

SHARED MEDICAL APPOINTMENTS (Group Visits)

Scope

This policy applies to:

- | | | |
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| <input checked="" type="checkbox"/> Kaiser Permanente Health Plan of Washington | <input checked="" type="checkbox"/> Kaiser Permanente Health Plan of Washington Options, Inc. | |
| <input checked="" type="checkbox"/> Commercial | <input checked="" type="checkbox"/> Medicare | <input type="checkbox"/> Medicaid |

Policy

Original Effective Date: 03/01/2014

Kaiser Permanente will not separately reimburse for [shared medical appointments](#) also known as group visits, when billed with CPT code 99078. However when benefits allow, Kaiser Permanente will reimburse evaluation and management (E&M) service codes when appropriate.

Billing/Coding Guidelines

All claims must be billed according to Centers for Medicare & Medicaid Services (CMS) guidelines.

E&M codes 99212-99215 may be billed when a separate one-on-one appointment is performed.

Policy Definitions

Shared Medical Appointment – A group of patients receiving care for a defined chronic condition and patient education with a practitioner.

Prerequisite(s)

Not applicable

References

[Coding for Group Visits](#) American Academy of Family Physicians (AAFP)

Frequently Asked Questions

- Q1:** An established patient takes part in a shared medical appointment for diabetes. The provider codes for CPT 99078. Will the service be reimbursed?
- A1:** No. Kaiser Permanente will not separately reimburse CPT 99078. The provider can code for an E&M visit if the appointment included a one-on-one examination.

Q2: An established patient takes part in a shared medical appointment for a chronic condition. The provider codes for an E&M visit and a separate one-on-one evaluation was performed. Will the service be reimbursed?

A2: Yes. Kaiser Permanente will reimburse the E&M visit. The patient's medical visit must be documented and include services provided individually and services provided within the group.

Revision History

04/22/22 – Updated to correct hyperlinks and formatting

Note: This information is intended to serve only as a general reference resource regarding reimbursement policy for the services described and is not intended to address every aspect of a reimbursement situation. Accordingly, we may use reasonable discretion in interpreting and applying this policy to services being delivered in a particular case. Further, the policy does not cover all issues related to reimbursement for services rendered to our enrollees as legislative mandates, the provider contracts, the enrollee's benefit coverage documents, and the Provider Manual all may supplement or in some cases supersede this policy. This policy may be modified from time to time by publishing a new version of the policy on Kaiser Permanente provider website; however, the information presented in this policy is believed to be accurate and current as of the date of publication.