



Tip Sheet for Providers: Caregiving Education

Medicare will pay for certain types of caregiver education when it's provided as part of a patient's medically-necessary face-to-face visit. Caregiver education is not separately payable in Medicare Part B; however, it can be billed as part of the counseling and coordination of care services you provide during a patient visit as long as it directly involves the patient and is medically necessary. Medicaid coverage policies for these services vary by state, so you should check with your Medicaid state agency for guidance.

In general, you must submit Medicare and Medicaid claims using HIPAA-compliant codes, such as the Current Procedural Terminology (CPT) codes developed and maintained by the American Medical Association. CPT codes for patient evaluation and management (E/M) visits include three key elements:

- Patient history (includes the patient's problem/complaint, any past, family and social history and a review of body systems)
- An examination
- Medical decision-making

CPT code descriptions for patient visits may also include counseling and/or coordination of care as contributory components, but these are not required to be part of every visit.

Billing for Caregiver Education Under Medicare Part B

An E/M patient visit is typically billed based on the key elements needed to support a specific level of service. But in certain circumstances, billing can be based on the time needed to support a specific level of service. You can bill an E/M visit based on time when more than 50 percent of the physician/patient face-to-face time in the office or on the hospital floor is dominated by medically necessary counseling and/or coordination of care.

When you bill for Medicare Part B services, your documentation in the medical record must support the level and amount of work you provided to the patient in that visit. For example, to report a Level 5 visit based on the three CPT key elements (history, examination and medical

decision making), you must perform a comprehensive history, a comprehensive examination, and make highly complex medical decisions. Your documentation must support the level of work you performed: how extensive was the patient's history? Was the examination a less extensive assessment or did it involve a comprehensive single organ system or multi-system examination? How complex were the medical decisions required to make your assessment and complete a treatment plan?

The following is an example of how a visit for counseling based on time may be billed:

During a 40 minute patient visit, you spend 15 minutes taking the patient's history, performing the examination, and making your assessment. You spend the other 25 minutes of the visit counseling the patient and his family. The total time you spent on this encounter can be used to determine a specific CPT code level, as code levels have typical time associations.

The CPT code you use is also determined by where the patient E/M visit took place. Examples of settings where visits that may involve caregiver education can occur include the following:

- Doctor's office or other outpatient facility (CPT codes 99201-99215)
- A patient's home or private residence (CPT codes 99341-99350)
- An assisted living facility or other domicile (CPT codes 99324-99337).

Billing for Caregiver Education Under Medicare Part A

Medicare Part A covers home health services that include skilled nursing care and medical social services, both of which may involve caregiver education. For example, medically-necessary training activities that require skilled nursing personnel to teach a patient and his caregiver how to manage treatment regimens can be considered a skilled nursing service covered under the home health benefit.