Well Woman Exam: Updated Guidelines

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AOASM at OMED 2018
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Disclosures

• Unfortunately…
Objectives

• Understand the important components of a well woman exam at different age groups (focus on non-pregnant adults)
• Identify documentation needed for billing a preventive exam
• Discuss changes to well woman preventive recommendations
• INTERACTIVE
Purpose of Well Woman Exam

- Focused time
  - Disease prevention – screenings
  - Health promotion – diet, exercise, counseling
  - Family relationships
  - EOL care (advanced directives)
- Detect and treat any new or ongoing health problems
Timing of Well Woman Exam

- Annually
- Improves delivery of recommendations
- Build physician-patient relationship in PCMH
Common Misconceptions

- Well Woman Exam = pap and pelvic
- No pap needed → no WWE need
- Every pelvic exam includes a pap
- Every pelvic/pap includes STD screening
- Due for pap, add it to problem list
Well Woman Exam – Standard Exam

• Health Status: Medical, Surgical, Family, Menstrual, Sexual Activity/Practices, Reproductive Health
• Medications (including CAM)
• Height, Weight, BMI
• Blood Pressure (also screening)
• Basic Physical Exam
• Immunizations
## USPSTF Screening Recommendations

<table>
<thead>
<tr>
<th>Grade</th>
<th>Definition</th>
<th>Suggestions for Practice</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>The USPSTF recommends the service. There is high certainty that the net benefit is substantial.</td>
<td>Offer or provide this service.</td>
</tr>
<tr>
<td>B</td>
<td>The USPSTF recommends the service. There is high certainty that the net benefit is moderate or there is moderate certainty that the net benefit is moderate to substantial.</td>
<td>Offer or provide this service.</td>
</tr>
<tr>
<td>C</td>
<td>The USPSTF recommends selectively offering or providing this service to individual patients based on professional judgment and patient preferences. There is at least moderate certainty that the net benefit is small.</td>
<td>Offer or provide this service for selected patients depending on individual circumstances.</td>
</tr>
<tr>
<td>D</td>
<td>The USPSTF recommends against the service. There is moderate or high certainty that the service has no net benefit or that the harms outweigh the benefits.</td>
<td>Discourage the use of this service.</td>
</tr>
<tr>
<td>I</td>
<td>The USPSTF concludes that the current evidence is insufficient to assess the balance of benefits and harms of the service. Evidence is lacking, of poor quality, or conflicting, and the balance of benefits and harms cannot be determined.</td>
<td>Read the clinical considerations section of USPSTF Recommendation Statement. If the service is offered, patients should understand the uncertainty about the balance of benefits and harms.</td>
</tr>
</tbody>
</table>
USPSTF Recommendations

• Screen and Counsel
  • Tobacco, ETOH, Drug Use (B)
  • Diet / Nutrition (B)
  • Exercise / Physical Activity (B)
Clinical Breast Exam
Clinical Breast Exam

- ACOG – offer 1-3 year screening 25-39yo; annually >=40
- ACS – D
- USPSTF – I
- AFP – can be offered to all age groups but does not replace screening mammography (C)
Breast Cancer Screening
Breast Cancer Screening – Mammography

- ACOG – 1-2x yearly starting age 40; stop 75
- ACS – offer 40-45; rec starting 45; annual 40-55 then q2
  - Stop LE <10 yrs
- USPSTF – q2 years starting 50 (earlier if RF); stop 75 (B)
  - 40-49yo on individual basis (C)
- AFP
  - q1-2 years ages 50-74yo (A)
  - 40-49yo – Can offer based on individual risk factors (B)
Breast Cancer Screening – BRCA

• Family History (breast, ovary, tubal, peritoneal CA or High Risk) → counseling then BRCA if indicated
  • B

• No Family History
  • D
Pelvic Exam
Pelvic Exam

- USPSTF – I
- AFP – D
- ACOG – “when indicated”
- What about for OCPs?
  - Not needed
Cervical Cancer Screening

• Differs by Age Group
• Non-pregnant
• Just updated in August 2018
Cervical Cancer Screening: 18-20yo Øsex

- No Pap
- Cytology every 3 years alone
- Cytology w refex HPV every 3 years
- Cytology w HPV every 5 years
- HPV alone every 5 years

Doctor: are you sexually active?
Me: I'm not even physically active.
Cervical Cancer Screening: 18-20yo Øsex

- No Pap (D)
- Cytology every 3 years alone
- Cytology w refex HPV every 3 years
- Cytology w HPV every 5 years
- HPV alone every 5 years
Cervical Cancer Screening: 18-20yo +sex

- No Pap
- Cytology every 3 years alone
- Cytology w referex HPV every 3 years
- Cytology w HPV every 5 years
- HPV alone every 5 years
Cervical Cancer Screening: 18-20yo +sex

- No Pap (D)
- Cytology every 3 years alone
- Cytology w refex HPV every 3 years
- Cytology w HPV every 5 years
- HPV alone every 5 years
Cervical Cancer Screening: 21-29yo

- No Pap
- Cytology every 3 years alone
- Cytology w refex HPV every 3 years
- Cytology w HPV every 5 years
- HPV alone every 5 years
Cervical Cancer Screening: 21-29yo

- No Pap
- Cytology every 3 years alone (A)
- Cytology w refex HPV every 3 years
- Cytology w HPV every 5 years
- HPV alone every 5 years
- No HPV (D)
Cervical Cancer Screening: 30-65yo

- No Pap
- Cytology every 3 years alone
- Cytology w refex HPV every 3 years
- Cytology w HPV every 5 years
- HPV alone every 5 years
Cervical Cancer Screening: 30-65yo

- No Pap
- Cytology every 3 years alone (A)
- Cytology w refex HPV every 3 years
- Cytology w HPV every 5 years (A)
- HPV alone every 5 years (A)
Cervical Cancer Screening: >65yo

- No Pap
- Cytology every 3 years alone
- Cytology w refex HPV every 3 years
- Cytology w HPV every 5 years
- HPV alone every 5 years
Cervical Cancer Screening: >65yo

- No Pap (D) – if previously adequate negative screening
- Cytology every 3 years alone
- Cytology w refex HPV every 3 years
- Cytology w HPV every 5 years
- HPV alone every 5 years
Cervical Cancer Screening: Hysterectomy

- No Pap
- Cytology every 3 years alone
- Cytology w refex HPV every 3 years
- Cytology w HPV every 5 years
- HPV alone every 5 years
Cervical Cancer Screening: Hysterectomy

- No Pap (D) – if non-cancerous (< CIN1)
- Cytology every 3 years alone
- Cytology w refex HPV every 3 years
- Cytology w HPV every 5 years
- HPV alone every 5 years
STD Screening

• Gonorrhea/Chlamydia
  • Sexually active <= 24yo and high risk (B)

• HIV
  • 15-65yo if high risk (A) (MAW once in adult life)
  • All pregnant (A)

• Hepatitis C
  • Born between 1945-1965 (B)
Skin Cancer

A  
Asymmetry

B  
Border

C  
Color

D  
Diameter

E  
Evolving

NORMAL

Symmetrical

Borders Are Even

One Color

Smaller Than 1/4 Inch

Ordinary Mole

MELANOMA

Asymmetrical

Borders Are Uneven

Multiple Colors

Larger Than 1/4 Inch

Changing in Size, Shape and Color
Skin Cancer

- Screening (I)
- Counseling
  - 6mo-24yo w Fair Skin (B)
  - >24yo with Fair Skin (C)
  - Adults otherwise (I)
Folic Acid Supplementation

- If capable of pregnancy OR
- If planning pregnancy
- 0.4 to 0.8mg daily
Colorectal Cancer

- 50-75yo (A)
- >75yo (C)
Cardiovascular Disease

- DM
  - 40-70yo or if overweight/obese (B)

- Cholesterol
  - USPSTF 2016: Low risk → 35yo in men, 45yo in women (A)
    - Archived
  - UTD: Low risk → 40yo; High risk may need earlier screening
Cardiovascular Disease

• Statin Use
  • 40-75yo w no CVD, >=1 RF, >10% 10-year ASCVD risk (B)
  • 40-75yo w no CVD, >= 1 RF, 5-10% 10-year ASCVD risk (C)
  • >75yo with no CVD (I)

• ASA use for prevention when >10% 10-year ASCVD risk
  • 50-59yo (B)
  • 60-69yo (C)
  • <50 or >70 (I)
Mental Health
Mental Health

• Depression
  • All (B)
  • But only if way to ensure correct Dx, have appropriate Tx, and F/U

• Intimate Partner Violence
  • Child bearing age (B)
  • Must then refer
Lung Cancer

- Low dose CT scan (B)
  - 55-80yo
  - 30 pack year smoking history OR
  - Quit <15 years ago
Osteoporosis

- Bone density testing
  - >= 65yo (B)
  - Younger if high risk (B)
Falls

• Interventions for Community Dwelling Older Adults
  • Exercise (B)
  • Other interventions (C)
  • Vit D Supplementation (D)
Teacher, I has to leave now, my brain is full ...
<table>
<thead>
<tr>
<th>Age Range</th>
<th>Screening</th>
<th>Immunizations</th>
<th>Counseling</th>
</tr>
</thead>
<tbody>
<tr>
<td>18-20</td>
<td>Comprehensive history (PMH, PSH, Fam Hx, menstrual, sexual, medications)</td>
<td>Td or Tdap every 10 years</td>
<td>Healthy Diet</td>
</tr>
<tr>
<td>21-29</td>
<td>Blood pressure</td>
<td>Varicella if not immune</td>
<td>Physical Activity</td>
</tr>
<tr>
<td>30-49</td>
<td>Height, weight, BMI</td>
<td>Influenza yearly</td>
<td>Tobacco use</td>
</tr>
<tr>
<td>50-64</td>
<td>Depression</td>
<td>Pneumococcal if high risk</td>
<td>Alcohol use</td>
</tr>
<tr>
<td>&gt;=65</td>
<td>Intimate Partner Violence (Child Bearing age)</td>
<td>Hepatitis B if high risk</td>
<td>Folic acid supplementation (if capable pregnancy)</td>
</tr>
</tbody>
</table>

### Screening

- **Blood pressure**
- **Height, weight, BMI**
- **Depression**
- **Intimate Partner Violence (Child Bearing age)**
- **DM if overweight/obese or BP HTN**
- **HIV (if high risk)**
- **GC/Chlam if sexually active (<=24yo) or high risk**

### Immunizations

- **HPV <= 26yo**
- **Zoster >= 60yo**
- **Pneumococcal**

### Counseling

- **Healthy Diet**
- **Physical Activity**
- **Tobacco use**
- **Alcohol use**

### Notes

- **ASA daily if 10yr ASCVD >10% (up to 70yo)**
- **Falls (exercise intervention)**
- **Statin Use if 10yr ASCVD >10% (up to 75yo)**
Helpful Apps

ePSS

Enter the following information to retrieve recommendations from the USPSTF Preventive Services Database.

- Age: 25 Years
- Sex: both Female Male
- Pregnant: No Yes
- Tobacco User: n/a No Yes
- Sexually Active: n/a No Yes

Carilion Clinic
Helpful Apps

MOBILE APP

Key Patient Information
- Age: 
- HPV Status: 
- Pregnant: No Yes

Initial Testing Information
- Cytology Result:

Next Steps
- Add Colposcopy Followup Result
Documentation

- Comprehensive or interval past medical, surgical, family, and social history
- Comprehensive review of systems
- Description of status of chronic, stable problems and minor problems not requiring additional work
- Age-appropriate screening, counseling, tests, and immunizations
- Comprehensive physical examination
- Plan of care for follow up
Billing

• Should NOT be typical 99211-99215 or 99201-99205
• Preventive codes
• Diagnosis needs to be Well Woman
• Do NOT use modifier 52 (reduced services)
• Can use modifier 25 (except Medicaid)
  • Example: new ankle sprain with private payor that you address
  • NOT for irregular vaginal bleeding without change, starting OCP, stable OA
Billing when Medicare

- NOT the same as the Annual Wellness Visits
- Medicare does NOT cover well woman preventive services but will cover tests using other codes
  - Q0091 = Pap Smear
    - Every 2 years unless person is high risk
  - G0101 = cervical or vaginal cancer screening, pelvic, and clinical breast exam
    - 7 of 11 elements must be documented
Billing when Medicare: G0101

• Inspection/palpation of breasts (mass, tenderness, nipple d/c)
• Digital rectal exam (tone, hemorrhoids, masses)
• External genitalia (hair distribution, lesions)
• Urethral meatus (size, lesions, prolapse)
• Urethra (mass, tenderness)
• Bladder (fullness, mass)

• Vagina (discharge, lesions, cystocele, rectocele)
• Cervix (lesions, discharge, tenderness)
• Uterus (size, contour, position, mobility, support, tenderness)
• Adnexa (mass, tenderness, nodularity)
• Anus/perineum
# Coding the Well Woman Exam

<table>
<thead>
<tr>
<th>NextGen Template Settings</th>
<th>BCBS/Commercial</th>
<th>Medicaid (AL)</th>
<th>Medicaid Family Planning (AL)</th>
<th>Medicare</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>NextGen Specialty</strong></td>
<td>Family Practice or Gynecology</td>
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</tr>
<tr>
<td><strong>NextGen Visit Type</strong></td>
<td>Preventative Medicine</td>
<td>Office Visit or Office Visit - GYN</td>
<td>Office Visit or Office Visit - GYN</td>
<td>Office Visit or Office Visit - GYN</td>
</tr>
<tr>
<td><strong>NextGen HPI Template</strong></td>
<td>Annual Exam</td>
<td>Annual Exam</td>
<td>Annual Exam</td>
<td>Annual Exam</td>
</tr>
</tbody>
</table>

## Diagnosis Codes ICD-9 (ICD-10) : Document under NextGen “Assessment”

- **Well woman exam, normal findings**
  - BCBS/Commercial: V72.31 (Z01.419)
  - Medicaid (AL): Other dx + V72.31 (Z01.419)
  - Medicaid Family Planning (AL): V25.9 (Z30.9) or V25.09 (Z30.09)
  - Medicare: V72.31 (Z01.419)

- **Well woman exam, abnormal findings**
  - BCBS/Commercial: V72.31 (Z01.411)
  - Medicaid (AL): Other dx + V72.31 (Z01.411)
  - Medicaid Family Planning (AL): V25.9 (Z30.9) or V25.09 (Z30.09)
  - Medicare: V72.31 (Z01.411)

- **Pap smear, low-risk**
  - BCBS/Commercial: V76.2 (Z12.4)
  - Medicaid (AL): V76.2 (Z12.4)
  - Medicaid Family Planning (AL): V76.2 (Z12.4)
  - Medicare: V76.2 (Z12.4)

- **Pap smear, high-risk**
  - BCBS/Commercial: V76.2 (Z12.4)
  - Medicaid (AL): V76.2 (Z12.4)
  - Medicaid Family Planning (AL): V15.89 (Z77.9)
  - Medicare: V76.2 (Z12.4)

- **Mammogram, screening low-risk**
  - BCBS/Commercial: Order under WWE dx
  - Medicaid (AL): Not covered*
  - Medicaid Family Planning (AL): Not covered*
  - Medicare: Order under WWE dx

- **Mammogram, screening high-risk**
  - BCBS/Commercial: Order under WWE dx
  - Medicaid (AL): Not covered*
  - Medicaid Family Planning (AL): Not covered*
  - Medicare: Order under WWE dx

## Collection Codes : Document under NextGen “Order Management”

- **Pap collection (modifier)**
  - BCBS/Commercial: 99000 (90)
  - Medicaid (AL): Q0091 (90)
  - Medicaid Family Planning (AL): Q0091 (90) - FP
  - Medicare: Q0091 (90)

## E/M Codes : Document under NextGen “Finalize”

- **Well woman exam, no other complaints**
  - BCBS/Commercial: 9938x new pt 9939x est pt
  - Medicaid (AL): Not covered
  - Medicaid Family Planning (AL): 99205-FP new pt 99214-FP est pt
  - Medicare: G0101

- **Well woman exam + other complaints (modifier)**
  - BCBS/Commercial: 9938x + 9920x (25) new pt 9939x + 9921x (25) est pt
  - Medicaid (AL): 9920x new pt 99214 est pt
  - Medicaid Family Planning (AL): Not covered
  - Medicare: G0101 + 9920x (25) new pt G0101 + 9921x (25) est pt
Questions?
References

- AAFP Choosing Wisely. Pelvic exam or physical exams to prescribe oral contraceptive medications. https://www.aafp.org/patient-care/clinical-recommendations/all/cw-oral-contraceptives.html
- USPSTF: https://www.uspreventiveservicestaskforce.org/BrowseRec/Index#A-Z
- https://capturebilling.com/11-documentation-elements-medicares-g0101/
- https://capturebilling.com/medicare-billing-well-woman-exam-g0101-q0091/