How to get paid for smoking cessation counseling

by Peter Rappo, M.D., FAAP, and J. Gary Wheeler, M.D., FAAP

Bright Futures (3rd edition) recommends that health care professionals screen patients for tobacco use and secondhand smoke exposure, encourage patients and families to stop smoking, and provide cessation strategies and resources at most visits.

A concern of busy pediatric practices is whether they will be paid for the counseling. The good news is that there is coverage and payment for smoking and tobacco use cessation counseling. In August 2010, the Centers for Medicare & Medicaid Services (CMS) announced Medicare coverage benefits for tobacco cessation counseling from a qualified physician or other Medicare recognized practitioner. Most private payers mirror CMS regarding health plan benefits.

AAP discussions with some of the largest national private carriers (Aetna, CIGNA, Humana, HealthNet and UnitedHealthcare), reveal smoking and tobacco use cessation counseling is a covered and payable benefit. Some plans, such as Aetna, have annual limits on the number of smoking cessation counseling episodes. Other carriers may have claims edits based on the age of patients receiving counseling or limiting benefits coverage for counseling only to the patient. Therefore, it is important to verify a particular health plan’s benefits. Otherwise, the family would be responsible for payment of any non-covered services, and an advanced beneficiary notice should be signed when appropriate.

One caveat to payment for tobacco cessation counseling is understanding who the patient is, meaning who is being counseled. This will affect which Current Procedural Terminology (CPT) and diagnostic codes should be used.

Counseling to the patient: Smoking and tobacco use counseling to the patient is reported using CPT code 99406 (smoking and tobacco cessation counseling visit; intermediate, greater than 3 minutes up to 10 minutes) or code 99407 (smoking and tobacco cessation counseling visit; intensive, greater than 10 minutes). Counseling lasting less than 3 minutes is considered part of an evaluation and management (E/M) service and is not paid separately. Services must be provided by a physician or other qualified health professional and must be provided face-to-face. Some Medicaid programs have not yet adopted payment for these codes.

Counseling to family members: In most circumstances, codes 99406 and 99407 can be reported only under the patient who is smoking or using tobacco. They are not to be reported under your patient when the parent or guardian is counseled on smoking cessation or tobacco use. One way to obtain payment when the parent or guardian smokes and is being counseled by the pediatrician (since carriers do not regard parents/guardians as patients of the pediatrician) is to report the E/M service (e.g., 99201-99215) using time as the key factor.

Some state Medicaid programs have made provisions for a parent to be served using the child’s beneficiary number. Due to variation among state Medicaid plans, pediatricians are encouraged to communicate with AAP chapters and state Medicaid programs to determine the optimum coding and tracking strategy in their state.

Supporting documentation: Proper documentation for codes 99406 and 99407 include the total time spent and what was discussed, including cessation techniques, resources and follow-up. Be sure to have distinct documentation to support this service if reported in conjunction with another E/M service.

Your diagnostic codes will vary based on who is being counseled. Never report tobacco use disorder or dependence if billing under the patient when the parent or guardian is the one smoking. Following are some codes you may utilize when counseling for tobacco use:

- 305.1 Tobacco use disorder (Tobacco dependence)
- V64.42 Counseling on substance use and abuse
- E869.4 Secondhand tobacco smoke (Use as a secondary code to the primary illness)

Dr. Rappo is chair of the AAP Private Payer Advocacy Advisory Committee. Dr. Wheeler is a member of the AAP Julius B. Richmond Center of Excellence faculty expert panel and the AAP Committee on State Government Affairs.

RESOURCES

The AAP Julius B. Richmond Center of Excellence offers technical assistance and tobacco control resources to help practices provide smoking cessation counseling, www2.aap.org/richmondcenter/Clinicians_ClinicalPractice.html.