
New Claim Edits Apply to Annual Wellness Visits

It's important for providers to bill the correct procedure code in the right order when filing annual wellness visit claims for Florida Blue patients to avoid denials. As a reminder, the following two codes should be used when billing for annual wellness visits:

- G0438 (Initial Annual Wellness Visit) - Annual wellness visit that includes a personalized prevention plan of service. This code can only be billed *once* per member per lifetime.
- G0439 (Subsequent Annual Wellness Visit) - Annual wellness visit that includes a personalized prevention plan of service. This code can only be billed *once in a calendar year* (12 months) *after* an initial wellness visit (G0438) has occurred.

New Claim Edits

Starting August 1, 2018, we will implement three new claim edits to ensure annual wellness visit claims are billed and paid correctly. A summary is provided below:

- **G0438** billed more than once in member's lifetime will be denied with the following message, *"G0438 billed multiple times - have exceeded Lifetime benefit."*
- **G0439** billed multiple times within a calendar year (12 months) by the same or different provider will be denied with the following message, *"Subsequent AWV-G0439 calendar year benefit has been exceeded."*
- **G0438 (initial annual wellness visit) billed after G0439 (subsequent annual wellness visit)** by the same or different provider will be denied with the message, *"Initial AWV-G0438 is invalid after the Subsequent AWV-G0439"*.

Remember to check member eligibility and benefits electronically through Availity^{®1} at availity.com. If you have questions about this information, please call the Provider Contact Center at 800-727-2227.

¹Availity LLC is a multi-payer joint venture company. For more information or to register, visit Availity's website at Availity.com. 900-1080-0618