Advance Care Planning

We reimburse providers for holding and documenting goals of care discussions with their patients (focusing on member preferences).

Advance care planning (ACP) benefit
- The ACP benefit covers one conversation per day with no annual limit.
- To receive reimbursement, submit CPT 99497 (for the first 30-minute increment), plus CPT 99498 (for any additional 15- to 30-minute increments) with the appropriate modifier.
- For Medicare Advantage members, there is no patient copay if you add this activity to your patient’s telehealth (conducted via audio and video) or in-person visit and submit CPT 99497 or 99498 separately from other services for that visit.

Advance care planning conversations may include
- Current medical status and prognosis
- Management of physical/psychological symptoms
- Social, cultural and/or spiritual strengths; values, practices, concerns and goals of care
- ACP documents (e.g., advance directives, Durable Power of Attorney, POLST) with or without completing these and/or relevant legal forms
- Designating a medical decision-maker

Reimbursement policies
- The Palliative Care ‘Incident To’ Services (Administrative #136) (Medicare Administrative #136) policy includes information about reimbursement for non-physician providers (NPPs) (e.g., physician assistant, nurse practitioner, clinical nurse specialist, registered nurse, nursing assistant, social worker, chaplain, nurse’s aide, nurse midwife, therapy aide, clinical psychologist and home health aid).
- The Virtual Care (Administrative #132) policy includes information about reimbursement for the following telehealth codes: CPT 99497 and 99498.

View these reimbursement policies on our provider website at asuris.com: Library> Policies and Guidelines.

Refer a patient to our palliative care case management team
- Call: 1 (866) 543-5765
- Complete a Care Management Referral Request on our website: Library>Forms.

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