

Upcoming Code Edits (Effective Nov. 1, 2021)

Evaluation and Management Policy for Gynecologic Screening Services with Preventive Medicine Visits or Annual GYN Exams

Beginning Nov. 1, 2021, BlueCross BlueShield of Tennessee will implement the following new code editing policy to ensure appropriate coding guidelines are followed for claims submitted for reimbursement.

We follow the Healthcare Common Procedure Coding System (HCPCS) and the Current Procedural Terminology (CPT) coding guidelines for this policy which states:

When HCPCS codes G0101 (Cervical or vaginal cancer screening; pelvic and clinical breast exam) or Q0091 (Screening Papanicolaou smear; obtaining, preparing and conveyance of cervical or vaginal smear to laboratory) are reported with preventive medicine services, CPT's 99384-99387, 99394-99397, or annual gynecologic screening exams HCPCS S0610-S0612, codes G0101 and Q0091 will be denied. These services are inclusive to the preventive medicine or annual gynecologic screening exams.

Per the American Medical Association CPT® Assistant August 2005 issue, in the Evaluation and Management: Preventive Medicine Services, it states:

"It would not be appropriate to separately report for a pelvic exam including obtaining of the pap smear, nor the breast exam as these services are considered part of a comprehensive preventive medicine E/M services."

For information about the reconsideration or appeals process, please refer to the BlueCross BlueShield Provider Manual or contact customer service for details.