



4. What must the clinician do to meet the required elements for code 99483?

Assessment of and care planning for a patient with cognitive impairment, requiring an independent historian, in the office or other outpatient, home, domiciliary or rest home setting with all of the following required elements:

- Cognition-focused evaluation including a pertinent history and examination;
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For several domains of care planning, simple, validated tools do not yet exist. This is most evident in primary care settings for cognitive assessment. In the table below, refer to the comments section for details on assessment administration and validity in various care settings for cognition-based tools. Ideally, tools should be:

- **Practical:** Time and effort to complete them fit the primary care clinical setting.
- **Parsimonious:** Provide enough information to support a meaningful care plan.
- **Scorable:** Results depicted in a single number.
- **Retrievable:** Easily incorporated into electronic health record fields and searchable at the point of care.

Table 1: Suggested Measures to Support the Care-Planning Process

The table below provides examples of simpler and more complex tools acceptable for assessing each domain. In some settings, a simple tool might be sufficient; in others, it could be used to trigger a more complex assessment or be replaced by a more detailed measure.

Domain	Suggested measures	Comments
Cognition		

7. The written care plan

Preparing the plan

Table 4: CPT codes that can be reported with 99483 on the same date of service

CMS does not believe the services described in 99483 would significantly overlap with the following codes.

Code	Description
99358, 99359	Non-face-to-face prolonged services
99487, 99489, 99490	Chronic care management (CCM) services
99495, 99496	Transitional care management (TCM) services
G2212	Prolonged office/outpatient E/M services

References (partial)

Alzheimer's Association Expert Task Force. Alzheimer's Association Expert Task Force Consensus Statement on CMS Proposed Billing Code for the Assessment and Care Planning for Individuals with Cognitive Impairment. Released Sept. 6, 2016. Available at: http://act.alz.org/site/DocServer/Taskforce_Consensus_Statement_FINAL.pdf?docID=51841. Accessed Nov. 29, 2016.

Anonymous. Medicare Program; Revisions to Payment Policies Under the Physician Fee Schedule and Other Revisions to Part B for CY 2017. Fed Regist 2016;81:80170. Available at: <https://www.federalregister.gov/documents/2016/11/15/2016-26668/medicare-program-revisions-to-payment-policies-under-the-physician-fee-schedule-and-other-revisions>. Accessed Nov. 22, 2016.

American Medical Association, 2018 Current Procedural Terminology.

Attea, P. and Johns, H. (2010), Confronting Alzheimer's Disease and Other Dementias. Journal of the American Geriatrics Society, 58: 1587–1590. doi:10.1111/j.1532-5415.2010.02963.x

Steenland NK, Auman CM, Patel PM, et al: Development of a rapid screening instrument for mild cognitive impairment and undiagnosed dementia. J Alzheimer Dis 2008; 15:419–427

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