

# Billing Guide for Tobacco and E-Cigarettes Screening and Counseling

For New York State



	New York State Medicaid Fee-For-Service (FFS) and Managed Care (HMO)	Medicare/Medicare Advantage/ Medicare Managed Care (HMO)	Most Commercial Plans (POS, EPO, PPS, HMO)
<b>Diagnostic Code ICD-10</b>	<b>Z13.89:</b> Encounter for screening; cannot be combined with F17 (tobacco/nicotine dependence) Z71.6: Tobacco abuse counseling Z72.0: Tobacco use not otherwise specified (NOS) Z77.22: Environmental exposure to tobacco smoke Z87.891: Personal history of nicotine dependence  <b>F17.200, F17.210-F17.298:</b> Tobacco/nicotine dependence T65.2-T65.294: Toxic effect of tobacco and nicotine		
	P04.2: Newborn affected by maternal use of tobacco P96.81: Exposure to secondhand smoke in the perinatal period		
<b>Initial Preventive Evaluation and Management (E/M):</b> Includes counseling, risk factor reduction and intervention (age-specific CPT codes)	99381: ≤ 1 year, new patient 99382: 1-4 years, new patient 99383: 5-11 years, new patient 99384: 12-17 years, new patient 99385: 18-39 years, new patient		
<b>Periodic Preventive Evaluation and Management (E/M):</b> Includes counseling, risk factor reduction and intervention (age-specific CPT codes)	99391: ≤ 1 year, established patient 99392: 1-4 years, established patient 99393: 5-11 years, established patient 99394: 12-17 years, established patient 99395: 18-39 years, established patient		
<b>Evaluation and Management (E/M):</b> Time-based, can include minimal counseling for tobacco use ≤ 3 minutes (patient or family member/caregiver)	99201-99205: New patient 99211-99215: Established patient		
<b>Intermediate Counseling</b> Approximately 3-10 minutes ( <i>Estimated fee</i> )	Individual session <b>99406</b> (\$10)	Individual session <b>99406</b> (\$15.50-\$17.06)	Individual session <b>99406</b> ( <i>Fee schedules vary</i> )

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<b>Intensive Counseling</b> ≥ 11 minutes  <i>(Estimated fee)</i>	Individual or group session <b>99407</b>  <b>(Append — HQ modifier</b> for group sessions)  <i>(\$19; no copayment,</i> <i>deductibles or</i> <i>coinsurance)</i>	Individual session <b>99407</b>  <i>(\$29.81-\$32.68; no</i> <i>copayment, deductibles</i> <i>or coinsurance)</i>	Individual or group session <b>99407</b>  <i>(Fee schedules vary)</i>
<b>Maximum Number of Billable Quit Attempts and Counseling Sessions</b>	No maximum. All medically necessary cessation counseling sessions covered	<ul style="list-style-type: none"> <li>Two quit attempts per 12-month period</li> <li>Four face-to-face counseling sessions per quit attempt</li> </ul> (Total of eight sessions per year any combination of intermediate or intensive)	Benefits vary. Check with individual plan for codes and additional details.
<b>Billable Health Care Providers</b>	MD, DO, PA, NP, LMW/CNM, CP, LCSW, LMSW, RN, LPN, DMD, DDS, Dental Hygienists	Physician or other Medicare-qualified health care professionals	Physician or other qualified health care professionals
<b>Clinical Setting</b>	Article 28 facilities, FQHCs (that bill APGs), Outpatient	Outpatient, inpatient, emergency department	

### Billing Reminders

- Counseling services provided by the same physician on the same day as another E/M service should be reported using modifier -25.
- When counseling time exceeds 50% of the total time spent during an E/M service, use codes 99201-99215 to select the level of service performed.
- If the provider uses time-based E/M codes to provide counseling services, 99406-99407 may **not** be added since E/M service includes counseling.
- Only use codes 99406-99407 when counseling is provided to the person being counseled (e.g., pediatric patient). The codes cannot be reported under the pediatric patient if a parent or guardian is counseled on smoking. When billing under the parent or guardian's name and insurance identification, time spent counseling the parent or guardian falls under E/M service codes 99201-99215, using time as the key factor.
- Some private health plans may require the use of face-to-face, time-based preventive medicine codes for counseling for risk factor reduction intervention. If screening is the only service being provided, use 99401-99404 (individual) or 99411-99412 (group).

## Billing Considerations

- Documentation for counseling activities (such as quit advisement, resources, follow-up arrangements and time spent counseling) should be clearly noted in the chart to reflect the medical necessity for the service.
- For patients with private plans, providers must verify smoking cessation coverage for annual limits and authorized number of quit attempts to avoid unnecessary payment delays and denials.

## Resources

### Medicare

Visit [cms.gov](https://www.cms.gov) and search for **preventive services 2019**.

### Medicaid

Visit [health.ny.gov](https://www.health.ny.gov) and search for **tobacco counseling**.

### American Academy of Pediatrics

Visit [aap.org](https://www.aap.org) and search for **coding fact sheet**, then click **tobacco**.

## Case Scenarios

1. Tobacco cessation counseling provided to a pediatric patient who smokes cigarettes (uncomplicated):

Pediatric Patient
CPT Code: 99406 or 99407
ICD 10: F17.210 (nicotine dependence, cigarettes)

2. Tobacco cessation counseling provided to a parent whose child is exposed to secondhand cigarette smoke and is also diagnosed with asthma-related conditions:

Parent	Pediatric Patient
CPT Codes: 99201-99215 (use time as key factor)	CPT Codes: 99381-99395 (code selection is age specific)
ICD 10: F17.210 (nicotine dependence, cigarettes)	ICD 10: J45.20 or J45.20-J45.9 (asthma mild to severe) and Z77.22 (exposure to secondhand tobacco smoke, acute or chronic)

3. E-cigarette cessation counseling provided to a pediatric patient who uses e-cigarettes and is nicotine dependent:

Pediatric Patient
CPT Codes: 99406 or 99407 (intermediate or intensive counseling)
ICD 10: F17.290 (nicotine dependence, other tobacco product, uncomplicated)