E&M codes)
- Uptrain existing clinical staff + integrate health coaches to provide physical activity counseling

Fill the physical activity prescription using internal or external resources as appropriate; leverage insurance and employer benefits for physical activity (e.g. discounted gym memberships, onsite fitness facilities)