



Annual Wellness Visit: Social Determinants of Health Risk Assessment

Related CR Release Date: October 4, 2024	MLN Matters Number: MM13486 Revised
Effective Date: January 1, 2024	Related Change Request (CR) Number: CR 13486
Implementation Date: October 7, 2024	Related CR Transmittal Numbers: R12865BP & R12865CP

Related CR Title: A Social Determinants of Health Risk Assessment in the Annual Wellness Visit Policy Update in the Calendar Year 2024 Physician Fee Schedule Final Rule

What's Changed: We updated the CR release date and transmittal numbers (including links). There are no substantive changes.

Affected Providers

- Hospitals
- Physicians
- Other providers billing Medicare Administrative Contractors (MACs) for services they provide to Medicare patients

Action Needed

Make sure your billing staff knows:

- A social determinants of health (SDOH) risk assessment is now an optional annual wellness visit (AWV) element
- The eligibility and billing requirements for doing the SDOH as part of the AWV

Background

The AWV includes establishing or updating:

- The patient's medical and family history
- A health risk assessment
- A personalized prevention plan

The AWW includes the initial visit (HCPCS code G0438) and the subsequent visit (HCPCS code G0439). The AWW also includes the frequency limitations that require that eligible patients:

- Are no longer within 12 months of the effective date of their first Medicare Part B coverage period
- Haven't received either an Initial Preventive Physical Examination (IPPE) or AWW within the past 12 months

Before January 1, 2024, Medicare didn't cover and pay for an SDOH risk assessment. In the CY 2024 PFS [final rule](#), CMS established HCPCS code G0136, Administration of a standardized, evidence-based SDOH risk assessment tool, 5-15 minutes, not more often than every 6 months. When provided in conjunction with certain evaluation and management or behavioral health services, we require that the SDOH risk assessment is standardized and evidence based and that any documented health-related social need is identified in the medical record.

When you provide the SDOH as an additional element of the AWW, we also require that the SDOH risk assessment is:

- Optional at the discretion of the clinician and patient
- Separately payable from the AWW with no applicable patient Part B coinsurance and deductible when part of the same visit with the same date of service (DOS) as the AWW
- Subject to the same health professional eligibility and frequency limitations as the AWW

Eligible Health Professionals

We require that the SDOH risk assessment, as an additional element of the AWW, must be done by clinicians identified within the definition of AWW "Health Professional" per [42 CFR 410.15\(a\)](#). This includes a:

- Physician who's a doctor of medicine or osteopathy
- Physician assistant, nurse practitioner, or clinical nurse specialist
- Medical professional or a team of medical professionals working under the direct supervision of a physician

Coinsurance and Deductible

Patient cost sharing, Part B coinsurance, and deductible aren't applicable to the AWW and don't apply to the SDOH risk assessment when you provide it as an additional element of the AWW. The SDOH risk assessment does include applicable Part B coinsurance and deductible when you provide it outside of an AWW, including in conjunction with certain evaluation and management or behavioral health services.

Additional Requirements

When you provide the SDOH risk assessment as an additional element of the AWW, you must give it in a manner that all communication with the patient is appropriate for the patient's educational, developmental, and health literacy level, and is culturally and linguistically appropriate.

Billing Clarification

When you provide the SDOH risk assessment as an additional element of the AWW, report HCPCS code G0136 for the SDOH risk assessment with Modifier –33, with the same DOS on the same claim as G0438 or G0439. MACs will accept and process HCPCS code G0136 as an additional element of the AWW (HCPCS codes G0438 and G0439) based on the Physician Fee Schedule.

You may provide elements of the AWW over a period of multiple days. In these situations, the DOS you report on the claim is the DOS when you complete the entirety of the AWW.

For example, a patient may provide their input for an SDOH risk assessment through an online portal on a Monday, and the health professional interprets the patient's SDOH risk assessment input and applies that information toward the establishment or update of a personalized prevention plan as part of the remainder of the AWW on a Tuesday. In this scenario, the DOS for both the SDOH risk assessment and the AWW is the DOS when you complete the entirety of the AWW. In this scenario, the medical record documentation should show that the service started on one day and was completed on another day (the DOS reported on the claim). If we request documentation, you must submit medical records for both days. In addition, bill the services based on the time involved as described by CPT code and the DOS you complete the entire AWW.

More Information

We issued CR 13486 to your MAC as the official instruction for this change. The CR has 2 transmittals:

- Transmittal [R12865CP](#) updates the Medicare Claims Processing Manual
- Transmittal [R12865BP](#) updates the Medicare Benefit Policy Manual

For more information, find your [MAC's website](#).

Document History

Date of Change	Description
October 7, 2024	We revised the article to update the transmittal numbers (with updated links) and CR release date. There are no substantive changes.
August 19, 2024	We clarified that MACs will process G0136 using the Physician Fee Schedule (page 3). We also updated the CR release date and transmittal links. Substantive content changes are in dark red.
May 3, 2024	Initial article released.

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