

ADVANCE CARE PLANNING COVERAGE GUIDELINES

Qualified health care providers (including physicians, nurse practitioners and physician assistants) are allowed to bill for advance care planning (ACP) discussions with their Peoples Health patients.

ACP includes the explanation and discussion of advance directives, as well as possible assistance in completing standard forms (such as a living will, medical power of attorney or Louisiana Physician Orders for Scope of Treatment, more commonly referred to as LaPOST).

Providers can submit the following codes* for ACP services:

CPT code 99497

Initial 30 minutes of face-to-face counseling with the patient, family representative or caregiver
(with or without form completion)

Add-on CPT code 99498

Additional 30-minute discussions
(list code in addition to the code for the primary service)

ACP services provided as part of an annual wellness visit should be reported with modifier **-33** and billed on the same claim.

*Current as of May 2024

Coverage Documentation Requirements

CMS requires that certain information be documented during ACP discussions, including:

- The voluntary nature of the visit
- Who was present
- Time spent discussing ACP during the face-to-face encounter
- Any changes in the patient's health status
- The patient's health care wishes if they become unable to make their own decisions
- The content of any advance directives (along with completion of advance directive forms, when performed)

When applicable, also document discussion of diagnosis, prognosis and treatment options, along with risks, benefits, and the likelihood of success or failure.

This documentation does **not** need to be submitted to Peoples Health.

Services are reimbursed at Medicare allowable rates or those outlined in a provider's current Peoples Health contract.

ADDITIONAL PATIENT SUPPORT

If a Peoples Health patient needs additional assistance after an ACP conversation, consider a referral to outpatient palliative care for discussions on ACP and goals of care. Peoples Health can also offer the patient additional planning tools and a referral to a social worker.

FREQUENTLY ASKED QUESTIONS

Can any provider bill ACP codes?

The billing provider must be a physician or other qualified health care professional who is actively managing the patient's care.

Can ACP codes be used more than once?

Yes. Both ACP codes may be billed on the same day; however, CPT code 99497 must always be billed for the initial 30 minutes of the discussion, and CPT code 99498 for each additional 30 minutes. If a separate discussion is initiated later in the same day or on a different day, the codes are used in the same order.

How often can providers bill ACP codes for a given patient?

There is no limit on the number of times ACP services can be reported for a patient in a given time period. When billing for these services multiple times in a single year, providers should document changes in the patient's health status and wishes for end-of-life care.

Which patients qualify for the service?

All Peoples Health patients are entitled to ACP services. It is especially important to have discussions with patients facing an incurable condition or illness, as well as those in stable health who simply have not previously considered their options.

Does the patient pay for the discussion?

There is no cost to the patient if the discussion is part of an annual wellness visit, as this visit is considered a preventive service. If the discussion occurs during any other visit, the patient pays the cost-sharing amount for the office visit.

Does the patient have to be present?

While it is preferable that the patient be present and participating, the discussion can be between a provider and the patient's family members or surrogate. In such a case, the circumstances should be documented.

Can ACP codes be used with other evaluation and management codes?

Yes, ACP discussions can occur during a visit with a separate primary focus. However, the time documented to bill for ACP codes may not be used to meet the time-based criteria for an evaluation and management service code.

For more information, visit
[cms.gov/outreach-and-education/medicare-learning-network-mln/
mlnproducts/downloads/advancecareplanning.pdf](https://cms.gov/outreach-and-education/medicare-learning-network-mln/mlnproducts/downloads/advancecareplanning.pdf).
For additional ACP resources, contact your Peoples Health representative.



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