

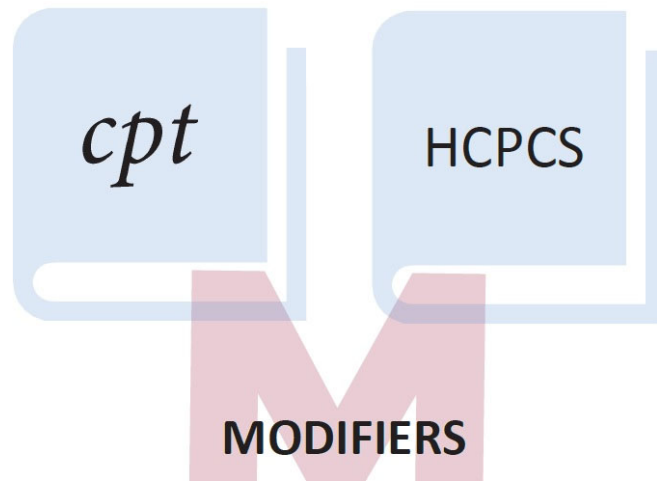
DOCUMENTATION ESSENTIALS
CODING FOR OFFICE VISITS
99202-99215
FOR FEDERALLY QUALIFIED
HEALTH CENTERS



Recorded July, 2021

Coding tells a story: what, who, where

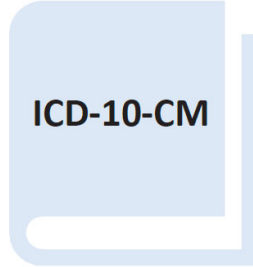
2



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And, why

3



MEDICAL NECESSITY

ICD-10-CM CODE ESTABLISHED

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E/M frequency established visits

4

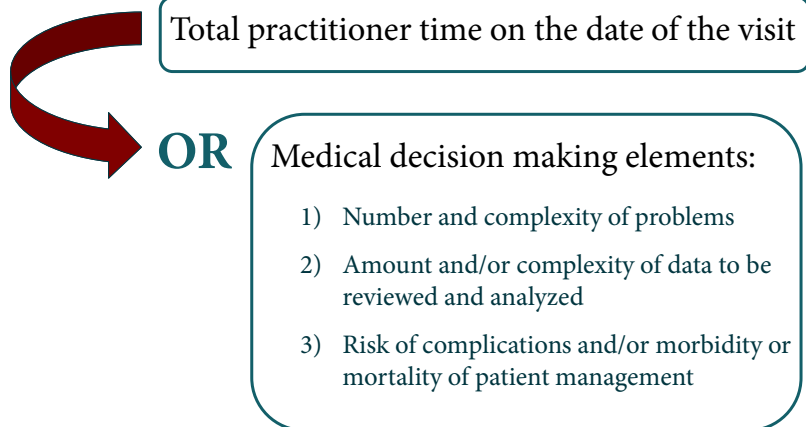
Code	CMS IM	CMS FP
99212	2.07%	1.99%
99213	35.93%	38.13%
99214	55.20%	55.06%
99215	4.89%	3.12%

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Code selection in 2021

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Requirements for 99202—99215: code selection



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Time for codes 99202–99215

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Physician/other qualified health care professional time includes the following activities, when performed:

- *Preparing to see the patient (eg: review of test results)*
- *Obtaining and/or reviewing separately obtained history*
- *Performing a medically appropriate examination and/or evaluation*

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Time for codes 99202–99215

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- *Counseling and educating the patient/family/caregiver*
- *Ordering medications, tests, or procedures*
- *Referring and communicating with other health care professionals (when not separately reported)*
- *Documenting clinical information in the electronic or other health record*

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Time for codes 99202–99215

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- *Independently interpreting results (not separately reported) and communicating results to the patient/family/caregiver*
- *Care coordination (not separately reported)*

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New patients

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Code	Minutes	MDM
99202	15-29	Straightforward
99203	30-44	Low
99204	45-59	Moderate
99205	60-74	High

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Established patients

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Code	Minutes	MDM
99212	10-19	Straightforward
99213	20-29	Low
99214	30-39	Moderate
99215	40-54	High

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History and/or examination

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- “...services include a medically appropriate history and/or physical exam, when performed”
- No longer key components for selecting a new or established patient visit
- Nature and extent of history and/or physical determined by clinician
- Care team may collect information, or entered through a portal

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What this means to you

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Document only clinically relevant history and exam

The end of:

- “You didn’t have enough systems in the ROS”
- “Only the billing practitioner can document the HPI”
- “The exam lowered the level”

Emphasis on information in assessment and plan

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Medical decision making: 2 of 3 required

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Code	Level of MDM 2 of 3 elements	Number and Complexity of Problems Addressed	Amount and/or Complexity of Data to be Reviewed and Analyzed *Each unique test, order, or document contributes to the combination of 2 or combination of 3 in Category 1 below.	Risk of Complications and/or Morbidity or Mortality of Patient Management
99202 99212	Straight forward	Minimal 1 self-limited or minor problem	Minimal or none	Minimal risk of morbidity from additional diagnostic testing or treatment
99203 99213	Low	Low 2 or more self-limited or minor problems; or 1 stable chronic illness; or 1 acute, uncomplicated illness or injury	Limited (Must meet the requirements of at least 1 of the 2 categories) Category 1: Tests and documents Any combination of 2 from the following: ...Review of prior external note(s) from each unique source*; ...Review of the result(s) of each unique test*; ...Ordering of each unique test* OR Category 2: Assessment requiring an independent historian(s)	Low risk of morbidity from additional diagnostic testing or treatment
99204 99214	Moderate	Moderate 1 or more chronic illnesses with exacerbation, progression, or side effects of treatment; or 2 or more stable chronic illnesses; or 1 undiagnosed new problem with uncertain prognosis; or 1 acute illness with systemic symptoms; or 1 acute complicated injury	Moderate (Must meet the requirements of at least 1 out of 3 categories) Category 1: Tests, documents, or independent historian(s) Any combination of 3 from the following: ...Review of prior external note(s) from each unique source*; ...Review of the result(s) of each unique test*; ...Ordering of each unique test*; ...Assessment requiring independent historian(s); or Category 2: Independent interpretation of tests Independent interpretation of a test performed by another physician/other qualified health care professional (not separately reported); or Category 3: Discussion of management or test interpretation Discussion of management or test interpretation with external physician/other qualified health care professional/ appropriate source (not separately reported)	Moderate risk of morbidity from additional diagnostic testing or treatment Examples only: • Prescription drug management • Decision regarding minor surgery with identified patient or procedure risk factors • Decision regarding elective major surgery without identified patient or procedure risk factors • Diagnosis or treatment significantly limited by social determinants of health
99205 99215	High	High 1 or more chronic illnesses with severe exacerbation, progression, or side effects of treatment; or 1 acute or chronic illness or injury that poses a threat to life or bodily function	Extensive (Must meet the requirements of at least 2 out of 3 categories) (in the field right above.)	High risk of morbidity from additional diagnostic testing or treatment Examples only: • Drug therapy requiring intensive monitoring for toxicity • Decision regarding elective major procedure with identified patient or procedure risk factors • Decision regarding emergency major surgery • Decision regarding hospitalization • Decision not to resuscitate or to de-escalate care because of poor prognosis

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Code	Level of MDM	Number and complexity of problems addressed
99202 99212	Straight-forward	*1 self-limited or minor problem
99203 99213	Low	• 2 or more self-limited or minor problems; or • 1 stable chronic illness; or • 1 acute uncomplicated illness or injury
99204 99214	Moderate	*1 or more chronic illness with exacerbation, progression or side effects of treatment; OR *2 or more stable chronic illnesses; OR *1 undiagnosed new problem with uncertain outcome; OR *1 acute illness with systemic symptoms; OR *1 acute complicated injury
99205 99215	High	*1 or more chronic illnesses with severe exacerbation, progression or side effects of treatment; Or *1 acute or chronic illness or injury that poses a threat to life or bodily function <u>in the near term without treatment</u>

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Problem addressed

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Problem addressed: Evaluated or treated during the encounter; notation that other professional is managing without additional assessment does not count as addressed; referral without evaluation does not qualify as addressed

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Stable chronic illness

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- Stable chronic illness: expected duration of one year or until the death of patient, and stable defined by treatment goals for that patient

“Examples may include well-controlled hypertension, non-insulin dependent diabetes, cataract, or benign prostatic hyperplasia.”

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Stable chronic illness

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- Not at treatment goal is not considered stable

*“For example, a patient with persistently poorly controlled blood pressure for whom better control is a goal is not stable, even if the pressures are not changing and the patient is asymptomatic. The risk of morbidity **without** treatment is significant.*

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Medical decision making

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Code	Level of MDM 2 of 3 elements	Number and Complexity of Problems Addressed	Amount and/or Complexity of Data to be Reviewed and Analyzed *Each unique test, order, or document contributes to the combination of 2 or combination of 3 in Category 1 below	Risk of Complications and/or Morbidity or Mortality of Patient Management
99202 99212	Straight forward	Minimal □ 1 self-limited or minor problem	Minimal or none	Minimal risk of morbidity from additional diagnostic testing or treatment
99203 99213	Low	Low □ 2 or more self-limited or minor problems; or □ 1 stable chronic illness; or □ 1 acute, uncomplicated illness or injury	Limited (Must meet the requirements of at least 1 of the 2 categories) Category 1: Tests and documents Any combination of 2 from the following: ___Review of prior external source(s) from each unique source*; ___Review of the result(s) of each unique test*; ___Ordering of each unique test* OR Category 2: Assessment requiring an independent historian(s)	Low risk of morbidity from additional diagnostic testing or treatment
99204 99214	Moderate	Moderate □ 1 or more chronic illnesses with exacerbation, progression, or side effects of treatment; or □ 2 or more stable chronic illnesses; or □ 1 undiagnosed new problem with uncertain prognosis; or □ 1 acute illness with systemic symptoms; or □ 1 acute complicated injury	Moderate (Must meet the requirements of at least 1 out of 3 categories) Category 1: Tests, documents, or independent historian(s) Any combination of 3 from the following: ___Review of prior external source(s) from each unique source*; ___Review of the result(s) of each unique test*; ___Ordering of each unique test* ___Assessment requiring independent historian(s); or Category 2: Independent interpretation of tests Independent interpretation of a test performed by another physician/other qualified health care professional (not separately reported); or Category 3: Discussion of management or test interpretation Discussion of management or test interpretation with external physician/other qualified health care professional/ appropriate source (not separately reported)	Moderate risk of morbidity from additional diagnostic testing or treatment Examples only: • Prescription drug management • Decision regarding minor surgery with identified patient or procedure risk factors • Decision regarding elective major surgery without identified patient or procedure risk factors • Diagnosis or treatment significantly limited by social determinants of health
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Ordering a test

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“Ordering a test is included in the category of test result(s) and the review of the test result is part of the encounter and not a subsequent encounter.”

- If you order a test at an visit, count the order on the day you order the test. Do not also count reviewing the results at a subsequent visit.

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Performance of test—new! Changed by the AMA 3/9/21

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“Tests that do not require separate interpretation (eg, tests that are results only)...may be counted as ordered or reviewed for selecting an MDM level.”

- AMA issued a “technical correction” 3/9/21
- You may count ordering a test that your practice bills for
- If you bill for a test with a professional and technical component (EKG), you may not credit the order or review

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Independent historian

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“Independent historian(s): An individual (eg, parent, guardian, surrogate, spouse, witness) who provides a history in addition to a history provided by the patient who is unable to provide a complete or reliable history (eg, due to developmental stage, dementia, or psychosis) or because a confirmatory history is judged to be necessary. In the case where there may be conflict or poor communication between multiple historians and more than one historian(s) is needed, the independent historian(s) requirement is met.”

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Document who provided the information, what information was provided and why it was needed



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Independent interpretation

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“The interpretation of a test for which there is a CPT code and an interpretation or report is customary. This does not apply when the physician or other qualified health care professional is reporting the service or has previously reported the service for the patient. A form of interpretation should be documented, but need not conform to the usual standards of a complete report for the test.”

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Independent interpretation

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- A test with a CPT code
- A test for which a formal report is customary (many lab tests have results, and don't typically have a formal, written interpretation)
- A form of interpretation is documented

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Elements of Medical Decision Making	
Amount and/or Complexity of Data to be Reviewed and Analyzed	
*Each unique test, order, or document contributes to the combination of 2 or combination of 3 in Category 1 below	
Limited	
(Must meet the requirements of at least 1 of the 2 categories)	
Category 1: Tests and documents	
<i>Any combination of 2 from the following:</i>	
<ul style="list-style-type: none"> • Review of prior external note(s) from each unique source*; • Review of the result(s) of each unique test*; • Ordering of each unique test* 	
or	
Category 2: Assessment requiring an independent historian(s)	
(For the categories of independent interpretation of tests and discussion of management or test interpretation, see moderate or high)	
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Elements of Medical Decision Making	
Amount and/or Complexity of Data to be Reviewed and Analyzed	
*Each unique test, order, or document contributes to the combination of 2 or combination of 3 in Category 1 below	
Moderate	
(Must meet the requirements of at least 2 out of 3 categories)	
Category 1: Tests, documents, or independent historian(s)	
<i>Any combination of 3 from the following:</i>	
<ul style="list-style-type: none"> • Review of prior external note(s) from each unique source*; • Review of the result(s) of each unique test*; • Ordering of each unique test*; • Assessment requiring an independent historian(s) 	
or	
Category 2: Independent interpretation of tests	
<ul style="list-style-type: none"> • Independent interpretation of a test performed by another physician/other qualified health care professional (not separately reported); 	
or	
Category 3: Discussion of management or test interpretation	
<ul style="list-style-type: none"> • Discussion of management or test interpretation with external physician/other qualified health care professional/appropriate source (not separately reported) 	
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Elements of Medical Decision Making	
Amount and/or Complexity of Data to be Reviewed and Analyzed	
*Each unique test, order, or document contributes to the combination of 2 or combination of 3 in Category 1 below	
Extensive	
(Must meet the requirements of at least 2 out of 3 categories)	
Category 1: Tests, documents, or independent historian(s)	
Any combination of 3 from the following:	
<ul style="list-style-type: none"> • Review of prior external note(s) from each unique source*; • Review of the result(s) of each unique test*; • Ordering of each unique test*; • Assessment requiring an independent historian(s) 	
or	
Category 2: Independent interpretation of tests	
<ul style="list-style-type: none"> • Independent interpretation of a test performed by another physician/other qualified health care professional (not separately reported); 	
or	
Category 3: Discussion of management or test interpretation	
<ul style="list-style-type: none"> • Discussion of management or test interpretation with external physician/other qualified health care professional/appropriate source (not separately reported) 	

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Medical decision making

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Code	Level of MDM 2 of 3 elements	Number and Complexity of Problems Addressed	Amount and/or Complexity of Data to be Reviewed and Analyzed *Each unique test, order, or document contributes to the combination of 2 or combination of 3 in Category 1 below	Risk of Complications and/or Morbidity or Mortality of Patient Management
99202 99212	Straight forward	Minimal □ 1 self-limited or minor problem	Minimal or none	Minimal risk of morbidity from additional diagnostic testing or treatment
99203 99213	Low	Low □ 2 or more self-limited or minor problems; or □ 1 stable chronic illness; or □ 1 acute, uncomplicated illness or injury	Limited (Must meet the requirements of at least 1 of the 2 categories) Category 1: Tests and documents Any combination of 2 from the following: ___Review of prior external note(s) from each unique source*; ___Review of the result(s) of each unique test*; ___Ordering of each unique test* OR Category 2: Assessment requiring an independent historian(s)	Low risk of morbidity from additional diagnostic testing or treatment
99204 99214	Moderate	Moderate □ 1 or more chronic illnesses with exacerbation, progression, or side effects of treatment; or □ 2 or more stable chronic illnesses; or □ 1 undiagnosed new problem with uncertain prognosis; or □ 1 acute illness with systemic symptoms; or □ 1 acute complicated injury	Moderate (Must meet the requirements of at least 1 out of 3 categories) Category 1: Tests, documents, or independent historian(s) Any combination of 3 from the following: ___Review of prior external note(s) from each unique source*; ___Review of the result(s) of each unique test*; ___Ordering of each unique test* ___Assessment requiring independent historian(s); or Category 2: Independent interpretation of tests Independent interpretation of a test performed by another physician/other qualified health care professional (not separately reported); or Category 3: Discussion of management or test interpretation Discussion of management or test interpretation with external physician/other qualified health care professional/ appropriate source (not separately reported)	Moderate risk of morbidity from additional diagnostic testing or treatment Examples only: • Prescription drug management • Decision regarding minor surgery with identified patient or procedure risk factors • Decision regarding elective major surgery without identified patient or procedure risk factors • Diagnosis or treatment significantly limited by social determinants of health
99205 99215	High	High □ 1 or more chronic illnesses with severe exacerbation, progression, or side effects of treatment; or □ 1 acute or chronic illness or injury that poses a threat to life or bodily function	Extensive (Must meet the requirements of at least 2 out of 3 categories) (in the field right above.)	High risk of morbidity from additional diagnostic testing or treatment Examples only: • Drug therapy requiring intensive monitoring for toxicity • Decision regarding elective major procedure with identified patient or procedure risk factors • Decision regarding emergency major surgery • Decision regarding hospitalization • Decision not to resuscitate or to de-escalate care because of poor prognosis

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Medical decision making

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Code	Level of MDM 2 of 3 elements	Number and Complexity of Problems Addressed	Amount and/or Complexity of Data to be Reviewed and Analyzed *Each unique test, order, or document contributes to the combination of 2 or combination of 3 in Category 1 below.	Risk of Complications and/or Morbidity or Mortality of Patient Management
99202 99212	Straight forward	Minimal □ 1 self-limited or minor problem	Minimal or none	Minimal risk of morbidity from additional diagnostic testing or treatment
99203 99213	Low	Low □ 2 or more self-limited or minor problems; or □ 1 stable chronic illness; or □ 1 acute, uncomplicated illness or injury	Limited (Must meet the requirements of at least 1 of the 2 categories) □ Category 1: Tests and documents Any combination of 2 from the following: □ ___Review of prior external note(s) from each unique source* □ ___Review of the result(s) of each unique test*; □ ___Ordering of each unique test* OR □ Category 2: Assessment requiring an independent historian(s)	Low risk of morbidity from additional diagnostic testing or treatment
99204 99214	Moderate	Moderate □ 1 or more chronic illnesses with exacerbation, progression, or side effects of treatment; or □ 2 or more stable chronic illnesses; or □ 1 undiagnosed new problem with uncertain prognosis; or □ 1 acute illness with systemic symptoms; or □ 1 acute complicated injury	Moderate (Must meet the requirements of at least 1 out of 3 categories) □ Category 1: Tests, documents, or independent historian(s) Any combination of 3 from the following: □ ___Review of prior external note(s) from each unique source* □ ___Review of the result(s) of each unique test*; □ ___Ordering of each unique test*; □ ___Assessment requiring independent historian(s); or □ Category 2: Independent interpretation of tests Independent interpretation of a test performed by another physician/other qualified health care professional (not separately reported); or □ Category 3: Discussion of management or test interpretation Discussion of management or test interpretation with external physician/other qualified health care professional/ appropriate source (not separately reported)	Moderate risk of morbidity from additional diagnostic testing or treatment Examples only: • Prescription drug management • Decision regarding minor surgery with identified patient or procedure risk factors • Decision regarding elective major surgery without identified patient or procedure risk factors • Diagnosis or treatment significantly limited by social determinants of health
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Code	Level of MDM	Risk of morbidity and mortality
99202 99212	Straight- forward	Minimal risk of morbidity from additional diagnostic testing or treatment
99203 99213	Low	Low risk of morbidity from additional diagnostic testing or treatment
99204 99214	Moderate	Moderate risk of morbidity from additional testing or treatment Examples only: *Prescription drug management *Decision regarding minor surgery with identified patient or procedure risk factors *Decision regarding elective major surgery without identified patient or procedure risk factors *Diagnosis or treatment significantly limited by social determinants of health
99205 99215	High	High risk of morbidity from additional diagnostic testing or treatment Examples only: *Drug therapy requiring intensive monitoring for toxicity *Decision regarding elective major surgery with identified patient or procedure risk factors *Decision regarding emergency major surgery *Decision regarding hospitalization *Decision not to resuscitate or to de-escalate care because of poor prognosis

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Drug therapy requiring intensive monitoring

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- Drug with potential to cause serious morbidity or death
- Monitoring is not primarily for assessment of therapeutic efficacy
- Intensive monitoring may be long or short term, long term is no less than quarterly
- Monitoring may be by lab test, physiologic test or imaging, not history or exam

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Drug therapy requiring intensive monitoring

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- Examples include monitoring for cytopenia for antineoplastic agent or short term monitoring of electrolytes and renal function in patient undergoing diuresis.
- Doesn't qualify: annual electrolytes and renal function in a patient on a diuretic

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99202/99212

Patient presents at the urging of a neighbor for a 1 cm by 1 cm red rash on his arm. Assessment: “Red area on arm. No concerns. Use moisturizing cream.”

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Code	Level of MDM	Elements of MDM (Based on 2 of 3 Elements)		
		1) Number and Complexity of Problems addressed	2) Amount and/or Complexity of Data to be Reviewed and Analyzed	3) Risk of Complications and/or Morbidity or Mortality of Patient Management
99211	N/A	N/A	N/A	N/A
99202 99212	Straight-forward	Self limited problem	Minimal or none	Minimal risk
99203 99213	Low	Low	Limited	Low
99204 99214	Moderate	Moderate	Moderate	Moderate
99205 99215	High	High	Extensive	High

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99203/99213

Patient complains of heartburn of 2-week duration, mild severity. Assessment: GERD, OTC medications.

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Code	Level of MDM	Elements of MDM (Based on 2 of 3 Elements)		
		1) Number and Complexity of Problems addressed	2) Amount and/or Complexity of Data to be Reviewed and Analyzed	3) Risk of Complications and/or Morbidity or Mortality of Patient Management
99211	N/A	N/A	N/A	N/A
99202 99212	Straight-forward	Minimal	Minimal or none	Minimal risk
99203 99213	Low	Acute, uncomplicated illness	Limited	Low risk from OTC meds
99204 99214	Moderate	Moderate	Moderate	Moderate
99205 99215	High	High	Extensive	High

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99203/99213

9-month-old brought in by her Dad. Dad reports baby is fussy, not sleeping through the night, has a diaper rash. Eating well, wet diapers, normal bowel movements. There is a detailed history and exam. Assessment: diaper rash, teething, reassurance.

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Code	Level of MDM	Elements of MDM (Based on 2 of 3 Elements)		
		1) Number and Complexity of Problems addressed	2) Amount and/or Complexity of Data to be Reviewed and Analyzed	3) Risk of Complications and/or Morbidity or Mortality of Patient Management
99211	N/A	N/A	N/A	N/A
99202 99212	Straight-forward	Minimal	Minimal or none	Minimal risk
99203 99213	Low	Acute, uncomplicated illness	Independent historian	Low risk
99204 99214	Moderate	Moderate	Moderate	Moderate
99205 99215	High	High	Extensive	High

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99203/99213

Patient with ADHD presents for follow up and prescription renewal. Reports symptoms are well controlled. Assessment, “ADHD doing well. Continue same dose of medication”

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Code	Level of MDM	Elements of MDM (Based on 2 of 3 Elements)		
		1) Number and Complexity of Problems addressed	2) Amount and/or Complexity of Data to be Reviewed and Analyzed	3) Risk of Complications and/or Morbidity or Mortality of Patient Management
99211	N/A	N/A	N/A	N/A
99202 99212	Straight-forward	Minimal	Minimal or none	Minimal risk
99203 99213	Low	Stable chronic illness	Limited	Low risk
99204 99214	Moderate	Moderate	Moderate	Moderate: prescription drug management
99205 99215	High	High	Extensive	High

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99203/99213

22 year old patient presents with palpitations. EKG ordered, done in the office, reviewed. EKG is billed by the practice. Assessment: palpitations. Normal EKG. Reassurance.

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		Elements of MDM (Based on 2 of 3 Elements)		
Code	Level of MDM	1) Number and Complexity of Problems addressed	2) Amount and/or Complexity of Data to be Reviewed and Analyzed	3) Risk of Complications and/or Morbidity or Mortality of Patient Management
99211	N/A	N/A	N/A	N/A
99202 99212	Straight-forward	Minimal	Minimal or none	Minimal risk
99203 99213	Low	Acute uncomplicated illness	Limited	Low risk
99204 99214	Moderate	Moderate	Moderate	Moderate
99205 99215	High	High	Extensive	High

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Explanation

- No credit for ordering or reviewing the EKG, because billed by the practice.
- No credit for independent interpretation, because professional component billed by the practice.

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Common scenarios 99203/99213

- Acute, uncomplicated illness, low risk, could be OTC meds
- Acute, uncomplicated illness, independent historian or two lab tests ordered
- One stable chronic illness, Rx drugs

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99204/99214

Patient with ADHD presents for follow up and prescription renewal. Reports symptoms are not well -controlled. Difficulty concentrating and with task completion. Assessment: ADHD not at goal. Prefers to continue same dose of medication, but gave him a referral for therapy.

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Code	Level of MDM	Elements of MDM (Based on 2 of 3 Elements)		
		1) Number and Complexity of Problems addressed	2) Amount and/or Complexity of Data to be Reviewed and Analyzed	3) Risk of Complications and/or Morbidity or Mortality of Patient Management
99211	N/A	N/A	N/A	N/A
99202 99212	Straight-forward	Minimal	Minimal or none	Minimal risk
99203 99213	Low	Low	Limited	Low risk
99204 99214	Moderate	Chronic illness with exacerbation	Moderate	Moderate: prescription drug management
99205 99215	High	High	Extensive	High

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99204/99214

Patient presents for management of chronic problems. She reports one is well controlled, but is experiencing symptoms from the second. Assessment: Problem A: doing well, continue current meds. Problem B: Still experiencing symptoms, suggested adjustment to medications.

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		Elements of MDM (Based on 2 of 3 Elements)		
Code	Level of MDM	1) Number and Complexity of Problems addressed	2) Amount and/or Complexity of Data to be Reviewed and Analyzed	3) Risk of Complications and/or Morbidity or Mortality of Patient Management
99211	N/A	N/A	N/A	N/A
99202 99212	Straight-forward	Minimal	Minimal or none	Minimal risk
99203 99213	Low	Low	Limited	Low risk
99204 99214	Moderate	Chronic illness with exacerbation	Moderate	Moderate: prescription drug management
99205 99215	High	High	Extensive	High

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99204/99214

Patient presents for treatment of diabetes, CKD, hypertension and high cholesterol. Physician orders HgbA1c (done in the office at the visit and billed by practice), CBC, lipids and BMP sent out. Reviews renal function test ordered at prior visit. Assessment: Diabetes: fair control; CKD, stage 2, stable; hypertension at goal; high cholesterol: need to check lipids. Prescription drugs renewed.

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99204/99214

DATA:

- HgbA1c done in office may be credited as of 3/9/21
- CBC, lipids and BMP all sent to outside lab: can credit three unique tests ordered
- Renal function tests ordered at prior visit, reviewed today: can't credit review; review is considered part of the order

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		Elements of MDM (Based on 2 of 3 Elements)		
Code	Level of MDM	1) Number and Complexity of Problems addressed	2) Amount and/or Complexity of Data to be Reviewed and Analyzed	3) Risk of Complications and/or Morbidity or Mortality of Patient Management
99202 99212	Straight-forward	Minimal	Minimal or none	Minimal risk
99203 99213	Low	Low	Limited	Low risk
99204 99214	Moderate	Chronic illness with exacerbation; or two stable chronic conditions	Moderate	Moderate: prescription drug management
99205 99215	High	High	Extensive	High

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99204/99214

Patient seen after a visit to Urgent Care Center over the weekend. Seen for cough, SOB, wheezing, chest tightness and fever. Diagnosis on discharge from UCC was asthma exacerbation with viral illness. At the office visit, patient is better, but still wheezing. Assessment: asthma exacerbation. Added a long-acting inhaler.

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99204/99214

DATA:

- Reviewed UCC note (one unique note)
- Reviewed two labs done at UCC (two unique test results)
- Personally viewed the chest x-ray (independent interpretation)

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		Elements of MDM (Based on 2 of 3 Elements)		
Code	Level of MDM	1) Number and Complexity of Problems addressed	2) Amount and/or Complexity of Data to be Reviewed and Analyzed	3) Risk of Complications and/or Morbidity or Mortality of Patient Management
99211	N/A	N/A	N/A	N/A
99202 99212	Straight-forward	Minimal	Minimal or none	Minimal risk
99203 99213	Low	Low	Limited	Low risk
99204 99214	Moderate	Moderate	Moderate	Moderate: prescription drug management
99205 99215	High	High	Extensive	High

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99204/99214

Based on number and complexity of problems and risk:

- Two or more stable chronic problems with prescription drug management
- One chronic problem (not at goal for patient) with exacerbation, progression or side effect of treatment with prescription drug management or with diagnosis or treatment significantly limited by social determinants of health
- Multiple chronic problems, none with severe exacerbation and prescription drug management

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99205/99215

Patient with Crohn's disease comes into the office after three days of worsening pain and diarrhea. Today, his stool was bloody. He is dehydrated and has lost weight since last seen. Assessment: severe exacerbation of Crohn's. Patient sent to ED, called and spoke with hospitalist. May need to consider surgical option at this point.

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		Elements of MDM (Based on 2 of 3 Elements)		
Code	Level of MDM	1) Number and Complexity of Problems addressed	2) Amount and/or Complexity of Data to be Reviewed and Analyzed	3) Risk of Complications and/or Morbidity or Mortality of Patient Management
99211	N/A	N/A	N/A	N/A
99202 99212	Straight-forward	Minimal	Minimal or none	Minimal risk
99203 99213	Low	Low	Limited	Low risk
99204 99214	Moderate	Moderate	Moderate: discussion of management	Moderate
99205 99215	High	High: severe exacerbation of chronic condition	Extensive	High: decision regarding hospitalization

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Medical decision making

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Code	Level of MDM 2 of 3 elements	Number and Complexity of Problems Addressed	Amount and/or Complexity of Data to be Reviewed and Analyzed *Each unique test, order, or document contributes to the combination of 2 or combination of 3 in Category 1 below.	Risk of Complications and/or Morbidity or Mortality of Patient Management
99202 99212	Straight-forward	Minimal □ 1 self-limited or minor problem	Minimal or none	Minimal risk of morbidity from additional diagnostic testing or treatment
99203 99213	Low	Low □ 2 or more self-limited or minor problems; or □ 1 stable chronic illness; or □ 1 acute, uncomplicated illness or injury	Limited (Must meet the requirements of at least 1 of the 2 categories) Category 1: Tests and documents Any combination of 2 from the following: ___Review of prior external source(s) from each unique source*; ___Review of the result(s) of each unique test*; ___Ordering of each unique test* OR Category 2: Assessment requiring an independent historian(s)	Low risk of morbidity from additional diagnostic testing or treatment
99204 99214	Moderate	Moderate □ 1 or more chronic illnesses with exacerbation, progression, or side effects of treatment; or □ 2 or more stable chronic illnesses; or □ 1 undiagnosed new problem with uncertain prognosis; or □ 1 acute illness with systemic symptoms; or □ 1 acute complicated injury	Moderate (Must meet the requirements of at least 1 out of 3 categories) Category 1: Tests, documents, or independent historian(s) Any combination of 3 from the following: ___Review of prior external source(s) from each unique source*; ___Review of the result(s) of each unique test*; ___Ordering of each unique test* ___Assessment requiring independent historian(s); or Category 2: Independent interpretation of tests Independent interpretation of a test performed by another physician/other qualified health care professional (not separately reported); or Category 3: Discussion of management or test interpretation Discussion of management or test interpretation with external physician/other qualified health care professional/ appropriate source (not separately reported).	Moderate risk of morbidity from additional diagnostic testing or treatment Examples only: • Prescription drug management • Decision regarding minor surgery with identified patient or procedure risk factors • Decision regarding elective major surgery without identified patient or procedure risk factors • Diagnosis or treatment significantly limited by social determinants of health
99205 99215	High	High □ 1 or more chronic illnesses with severe exacerbation, progression, or side effects of treatment; or □ 1 acute or chronic illness or injury that poses a threat to life or bodily function	Extensive (Must meet the requirements of at least 2 out of 3 categories) (in the field right above.)	High risk of morbidity from additional diagnostic testing or treatment Examples only: • Drug therapy requiring intensive monitoring for toxicity • Decision regarding elective major procedure with identified patient or procedure risk factors • Decision regarding emergency major surgery • Decision regarding hospitalization • Decision not to resuscitate or to de-escalate care because of poor prognosis

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Thank you



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