

Determining a Medicare Beneficiary's Eligibility for Medicare Preventive Services through the Common Working File

December 2007



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Background

Every year, hundreds of thousands of Americans die prematurely from diseases that are preventable through immunization or amendable through early detection, treatment, and lifestyle changes. The good news is that every year the statistics improve. Some of this improvement can be attributed to an increased national focus on early detection and promotion of prevention and screening services.

The Centers for Medicare & Medicaid Services (CMS) recognizes the crucial role that health care providers play in promoting, providing, and educating Medicare patients about these beneficial preventive services and screenings.

To assist health care providers in providing timely preventive services to Medicare patients, CMS has made preventive services eligibility information available to health care providers through existing Medicare beneficiary eligibility inquiry systems.

This Educational Tool

This educational tool has been developed by CMS to instruct health care providers in how to access and interpret Medicare beneficiary eligibility data for Medicare preventive services.

This educational resource provides information on how to access preventive services eligibility data, how eligibility dates are calculated, and how to interpret the eligibility messages.

For information related to Medicare Preventive Services coverage, documentation or coding guidelines, go to the MLN Preventive Services Educational Resource Web Guide at http://www.cms.hhs.gov/MLNProducts/35_PreventiveServices.asp on the CMS website. This Educational Resource Web Guide contains links to educational information such as publications like *The Guide to Medicare Preventive Services for Physicians, Providers, Suppliers, and Other Health Care Professionals*, brochures, web-based training courses and policy information.

The Guide to Medicare Preventive Services for Physicians, Providers, Suppliers, and Other Health Care Professionals is a comprehensive guide that provides information for Medicare fee-for-service providers, suppliers, and other health care professionals on preventive services and screenings covered by Medicare. This guide includes information on coverage, coding, billing, and reimbursement to help fee-for-service providers effectively file claims.

Calculation of Medicare Preventive Services Eligibility Date

The eligibility data for Medicare preventive services is available through HIQA, HIQH, HUQA, ELGA, ELGB and ELGH inquiry systems. The next eligible date (if any) will be calculated by the Common Working File (CWF) which is a repository for all Medicare beneficiary utilization data and contains data on the utilization of preventive services.

CWF will use all applicable factors when calculating the next eligible date including:

- Beneficiary demographics (age, sex)
- Beneficiary Part B entitlement status
- Beneficiary Auxiliary files
- Beneficiary risk indicators
- Utilization rules

The CWF shall calculate a next eligible date (if any) for each category of preventive services for a given beneficiary. A category consists of one or more procedure codes with interdependent coverage rules that typically are intended to screen for a particular disease.

The categories of preventive services where the next eligible date will be available include:

Abdominal Aortic Aneurysms (AAA)

G0389—Ultrasound B-Scan and/or real time with image documentation; for abdominal aortic aneurysms

Cardiovascular

80061—Lipid Panel (This panel must include: 82465, 83718, and 84478)

82465—Cholesterol, serum or whole blood, total

83718—Lipoprotein, direct measurement; high density cholesterol (HDL cholesterol)

84478—Triglycerides

Colorectal

G0104—Colorectal cancer screening; flexible sigmoidoscopy

G0105—Colorectal cancer screening; colonoscopy on individual at high risk

G0106—Colorectal cancer screening; alternative to G0104, screening sigmoidoscopy, barium enema

G0120—Colorectal cancer screening; alternative to G0105, screening colonoscopy, barium enema

G0121—Colorectal cancer screening; colonoscopy on individual not meeting criteria for high risk

82270* (G0107*)—Colorectal cancer screening; fecal occult blood test, 1-3 simultaneous determinations

G0328—Colorectal cancer screening; as an alternative to G0107; fecal occult blood test, immunoassay, 1-3 simultaneous determinations

*NOTE: Effective January 1, 2007, code G0107 is discontinued and replaced with CPT code 82270.

Diabetes

82947—Glucose; quantitative, blood (except reagent strip)

82950—Glucose, post glucose dose (includes glucose)

82951—Glucose; tolerance test (GTT), three specimens (includes glucose)

Glaucoma

G0117—Glaucoma screening for high risk patients furnished by an optometrist (physician for Carrier) or ophthalmologist

G0118—Glaucoma screening for high risk patient furnished under the direct supervision of an optometrist (physician for Carrier) or ophthalmologist

Initial Preventive Physical Exam

G0344—Initial preventive physical examination; face-to-face visit, services limited to new beneficiary during the first six months of Medicare enrollment

G0366—Electrocardiogram, routine ECG with at least 12 leads; with interpretation and report, performed as a component of the initial preventive physical examination

G0367—Electrocardiogram, routine ECG with at least 12 leads; tracing only, without interpretation and report, performed as a component of the initial preventive physical examination

G0368—Electrocardiogram, routine ECG with at least 12 leads; interpretation and report only, performed as a component of the initial preventive physical examination

Mammography

77057*(76092*)—Screening mammography, bilateral (two view film study of each breast). Code Effective 1-1-2007

G0202—Screening mammography, producing direct digital image, bilateral, all views. Code Effective 4-1-2001

G0203—Screening mammography, producing direct digital image, analyzed for potential abnormalities, bilateral all views. Code Effective 4-1-2001

*NOTE: Effective January 1, 2007, code 76092 is discontinued and replaced with CPT code 77057.

Pap Test

Q0091—Screening Papanicolaou smear; obtaining, preparing and conveyance of cervical or vaginal smear to laboratory

P3000—Screening Papanicolaou smear; cervical or vaginal, up to three smears, by technician under physician supervision

- G0123—Screening cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation, screening by cytotechnologist under physician supervision
- G0143--Screening cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation, with manual screening and rescreening by cytotechnologist under physician supervision
- G0144—Screening cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation, with screening by automated system under physician supervision
- G0145--Screening cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation, screening by automated system and manual rescreening under physician supervision

- G0147—Screening cytopathology smears, cervical or vaginal, performed by automated system under physician supervision
- G0148-- Screening cytopathology smears, cervical or vaginal, performed by automated system with manual rescreening

Pelvic and Clinical Breast Exam

- G0101—Cervical or vaginal cancer screening; pelvic and clinical breast examination

Pneumococcal Pneumonia Vaccine

- 90732—Pneumococcal polysaccharide vaccine, 23-valent, adult or immunosuppressed dosage, for subcutaneous or intramuscular use

Prostate (including separate next eligible dates for digital rectal examination)

- G0102—Prostate cancer screening; digital rectal examination
- G0103—Prostate cancer screening; prostate specific antigen test (PSA), total

For each next eligible date calculation (including those where there is no next eligible date), CWF generates messages indicating key factors in the calculation. For example, if a procedure is typically covered once in a lifetime and the beneficiary has already had the procedure, the message would tell the provider that the beneficiary already had the service.

Prevention Eligibility Screen Description

In the HIQA, HIQH, HUQA, ELGA, ELGB and ELGH eligibility inquiry screens, all of the available preventive service categories listed above will appear on page 6. .

The Inquiry screen on page 6 will list all of the preventive services by category and HCPCS code. Next to each service is a column for the technical component of the service and a column for the professional component of the service.

The preventive services eligibility information appears in four columns. These columns are: preventive services category, HCPCS/CPT code, technical component date, and professional component date.

The preventive services category column shows the name of the category and in some cases an abbreviation for the preventive services category. These abbreviations are as follows:

Abdominal Aortic Aneurysms - AAA
Cardiovascular -CARDIOVASC
Colorectal –COLORECTAL
Fecal Occult Blood Test—FOB TEST
Diabetes --DIABETES
Glaucoma –GLAU
Initial Preventive Physical Examination—IPP EXAM
Mammography--MAMM
Pap Test –PAP TEST or PAPT (depending on the HCPCS code)
Pelvic and clinical breast exam—PCB EXAM
Pneumococcal pneumonia vaccine—PP VACCINE
Prostate –PROSTATE

The following pages show examples of screen shots for ELGH, ELGA, ELGB, HIQA and HIQA. The screen appearance for HUQA eligibility system does not appear in this resource as screen format vary between vendors and clearinghouses.

Screen Examples

ELGH

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ELGH                      CWF PART A ELIGIBILITY SYSTEM          ELGASAT1
07/30/2007 11:36:50      INQUIRY BY HOME HEALTH AGENCY
ENTER THE FOLLOWING FIELDS:
      HIC NUMBER          : xxxxxxxxxxxxxxxx
      SURNAME             : xxxxx
      INITIAL            : x
      DATE OF BIRTH      : 05151957  (MMDDCCYY)
      SEX CODE           : m
      REQUESTOR ID      : 1234
      INTER NO          : 00400
      NPI INDICATOR     :                N-NPI or Blank
      PROVIDER NO       : 123456
      HOST-ID           :                GL, GW, KS, MA, PA, NE, SE, SO, SW
      APP DATE          :                (MMDDCCYY)
      REASON CODE       : 1
      RESPONSE CODE     : P
  
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ELGH                      CWF PART A  ELIGIBILITY SYSTEM          ELGHCRO
07/30/2007 11:38:33      NEXT ELIGIBLE DATE                PAGE 06 OF 09
  
```

IP-REC	CN	xxxxxxxxxxxxx	NM	xxxxx	IT	x	DB	05151957	SX	M	INT	00400
PREVENTIVE	SERVICE		TECH	DTE	PROF	DTE	PREVENTIVE	SERVICE	TECH	DTE	PROF	DTE
			MMDDCCYY	MMDDCCYY					MMDDCCYY	MMDDCCYY		
CARDIOVASC	(80061)		01012005	01012005			PCB EXAM	(G0101)	GDRNOELG	GDRNOELG		
CARDIOVASC	(82465)		01012005	01012005			PP VACCINE	(90732)	07011966	07011966		
CARDIOVASC	(82718)		01012005	01012005			PROSTATE	(G0102)	05162007	05162007		
CARDIOVASC	(84478)		01012005	01012005			PROSTATE	(G0103)	05162007	05162007		
COLORECTAL	(G0104)		05152007	05152007			PAP TEST	(Q0091)	GDRNOELG	GDRNOELG		
COLORECTAL	(G0105)		01011998	01011998			DIABETES	(82947)	01012005	01012005		
COLORECTAL	(G0106)		05152007	05152007			DIABETES	(82950)	01012005	01012005		
COLORECTAL	(G0120)		05152007	05152007			DIABETES	(82951)	01012005	01012005		
COLORECTAL	(G0121)		07012001	07012001			GLAU	(G0117,G0118)	01012002	01012002		
FOB TEST	(G0107)		HCPCTERM	HCPCTERM			MAMM	(G0202,G0203)	GDRNOELG	GDRNOELG		
FOB TEST	(G0328)		05152007	05152007			MAMM	(76092)	GDRNOELG	GDRNOELG		
FOB TEST	(82270)		05152007	05152007			MAMM	(77057)	GDRNOELG	GDRNOELG		
IPP EXAM	(G0344)		SRVNOELG	SRVNOELG			PAPT	(P3000,G0123,	GDRNOELG	GDRNOELG		
IPP EXAM	(G0366)		SRVNOELG	SRVNOELG				G0143,G0144,				
IPP EXAM	(G0367)		SRVNOELG	00000000				G0145,G0147,				
IPP EXAM	(G0368)		00000000	SRVNOELG				G0148)				
AAA	(G0389)		07012007	07012007								

PF1=INQ SCREEN PF3/CLEAR=END PF7=PREV PF8=NEXT

ELGA

ELGA CWF PART A ELIGIBILITY SYSTEM ELGASAT1
07/30/2007 13:28:35 INQUIRY BY PROVIDERS

ENTER THE FOLLOWING FIELDS:

HIC NUMBER : XXXXXXXXXXXX
SURNAME : XXXX
INITIAL : X
DATE OF BIRTH : 05151957 (MMDDCCYY)
SEX CODE : M
REQUESTOR ID : 1234
INTER NO : 00400
NPI INDICATOR : N-NPI or Blank
PROVIDER NO : 123456
HOST-ID : GL, GW, KS, MA, PA, NE, SE, SO, SW
APP DATE : (MMDDCCYY)
REASON CODE : 1
RESPONSE CODE : P

ELGA CWF PART A ELIGIBILITY SYSTEM ELGACRO
07/30/2007 13:29:09 NEXT ELIGIBLE DATE PAGE 06 OF 08

IP-REC	CN	XXXXXXXXXX	NM	XXX	IT	X	DB	05151957	SX	M	INT	00400
PREVENTIVE SERVICE			TECH DTE	PROF DTE			PREVENTIVE SERVICE				TECH DTE	PROF DTE
			MMDDCCYY	MMDDCCYY							MMDDCCYY	MMDDCCYY
CARDIOVASC	(80061)		01012005	01012005			PCB EXAM (G0101)				GDRNOELG	GDRNOELG
CARDIOVASC	(82465)		01012005	01012005			PP VACCINE (90732)				07011966	07011966
CARDIOVASC	(82718)		01012005	01012005			PROSTATE (G0102)				05162007	05162007
CARDIOVASC	(84478)		01012005	01012005			PROSTATE (G0103)				05162007	05162007
COLORECTAL	(G0104)		05152007	05152007			PAP TEST (Q0091)				GDRNOELG	GDRNOELG
COLORECTAL	(G0105)		01011998	01011998			DIABETES (82947)				01012005	01012005
COLORECTAL	(G0106)		05152007	05152007			DIABETES (82950)				01012005	01012005
COLORECTAL	(G0120)		05152007	05152007			DIABETES (82951)				01012005	01012005
COLORECTAL	(G0121)		07012001	07012001			GLAU (G0117,G0118)				01012002	01012002
FOB TEST	(G0107)		HCPCTERM	HCPCTERM			MAMM (G0202,G0203)				GDRNOELG	GDRNOELG
FOB TEST	(G0328)		05152007	05152007			MAMM (76092)				GDRNOELG	GDRNOELG
FOB TEST	(82270)		05152007	05152007			MAMM (77057)				GDRNOELG	GDRNOELG
IPP EXAM	(G0344)		SRVNOELG	SRVNOELG			PAPT (P3000,G0123,				GDRNOELG	GDRNOELG
IPP EXAM	(G0366)		SRVNOELG	SRVNOELG			G0143,G0144,					
IPP EXAM	(G0367)		SRVNOELG	00000000			G0145,G0147,					
IPP EXAM	(G0368)		00000000	SRVNOELG			G0148)					
AAA	(G0389)		07012007	07012007								

PF1=INQ SCREEN PF3/CLEAR=END PF7=PREV PF8=NEXT

ELGB

ELGB CWF PART B ELIGIBILITY SYSTEM ELGBSAT1
07/30/2007 12:49:51 INQUIRY BY PROVIDERS

ENTER THE FOLLOWING FIELDS:

HIC NUMBER : xxxxxxxxxxxx
SURNAME : xxxx
INITIAL : x
DATE OF BIRTH : 05151957 (MMDDCCYY)
SEX CODE : M
REQUESTOR ID : 1234
CARRIER NO : 00650
NPI INDICATOR : N-NPI or Blank
PROVIDER NO : 123456
HOST-ID : GL, GW, KS, MA, PA, NE, SE, SO, SW
APP DATE : (MMDDCCYY)
REASON CODE : 1
RESPONSE CODE : P

ELGB CWF PART B ELIGIBILITY SYSTEM ELGBCRO
07/30/2007 12:50:22 NEXT ELIGIBLE DATE PAGE 06 OF 08

IP-REC	CN	xxxxxxxxxxx	NM	xxxx	IT	x	DB	05151957	SX	M	CAR	00650
PREVENTIVE	SERVICE	TECH	DTE	PROF	DTE	PREVENTIVE	SERVICE	TECH	DTE	PROF	DTE	
		MMDDCCYY	MMDDCCYY					MMDDCCYY	MMDDCCYY			
CARDIOVASC	(80061)	01012005	01012005	PCB	EXAM	(G0101)	GDRNOELG	GDRNOELG				
CARDIOVASC	(82465)	01012005	01012005	PP	VACCINE	(90732)	07011966	07011966				
CARDIOVASC	(82718)	01012005	01012005	PROSTATE	(G0102)		05162007	05162007				
CARDIOVASC	(84478)	01012005	01012005	PROSTATE	(G0103)		05162007	05162007				
COLORECTAL	(G0104)	05152007	05152007	PAP	TEST	(Q0091)	GDRNOELG	GDRNOELG				
COLORECTAL	(G0105)	01011998	01011998	DIABETES	(82947)		01012005	01012005				
COLORECTAL	(G0106)	05152007	05152007	DIABETES	(82950)		01012005	01012005				
COLORECTAL	(G0120)	05152007	05152007	DIABETES	(82951)		01012005	01012005				
COLORECTAL	(G0121)	07012001	07012001	GLAU	(G0117,G0118)		01012002	01012002				
FOB	TEST	(G0107)	HCPCTERM	HCPCTERM	MAMM	(G0202,G0203)	GDRNOELG	GDRNOELG				
FOB	TEST	(G0328)	05152007	05152007	MAMM	(76092)	GDRNOELG	GDRNOELG				
FOB	TEST	(82270)	05152007	05152007	MAMM	(77057)	GDRNOELG	GDRNOELG				
IPP	EXAM	(G0344)	SRVNOELG	SRVNOELG	PAPT	(P3000,G0123,	GDRNOELG	GDRNOELG				
IPP	EXAM	(G0366)	SRVNOELG	SRVNOELG		G0143,G0144,						
IPP	EXAM	(G0367)	SRVNOELG	00000000		G0145,G0147,						
IPP	EXAM	(G0368)	00000000	SRVNOELG		G0148)						
AAA		(G0389)	07012007	07012007								

PF1=INQ SCREEN PF3/CLEAR=END PF7=PREV PF8=NEXT

HIQA

CWF PART A INQUIRY

RESPONSE CODE : C
 CLAIM NUMBER : xxxxxxxxxxxx
 SURNAME : xxxx
 INITIAL : x
 DATE OF BIRTH : 05151957
 SEX CODE : M
 REQUESTOR ID : 1234
 PRINTER DEST :
 INTER NO : 00400
 NPI INDICATOR : N-NPI or Blank
 PROVIDER NO : 123456
 HOST-ID : GL, GW, KS, MA, PA, NE, SE, SO, SW
 APP DATE :
 REASON CODE : 1

HIQCOP CWF PART A INQUIRY REPLY PAGE 06 OF 09
 IP-REC CN xxxxxxxxxxxx NM xxxx IT x DB 05151957 SX M INT 00400

PREVENTIVE SERVICE	TECH DTE	PROF DTE	PREVENTIVE SERVICE	TECH DTE	PROF DTE
	MMDDCCYY	MMDDCCYY		MMDDCCYY	MMDDCCYY
CARDIOVASC (80061)	01012005	01012005	PCB EXAM (G0101)	GDRNOELG	GDRNOELG
CARDIOVASC (82465)	01012005	01012005	PP VACCINE (90732)	07011966	07011966
CARDIOVASC (82718)	01012005	01012005	PROSTATE (G0102)	05162007	05162007
CARDIOVASC (84478)	01012005	01012005	PROSTATE (G0103)	05162007	05162007
COLORECTAL (G0104)	05152007	05152007	PAP TEST (Q0091)	GDRNOELG	GDRNOELG
COLORECTAL (G0105)	01011998	01011998	DIABETES (82947)	01012005	01012005
COLORECTAL (G0106)	05152007	05152007	DIABETES (82950)	01012005	01012005
COLORECTAL (G0120)	05152007	05152007	DIABETES (82951)	01012005	01012005
COLORECTAL (G0121)	07012001	07012001	GLAU (G0117,G0118)	01012002	01012002
FOB TEST (G0107)	HCPCTERM	HCPCTERM	MAMM (G0202,G0203)	GDRNOELG	GDRNOELG
FOB TEST (G0328)	05152007	05152007	MAMM (76092)	GDRNOELG	GDRNOELG
FOB TEST (82270)	05152007	05152007	MAMM (77057)	GDRNOELG	GDRNOELG
IPP EXAM (G0344)	SRVNOELG	SRVNOELG	PAPT (P3000,G0123,	GDRNOELG	GDRNOELG
IPP EXAM (G0366)	SRVNOELG	SRVNOELG	G0143,G0144,		
IPP EXAM (G0367)	SRVNOELG	00000000	G0145,G0147,		
IPP EXAM (G0368)	00000000	SRVNOELG	G0148)		
AAA (G0389)	07012007	07012007			

PF1=INQ SCREEN PF3/CLEAR=END PF7=PREV PF8=NEXT

HIQH

CWF PART A INQUIRY

RESPONSE CODE : C
CLAIM NUMBER : xxxxxxxxxxxx
SURNAME : xxxxx
INITIAL : x
DATE OF BIRTH : 05151957
SEX CODE : M
REQUESTOR ID : 1234
PRINTER DEST :
INTER NO : 00400
NPI INDICATOR : N-NPI or Blank
PROVIDER NO : 123456
HOST-ID : GL, GW, KS, MA, PA, NE, SE, SO, SW
APP DATE :
REASON CODE : 1

HIQHCR0 CWF HOME HEALTH INQUIRY REPLY PAGE 06 OF 10
IP-REC CN xxxxxxxxxxxx NM xxx IT x DB 05151957 SX M INT 00400

PREVENTIVE SERVICE	TECH DTE	PROF DTE	PREVENTIVE SERVICE	TECH DTE	PROF DTE
	MMDDCCYY	MMDDCCYY		MMDDCCYY	MMDDCCYY
CARDIOVASC (80061)	01012005	01012005	PCB EXAM (G0101)	GDRNOELG	GDRNOELG
CARDIOVASC (82465)	01012005	01012005	PP VACCINE (90732)	07011966	07011966
CARDIOVASC (82718)	01012005	01012005	PROSTATE (G0102)	05162007	05162007
CARDIOVASC (84478)	01012005	01012005	PROSTATE (G0103)	05162007	05162007
COLORECTAL (G0104)	05152007	05152007	PAP TEST (Q0091)	GDRNOELG	GDRNOELG
COLORECTAL (G0105)	01011998	01011998	DIABETES (82947)	01012005	01012005
COLORECTAL (G0106)	05152007	05152007	DIABETES (82950)	01012005	01012005
COLORECTAL (G0120)	05152007	05152007	DIABETES (82951)	01012005	01012005
COLORECTAL (G0121)	07012001	07012001	GLAU (G0117,G0118)	01012002	01012002
FOB TEST (G0107)	HCPCTERM	HCPCTERM	MAMM (G0202,G0203)	GDRNOELG	GDRNOELG
FOB TEST (G0328)	05152007	05152007	MAMM (76092)	GDRNOELG	GDRNOELG
FOB TEST (82270)	05152007	05152007	MAMM (77057)	GDRNOELG	GDRNOELG
IPP EXAM (G0344)	SRVNOELG	SRVNOELG	PAPT (P3000,G0123,	GDRNOELG	GDRNOELG
IPP EXAM (G0366)	SRVNOELG	SRVNOELG	G0143,G0144,		
IPP EXAM (G0367)	SRVNOELG	00000000	G0145,G0147,		
IPP EXAM (G0368)	00000000	SRVNOELG	G0148)		
AAA (G0389)	07012007	07012007			

PF1=INQ SCREEN PF3/CLEAR=END PF7=PREV PF8=NEXT

Eligibility Messages

The technical date and professional date fields are used to communicate the eligibility information to the provider. This information can be in the form of the next eligible date or in the form of a message indicating the eligibility status.

The provider must keep in mind that all of the beneficiary preventive services eligibility dates rely on claims history. As claims are processed, the eligibility dates may change so it is important that providers check the eligibility status before providing a service. Not only should a provider check the Medicare eligibility data, they should also:

- Interview the beneficiary about their utilization of Medicare preventive services
- Compare results from the preventive services inquiry and the interview with the beneficiary
- Review Medicare preventive services coverage guidelines
- Evaluate the beneficiary for increased risk of chronic disease that may warrant more frequent Medicare preventive service screenings

It is important for the provider to check not only the preventive services category but also the HCPCS code for the service they are going to provide when checking a beneficiary's Medicare preventive service eligibility. Following these steps will help a provider keep a beneficiary up-to-date on all of their Medicare preventive services screenings.

In some cases, the provider may see that the professional and technical dates differ. This may be due to a difference in when the claims were processed or when the beneficiary received the service. The technical and professional dates may also differ because not all providers will bill for both the technical and professional service or some HCPCS codes do not have either a professional or technical component.

Interpretation of Messages in HIQA, HIQH, ELGA, ELGB, ELGH

For providers using HIQA, HIQH, ELGA, ELGB, ELGH, the eligibility date displays in MMDDCCYY format. The eligibility date display indicates the next date the beneficiary is eligible for that preventive service. In the event that the beneficiary is not eligible for the preventive service, the technical and professional date fields will display an abbreviated message that explains why the beneficiary is not eligible. These abbreviated messages are:

NOPTBENT-Beneficiary Not Entitled to Part B
RECEIVED-Beneficiary Already Received Service
DODNOENT-Beneficiary Not Eligible Due to Date of Death
GDRNOELG-Beneficiary Not Eligible Due to Gender
AGENOELG-Beneficiary Not Eligible Due to Age
SRVNOELG-Beneficiary Not Eligible for the Service
VACCINTD-Beneficiary Already Vaccinated
HCPCTERM-HCPCS Terminated Prior to Next Eligible Date
00000000—Service Not Applicable

Interpretation of Messages in HUQA

Providers using HUQA for eligibility status and for some providers who use vendors or clearinghouses, will see a 3-4 digit eligibility message in the technical and professional date or the next eligible date, in Julian format, YYYYDDD. While the calculations for the next eligible date and the messages are the same, the format of the screen may differ between vendors/clearing houses.

Providers receiving inquiry data via the HUQA may see the following messages explaining why the beneficiary is not eligible:

PTB-Beneficiary Not Entitled to Part B
RCVD-Beneficiary Already Received Service
DOD-Beneficiary Not Eligible Due to Date of Death
GDR-Beneficiary Not Eligible Due to Gender
AGE-Beneficiary Not Eligible Due to Age
SRV-Beneficiary Not Eligible for the Service
VAC-Beneficiary Already Vaccinated
0000-Service Not Applicable
TERM-HCPCS Terminated Prior to Next Eligible Date

Standard Messages and Next Eligible Date Calculations

There are several messages generated by CWF that are not tied into HCPCS codes but use other beneficiary demographic data. These messages apply to all of the Medicare preventive services categories. These messages are:

Beneficiary Not Entitled to Part B (NOPTBENT or PTB)

—this message appears if the beneficiary does not have Medicare Part B or if the beneficiary's next eligible date for the preventive service is after their Medicare Part B termination date.

Beneficiary Not Eligible due to Date of Death (DODNOENT or DOD)

--this message appears when the next eligible date for the preventive service is after the beneficiary's date of death.

The following pages describe the messages a provider may see in addition to the standard messages for a specific Medicare preventive service. It is important to keep in mind that the eligibility date is calculated based on claims payment history which includes other HCPCS codes not specifically part of the HCPCS code for the service the provider intends to provide. When inquiring about a beneficiary's eligibility status for a preventive service, the provider should verify the HCPCS code for the service they intend to provide and follow Medicare coverage guidelines for that service. The Medicare preventive services coverage guidelines can be found on the MLN Preventive Services Educational Resource Web Guide at http://www.cms.hhs.gov/MLNProducts/35_PreventiveServices.asp on the CMS website.

Abdominal Aortic Aneurysms (AAA)

G0389—Ultrasound B-Scan and/or real time with image documentation; for abdominal aortic aneurysms

Eligibility date

—If the beneficiary has received these services with a service date of 07/01/2007 and after, the next eligible date will display the message 'Beneficiary Already Received Service'. This is a once in a lifetime benefit.

Cardiovascular

80061—Lipid Panel (This panel must include: 82465, 83718, and 84478)

82465—Cholesterol, serum or whole blood, total

83718—Lipoprotein, direct measurement; high density cholesterol (HDL cholesterol)

84478--Triglycerides

Eligibility date

—If the beneficiary's Medicare Part B effective date is prior to 01/01/2005, the next eligible date for this benefit will be 01/01/2005; however, if the beneficiary's effective date is after 01/01/2005, the next eligible date will be the Medicare Part B effective date.

—If the beneficiary has received this service, the next eligible date will be based on Medicare coverage guidelines.

Colorectal

G0104—Colorectal cancer screening; flexible sigmoidoscopy

G0105—Colorectal cancer screening; colonoscopy on individual at high risk

G0106—Colorectal cancer screening; alternative to G0104,
screening sigmoidoscopy, barium enema

G0120—Colorectal cancer screening; alternative to G0105, screening
colonoscopy, barium enema

G0121—Colorectal cancer screening; colonoscopy on individual not meeting
criteria for high risk

82270(G0107)—Colorectal cancer screening; fecal occult blood test, 1-3 simultaneous
determinations

G0328—Colorectal cancer screening; as an alternative to G0107; fecal occult
blood test, immunoassay, 1-3 simultaneous determinations

Eligibility date

—If the beneficiary's Medicare Part B effective date is prior to 01/01/1998, then the next eligible date will be 01/01/1998. On HCPCS G0121 the next eligible date will be 07/01/2001, for HCPCS G0328 the next eligible date will be 01/01/2004 and for CPT code 82270 the next eligible date will be 01/01/2007. If the beneficiary's effective date is after the dates noted, the next eligible date will be the Medicare Part B effective date

—If the beneficiary has received these services, the next eligible date will be based on Medicare coverage guidelines.

Beneficiary Not Eligible Due To Age (AGENOELG or AGE)

--this message appears for when the beneficiary is less than 50 years old and does not meet high risk criteria.

Diabetes

82947—Glucose; quantitative, blood (except reagent strip)

82950—Glucose, post glucose dose (includes glucose)

82951—Glucose; tolerance test (GTT), three specimens (includes glucose)

Eligibility date

—If the beneficiary's Medicare Part B effective date is prior to 01/01/2005, the next eligible date for this benefit will be 01/01/2005; however, if the beneficiary's effective date is after 01/01/2005, the next eligible date will be the Medicare Part B effective date.

—If the beneficiary has received these services, the next eligible date will be based on Medicare coverage guidelines.

Glaucoma

G0117—Glaucoma screening for high risk patients furnished by an optometrist (physician for Carrier) or ophthalmologist

G0118—Glaucoma screening for high risk patient furnished under the direct supervision of an optometrist (physician for Carrier) or ophthalmologist

Eligibility date

—If the beneficiary's Medicare Part B effective date is prior to 01/01/2002, the next eligible date for this benefit will be 01/01/2002; however, if the beneficiary's effective date is after 01/01/2002, the next eligible date will be the Medicare Part B effective date.

—If the beneficiary has received these services, the next eligible date will be based on Medicare coverage guidelines.

Initial Preventive Physical Exam

G0344—Initial preventive physical examination; face-to-face visit, services limited to new beneficiary during the first six months of Medicare enrollment

G0366—Electrocardiogram, routine ECG with at least 12 leads; with interpretation and report, performed as a component of the initial preventive physical examination

G0367—Electrocardiogram, routine ECG with at least 12 leads; tracing only, without interpretation and report, performed as a component of the initial preventive physical examination

G0368—Electrocardiogram, routine ECG with at least 12 leads; interpretation and report only, performed as a component of the initial preventive physical examination

Eligibility date

—If the beneficiary's Medicare Part B effective date is after 01/01/2005, the next eligible date will be the Medicare Part B effective date.

—If the beneficiary's Medicare Part B effective date is between 1/1/2005 through 3/31/2005, then the next eligible date will always be 4/1/2005 and not the Medicare Part B effective date.

Beneficiary Not Eligible for Service (SRVNOELG or SRV)

--this message will be displayed when the beneficiary's Part B effective date is prior to 01/01/2005.

Beneficiary Already Received the Service (RECEIVED or RCVD)

--this message will be displayed when a claim with the HCPCS codes has been billed.

Service Not Applicable (00000000 or 000)

--this message will be displayed for the Professional component of HCPCS G0367 and the Technical component of HCPCS G0368.

Mammography

77057(76092)—Screening mammography, bilateral (two view film study of each breast).

Code Effective 1-1-2007

G0202—Screening mammography, producing direct digital image, bilateral, all views. Code Effective 4-1-2001

G0203—Screening mammography, producing direct digital image, analyzed for potential abnormalities, bilateral all views. Code Effective 4-1-2001

Eligibility date

—If the beneficiary's Medicare Part B effective date is prior to 01/01/1998, the next eligible date for this benefit will be 01/01/1998. On CPT code 77057 the next eligible date will be 01/01/2007. However, if the beneficiary's effective date is after the dates noted, the next eligible date will be the Medicare Part B effective date.

—If the beneficiary has received these services, the next eligible date will be based on Medicare coverage guidelines.

Beneficiary Not Eligible Due to Gender (GDRNOELG or GDR)

--this message will be displayed if the beneficiary's gender is male.

Beneficiary Not Eligible Due to Age (AGENOELG or AGE)

--this message will be displayed if the beneficiary's age is under 35.

Beneficiary Already Received the Service (RECEIVED or RCVD)

--this message will be displayed when the beneficiary is between 35 and 39 and mammography already billed.

Pap Test

- Q0091—Screening Papanicolaou smear; obtaining, preparing and conveyance of cervical or vaginal smear to laboratory
- P3000—Screening Papanicolaou smear; cervical or vaginal, up to three smears, by technician under physician supervision
- G0123—Screening cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation, screening by cytotechnologist under physician supervision
- G0143--Screening cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation, with manual screening and rescreening by cytotechnologist under physician supervision
- G0144—Screening cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation, with screening by automated system under physician supervision
- G0145--Screening cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation, screening by automated system and manual rescreening under physician supervision
- G0147—Screening cytopathology smears, cervical or vaginal, performed by automated system under physician supervision
- G0148-- Screening cytopathology smears, cervical or vaginal, performed by automated system with manual rescreening

Eligibility date

—For HCPCS Q0091--If the beneficiary's Medicare Part B effective date is prior to 07/01/2005, the next eligible date for this benefit will be 07/01/2005; however, if the beneficiary's effective date is after 07/01/2005, the next eligible date will be the Medicare Part B effective date.

—If the beneficiary has received these services, the next eligible date will be based on Medicare coverage guidelines.

Beneficiary Not Eligible Due to Gender (GDRNOELG or GDR)

--this message will be displayed if the beneficiary's gender is male.

—For HCPCS P3000, G0123, G0143, G0144, G0145, G0147 or G0148 --If the beneficiary's Medicare Part B effective date is prior to 07/01/2001, the next eligible date for this benefit will be 07/01/2001; however, if the beneficiary's effective date is after 07/01/2001, the next eligible date will be the Medicare Part B effective date.

—If the beneficiary has received these services, the next eligible date will be based on Medicare coverage guidelines.

Beneficiary Not Eligible Due to Gender (GDRNOELG or GDR)

--this message will be displayed if the beneficiary's gender is male.

Pelvic and Clinical Breast Exam

G0101—Cervical or vaginal cancer screening; pelvic and clinical breast Examination

Eligibility date

—If the beneficiary’s Medicare Part B effective date is prior to 07/01/2001, the next eligible date for this benefit will be 07/01/2001; however, if the beneficiary’s effective date is after 07/01/2001, the next eligible date will be the Medicare Part B effective date.

—If the beneficiary has received these services, the next eligible date will be based on Medicare coverage guidelines.

Beneficiary Not Eligible Due to Gender (GDRNOELG or GDR)

--this message will be displayed if the beneficiary’s gender is male.

Pneumococcal Pneumonia Vaccine

90732—Pneumococcal polysaccharide vaccine, 23-valent, adult or immunosuppressed dosage, for subcutaneous or intramuscular use

Eligibility date

—This service is allowed on or after the beneficiary’s Medicare Part B effective date.

Beneficiary Already Vaccinated (VACCINTD or VAC)

—this message will be displayed if the beneficiary has already received the Pneumococcal Pneumonia Vaccine.

Prostate (including separate next eligible dates for digital rectal examination)

G0102—Prostate cancer screening; digital rectal examination

G0103—Prostate cancer screening; prostate specific antigen test (PSA), total

Eligibility date

—If the beneficiary’s Medicare Part B effective date is prior to 01/01/2000, the next eligible date for this benefit will be 01/01/2000; however, if the beneficiary’s effective date is after 01/01/2000, the next eligible date will be the Medicare Part B effective date.

—If the beneficiary has received these services, the next eligible date will be based on Medicare coverage guidelines.

Beneficiary Not Eligible Due to Gender (GDRNOELG or GDR)

--this message will be displayed if the beneficiary’s gender is female.

Beneficiary Not Eligible Due To Age (AGENOELG or AGE)

--this message will be displayed if the beneficiary's date of birth is less than 50 years old + 1 day.

It is very important that health care providers interpret this eligibility information correctly and verify the information with the patient. The preventive services information available through this system is only as accurate as the health care claims processed. Health care providers should verify information with their Medicare beneficiaries. By making this eligibility information available to health care providers, providers and beneficiaries can work together to keep up-to-date on these important preventive services.

