

## SCREENING PAP SMEAR WITH A PREVENTIVE EVAL

Policy # 76

Implementation Date: 9/1/18

Revision Dates: 11/8/18

**Disclaimer:**

1. Policies are subject to change without notice.
2. Policies outline coverage determinations for SelectHealth Commercial, SelectHealth Advantage (Medicare), and SelectHealth Community Care (Medicaid) plans. Refer to the "Policy" section for more information.

**Description**

CPT guidelines state: "The comprehensive nature of Preventive Medicine Services codes 99381–99397 reflects an age and gender appropriate history/exam." SelectHealth recognizes this to include services described by code Q0091. Further, the American Congress of Obstetricians and Gynecologists, states that code Q0091 should not be reported to non-Medicare payers for Pap smear collection, as the collection of a Pap smear is included in the preventive evaluation and management service. Medicare developed code Q0091 for the exclusive purpose of reporting services provided to Medicare patients in which preventive evaluation and management services are not covered.

**Commercial Plan Policy**

SelectHealth Commercial Plans will never separately reimburse code Q0091 when billed with a Preventive Evaluation and Management services as it is considered included in the services described by codes 99381–99397.

**SelectHealth Advantage (Medicare/CMS)**

SelectHealth Advantage **will follow the commercial plan policy.**

**SelectHealth Community Care (Medicaid)**

SelectHealth Community Care will deny code Q0091 when it is billed with codes 99381–99397.

**Applicable Codes**

Codes	Descriptions
Q0091	Screening Papanicolaou smear; obtaining, preparing and conveyance of cervical or vaginal smear to laboratory
99381	Initial comprehensive preventive medicine evaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, new patient; infant (age younger than 1 year)
99382	Initial comprehensive preventive medicine evaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, new patient; early childhood (age 1 through 4 years)

99383	Initial comprehensive preventive medicine evaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, new patient; late childhood (age 5 through 11 years)
99384	Initial comprehensive preventive medicine evaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, new patient; adolescent (age 12 through 17 years)
99385	Initial comprehensive preventive medicine evaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, new patient; 18-39 years
99386	Initial comprehensive preventive medicine evaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, new patient; 40-64 years
99387	Initial comprehensive preventive medicine evaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, new patient; 65 years and older
99391	Periodic comprehensive preventive medicine reevaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, established patient; infant (age younger than 1 year)
99392	Periodic comprehensive preventive medicine reevaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, established patient; early childhood (age 1 through 4 years)
99393	Periodic comprehensive preventive medicine reevaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, established patient; early childhood (age 1 through 4 years)
99394	Periodic comprehensive preventive medicine reevaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, established patient; late childhood (age 5 through 11 years)
99395	Periodic comprehensive preventive medicine reevaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, established patient; 18-39 years
99396	Periodic comprehensive preventive medicine reevaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, established patient; 40-64 years
99397	Periodic comprehensive preventive medicine reevaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, established patient; 65 years and older

#### Sources

1. *Current Procedural Terminology (CPT®)*, (2018) – American Medical Association
2. ICD-10-CM Coding Guidelines. (2018, January 1). Retrieved July 8, 2018, from [https://www.encoderprofp.com/epr4payers/physicianDoc/pdf/i10cm/i10\\_guidelines.pdf](https://www.encoderprofp.com/epr4payers/physicianDoc/pdf/i10cm/i10_guidelines.pdf)

3. American College of Obstetricians and Gynecologists Practice Management  
[https://www.acog.org/About\\_ACOG/ACOG\\_Departments/Coding/CodingTipReportingHCPCSCodeQ0091](https://www.acog.org/About_ACOG/ACOG_Departments/Coding/CodingTipReportingHCPCSCodeQ0091)

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The codes for treatments and procedures applicable to this policy are included for informational purposes. Inclusion or exclusion of a procedure, diagnosis or device code(s) does not constitute or imply member coverage or provider reimbursement policy. Please refer to the member's contract benefits in effect at the time of service to determine coverage or non-coverage of these services as it applies to an individual member.

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Members may contact Customer Service at the phone number listed on their member ID Card to discuss their benefits more specifically. Providers with questions about this Coverage Policy may call SelectHealth Provider Relations at 801-442-3692.

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