



Rational Physician
Coding for New
Office Patients

Redacted Version

Peter R. Jensen, MD, CPC
www.EMuniversity.com

Rational Physician Coding for New Office Patients



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For clinically driven E/M coding education, go to
www.EMuniversity.com

Goals

- Learn the documentation requirements for New Office Patients
- Identify the “correct” level of care
- Avoid undercoding
- Ensure E/M compliance every time
- Use the approved E/M “shortcuts”
- Keep the focus on patient care

New Office Patients

- \$1 billion in allowed charges in 2004 (4% of E/M spending)

99201	1.3%	\$34.67	
99202	8.7%	\$60.69	
99203	38.7%	\$90.21	
99204	30.3%	\$137.33	52%
99205	21.0%	\$172.57	

What is a "New" Patient

- A n... who... of a... you... mor... So... pati...

New Office Patients

E/M Code	History	Exam	MDM	Time
99201	PF	PF	SF	10
99202	EPF	EPF	SF	20
99203	Det	Det	Low	30
99204	Comp	Comp	Mod	45
99205	Comp	Comp	High	60

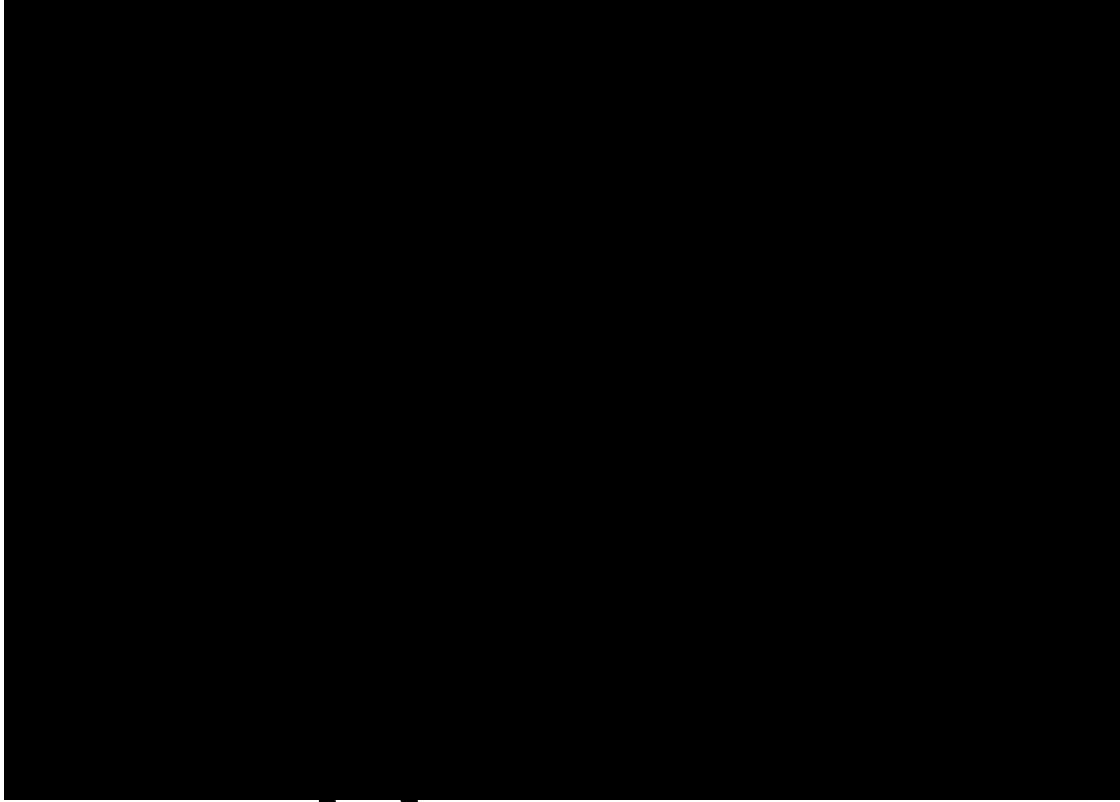
3 out of 3 key components must qualify



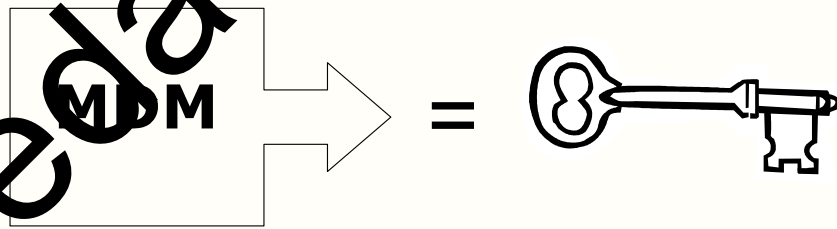
E/M Code	Time
99201	10
99202	20
99203	30
99204	45
99205	60

Redacted Version

Rational Physician Coding



Redacted

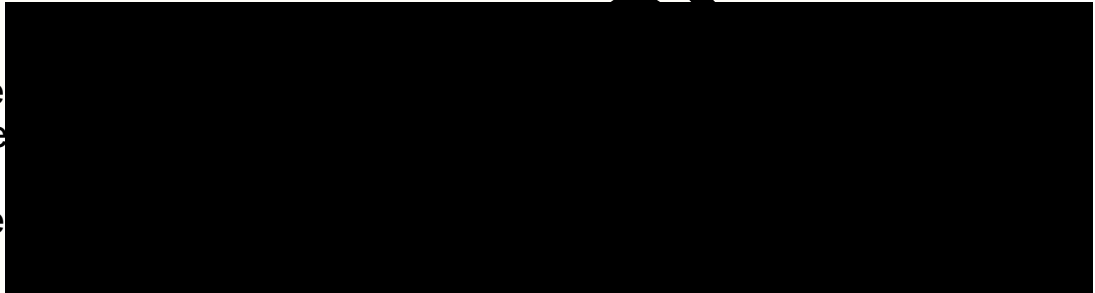


Determining the MDM

Number of Diagnoses	Data Reviewed	Risk	Level of MDM
Minimal	Minimal	Minimal	Straight-Forward
Limited	Limited	Low	Low Complexity
Multiple	Moderate	Moderate	Moderate Complexity
Extensive	Extensive	High	High Complexity

Need 2 out of 3 to qualify for given level of MDM

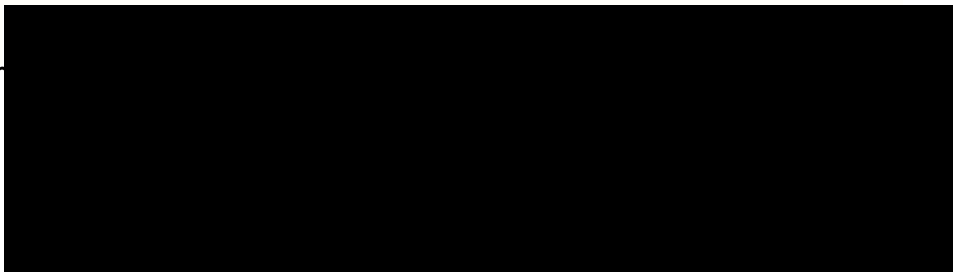
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MDM Points

MDM Complexity	Problems	Data	Risk
Straight Forward	1	1	Minimal
Low	2	2	Low
Moderate	3	3	Moderate
High	4	4	High

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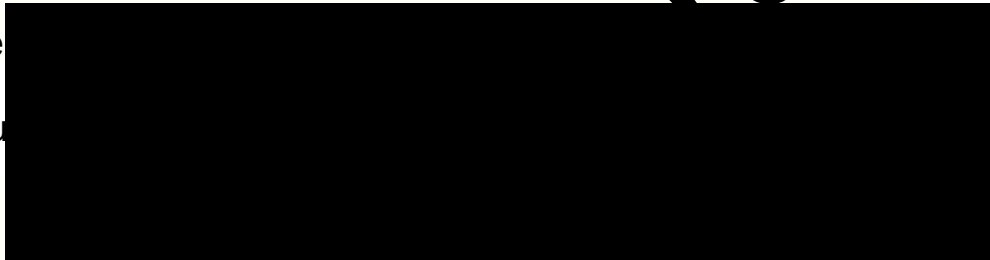


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Problem Points

Problems/DDx	Points
Self limited or minor (Max 2)	1
Established problem, stable	1
Established problem, worsening	2
New problem, no additional work-up planned	3
New problem, additional work-up planned	4

The problem
the problem
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Data Reviewed	Points
Review/order clinical lab tests	1
Review/order X-rays	1
Review/order tests in the medicine section (echo, EKG, LHC, PFTs)	1
Discussion of test results with performing MD	1
Independent review of image, tracing, or specimen	2
Decision to obtain old records	1
Review and summation of old records	2

The data points
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findings in the c

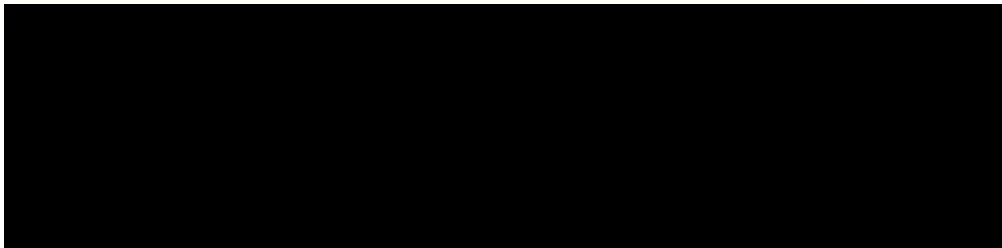


Table of Risk

Risk	Presenting Problem(s)	Diagnostic Procedures	Management Options Selected
Minimal	<ul style="list-style-type: none"> • One self-limited or minor problem, e.g., cold, insect bite, tinea corporis 	<ul style="list-style-type: none"> • Laboratory tests • Chest X-rays • EKG/EEG • Urinalysis • Ultrasound/ Echocardiogram • KOH prep 	<ul style="list-style-type: none"> • Rest • Gargles • Elastic bandages • Superficial dressings
Low	<ul style="list-style-type: none"> • Two or more self-limited or minor problems • One stable chronic illness, e.g., well controlled HTN, DM2, cataract • Acute uncomplicated injury or illness, e.g., cystitis, allergic rhinitis, sprain 	<ul style="list-style-type: none"> • Physiologic tests not under stress, e.g., PFTs • Non-cardiovascular imaging studies with contrast, e.g., barium enema • Superficial needle biopsy • ABG • Skin biopsies 	<ul style="list-style-type: none"> • Over the counter drugs • Minor surgery, with no identified risk factors • Physical therapy • Occupational therapy • IV fluids, without additives
Moderate	<ul style="list-style-type: none"> • One or more chronic illness, with mild exacerbation, progression, or side effects of treatment • Two or more stable chronic illnesses • Undiagnosed new problem, with uncertain prognosis, e.g., lump in breast • Acute illness, with systemic symptoms, e.g., pyelonephritis, pleuritis, colitis • Acute complicated injury, e.g., head injury, with brief loss of consciousness 	<ul style="list-style-type: none"> • Physiologic tests under stress, e.g., cardiac stress test, fetal contraction stress test • Diagnostic endoscopies, with no identified risk factors • Deep needle, or incisional biopsies • Cardiovascular imaging studies, with contrast, with no identified risk factors, e.g., arteriogram, cardiac catheterization • Obtain fluid from body cavity, (e.g., LP or thoracentesis) 	<ul style="list-style-type: none"> • Minor surgery, with identified risk factors • Elective major surgery (open, percutaneous, or endoscopic), with no identified risk factors • Prescription drug management • Therapeutic nuclear medicine • IV fluids, with additives • Closed treatment of fracture or dislocation, without manipulation
High	<ul style="list-style-type: none"> • One or more chronic illness, with severe exacerbation, progression, or side effects of treatment • Acute or chronic illness or injury, which poses a threat to life or bodily function, e.g., acute MI, pulmonary embolism, severe respiratory distress, progressive severe rheumatoid arthritis, psychiatric illness, with potential threat to self or others, peritonitis, ARF • An abrupt change in neurological status, e.g., seizure, TIA, 	<ul style="list-style-type: none"> • Cardiovascular imaging, with contrast, with identified risk factors • Cardiac EP studies • Diagnostic endoscopies, with identified risk factors • Discography 	<ul style="list-style-type: none"> • Elective major surgery (open, percutaneous, endoscopic), with identified risk factors • Emergency major surgery (open, percutaneous, endoscopic) • Parenteral controlled substances • Drug therapy requiring intensive monitoring for toxicity • Decision not to resuscitate, or to de-escalate care because of poor prognosis

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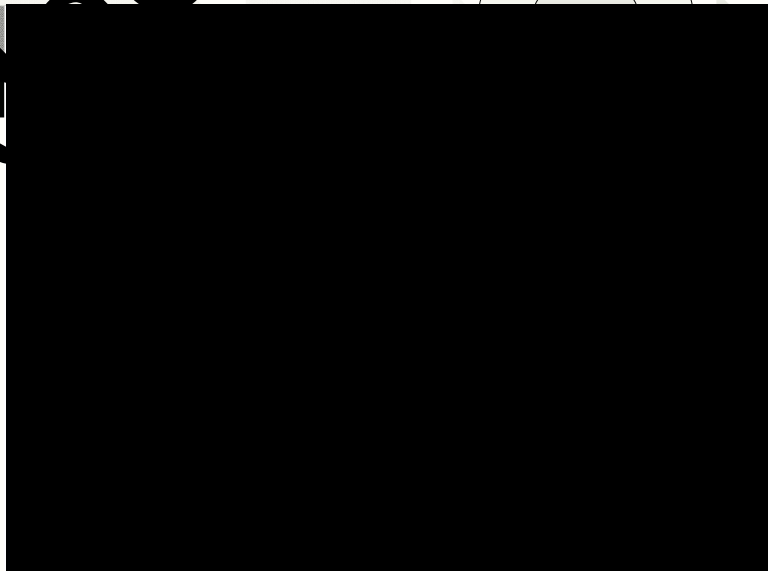
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Calculating the Overall MDM

MDM Complexity	Problems	Data	Risk
Straight Forward	1	1	Minimal
Low	2	2	Low
Moderate	3	3	Moderate
High	4	4	High

Need 2 out of 3 to qualify for given level of MDM

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MDM. The
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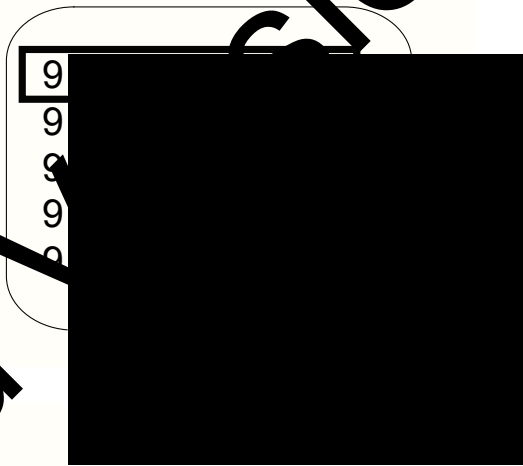


99201

E/M Code	History	Exam	MDM	Time
99201	PF	PF	SF	10

Time required would be 10 minutes

- Least frequently used code for these encounters
- Reimbursement is about \$35.00



E/M Code	History	Exam	MDM	Time
99201	PF	PF	SF	10

3 out of 3 key components must qualify

Problem Focused History

Hx	HPI	ROS	PFSH
PF	Brief	None	None
EPF	Brief	1	None
Det	Ext	2 - 9	1/3
Comp	Ext	10	3/3

Problem Focused Exam

Exam	Bullets
PF	1 - 5 from any systems
EPF	6 - 11 from any systems
Det	12 from any systems
Comp	2 from 9 systems

Straightforward MDM

MDM	Prob Pts	Data Pts	Risk
SF	1	0 - 1	Min
Low	2	2	Low
Mod	3	3	Mod
High	≥4	≥4	High

Requires two out of three

Redacted

What Does a 99201 Look Like?

- A patient presents with a simple bee sting on the finger
- After a quick examination, you recommend ice to decrease the swelling
- No further treatment or follow-up
- How would you code and document this encounter?

MDM Points

Problems/DDx			
Self limited or minor (Ma			
Established problem, sta			
Established problem, worsening			
New problem, no additio work-up planned			
New problem, additional work-up planned			
Total Po			

Risk					
Minimal	<ul style="list-style-type: none"> •One probl tinea 				
Low	<ul style="list-style-type: none"> •Two minor •One •Acute illness rhinit 				
Moderate	<ul style="list-style-type: none"> •One exa •Two stable chronic illnesses •Undiagnosed new problem, with uncertain prognosis 			<ul style="list-style-type: none"> •studies, with contrast, with no identified risk factors 	<ul style="list-style-type: none"> •IV fluids, with additives
High	<ul style="list-style-type: none"> •One or more chronic illness, with severe exacerbation •Acute or chronic illness or injury, which poses a threat to life or bodily function •An abrupt change in neurological status 			<ul style="list-style-type: none"> •Cardiovascular imaging, with contrast, with identified risk factors •Cardiac EP studies •Diagnostic endoscopies, with identified risk factors 	<ul style="list-style-type: none"> •Parenteral controlled substances •Drug therapy requiring intensive monitoring for toxicity •Obtain DNR or de-escalate care

Calculating the Overall MDM

MDM Complexity	Problems	Data	Risk
SF	1	0 - 1	Min
Low	2	2	Low
Moderate	3	3	Mod
High	4	4	High

Need 2 out of 3 to qualify for given level of MDM

99204	Det	Det	Mod	45
99205	Comp	Comp	High	60

Straightforward MDM goes along with EITHER a 99201 or a 99202.
Which of these is the correct target code?

99201 vs. 99202

1. Wh
2. Wh
3. Is it
doc

99201 vs. 99202

“Medical necessity of a service is the overarching criterion for payment in addition to the individual requirements of a CPT code. It would not be medically necessary or appropriate to bill a higher level of E/M service when a lower level of service is warranted. The volume of documentation should not be the primary influence upon which a specific level of service is billed.”

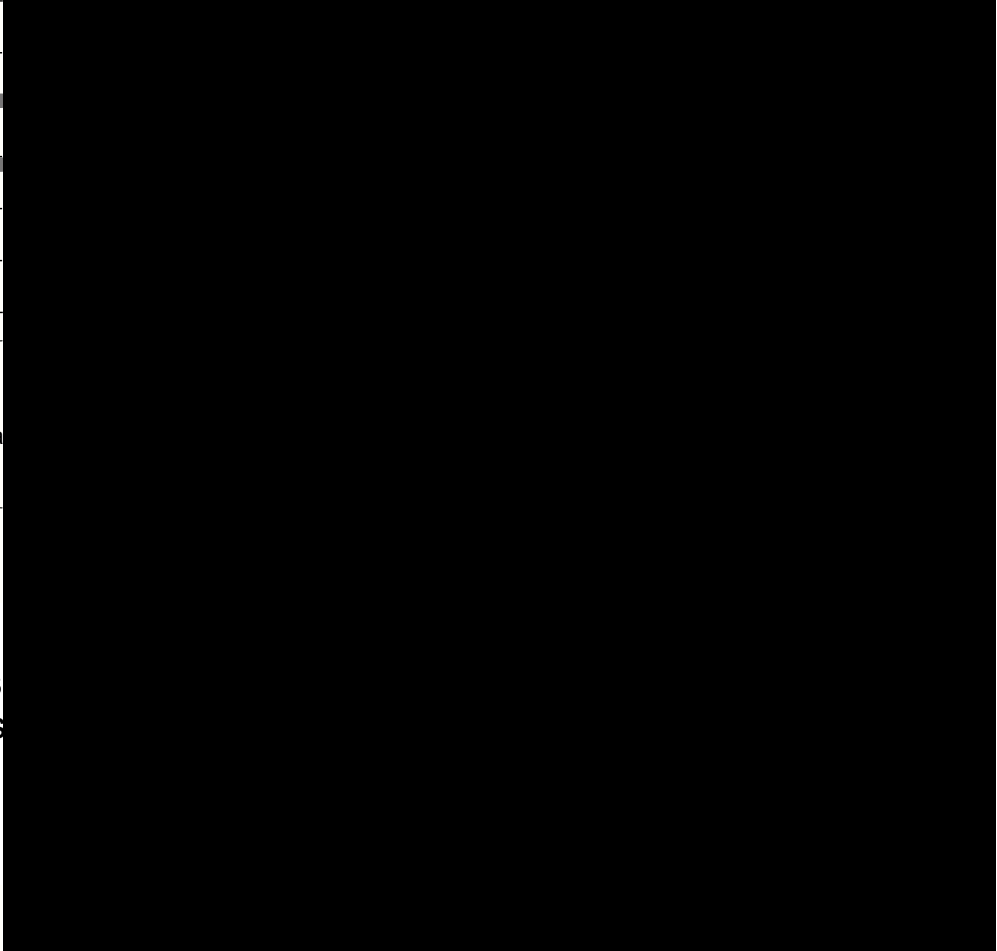
Medicare Carrier Manual



99201 vs. 99202

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Selecting the Target Code

Ready

Code	Category	Exam	Time
99205	Comp	Comp	High
			60

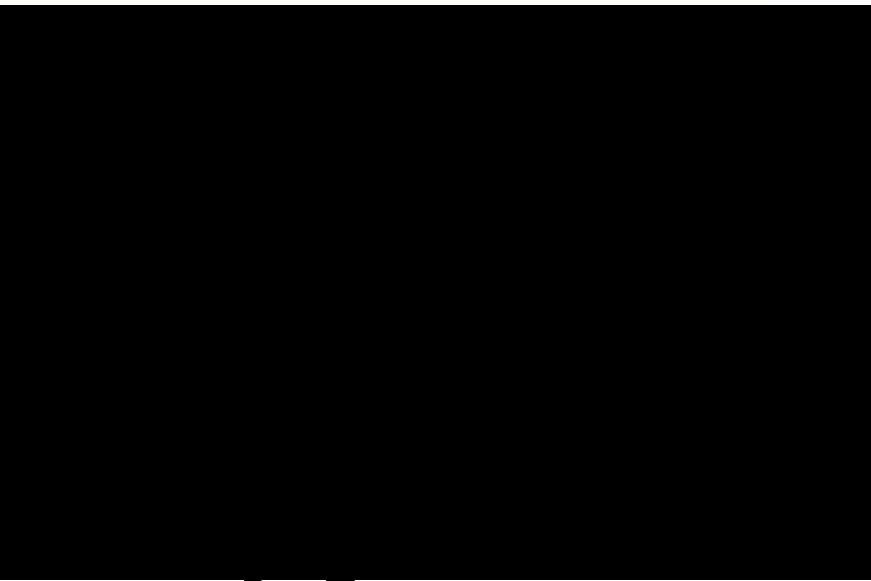
3 out of 3 key components must qualify

Planning out the Documentation

- Three out of three key components required
- We
- Co

This histor
ONE HPI
ROS or P

Target Co
99201



Prospective Documentation



99201

PF History

PF Exam

Straightforward MDM

3 out of 3 key components must qualify

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History

History	HPI	ROS	PFSH
PF			None

CC: "My

HPI: The
started to



3 out of 3 key components must qualify

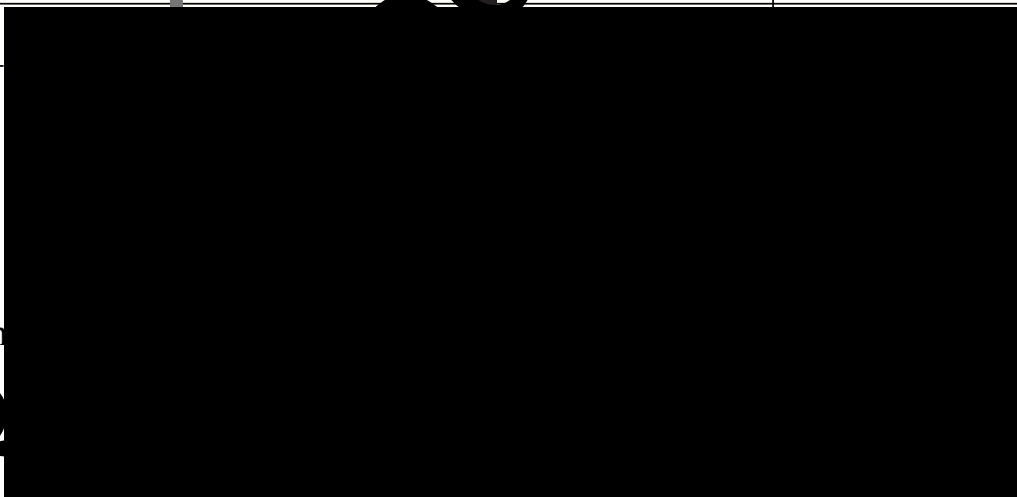
Target Code	History	Exam	MDM
9			

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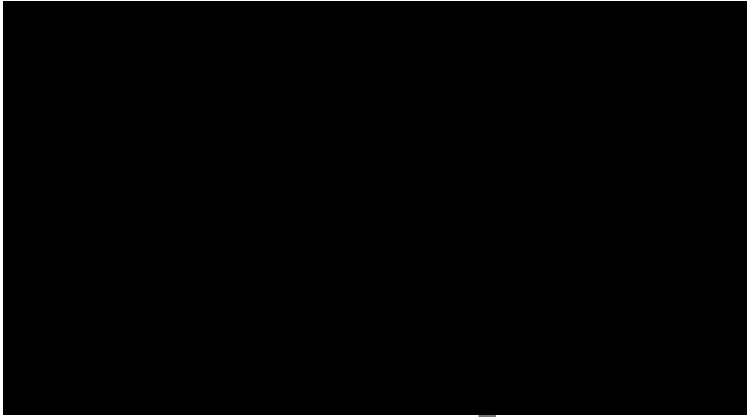
The exam

HPI: The



Exam

Constitutional	Eyes	ENMT	Neck	Lungs	CV	GI	GU



in which
arm with mild

Chest/Breasts



Musculoskeletal

quires only
m ANY organ

Neurologic

systems

Psychiatric

3 out of 3 key components must qualify

Target Code	History	Exam	MDM
99201	PF	PF	SF

It is difficult
need are one

am. All you

In this case t

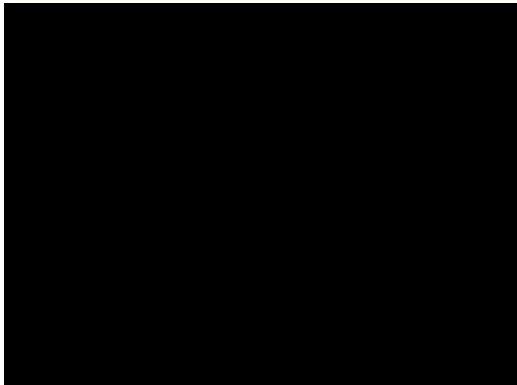
1. Inspection
2. Palpation



This adds up more than enough bullets to qualify.

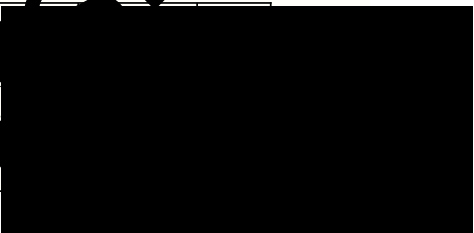
Medical Decision-Making

CC: "My finger hurts."



index finger pain which
 swollen and warm with mild
 ectate lesion

MDM	Pr
SF	
Low	
Med	
High	
Requi	



3 out of 3 key components must qualify

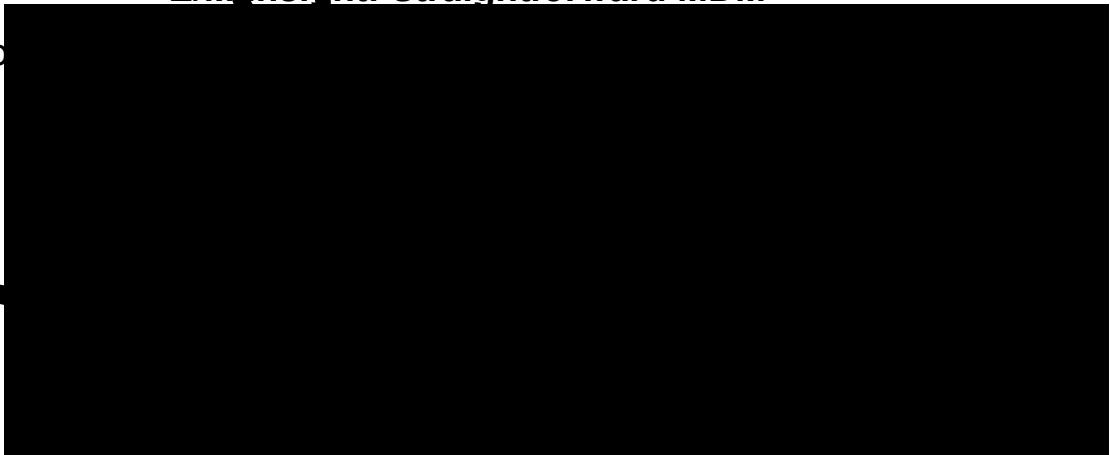
Target Code	History	Exam	MDM
99201	PF	PF	SF

E/M Insight: Straightforward MDM

Straightfo

- One p
- One d
- Minim

The exa





99201

CC: "My finger hurts"

HPI: The patient comp

[Redacted text block containing multiple lines of blacked-out content]

Redacted Version



99202

E/M Code	History	Exam	MDM	Time
99202	EPF	EPF	SF	20

Time required would be 10 minutes

- Second least frequently used code for these encounters
- Reimbursements about \$61.00



99202

E/M Code	History	Exam	MDM	Time
99202	EPF	EPF	SF	20

3 out of 3 key components must qualify

EPF History

Hx	HPI	ROS	PFSH
PF	Brief	None	None
EPF	Brief	1	None
Det	Ext	2 - 9	1/3
Comp	Ext	10	3/3

EPF Exam

Exam	Bullets
PF	1 - 5 from any systems
EPF	6 - 11 from any systems
Det	12 from any systems
Comp	2 from 9 systems

Straightforward MDM

MDM	Prob Pts	Data Pts	Risk
SF	1	0 - 1	Min
Low	2	2	Low
Mod	3	3	Mod
High	≥4	≥4	High

Requires two out of three

What Does a 99202 Look Like?

- You see an otherwise healthy teenager with a mild sore throat
- You diagnose a simple viral URI and recommend rest and fluids, with Tylenol if needed for discomfort or fever
- How would you code and document this encounter?

P
Self limi
Establis
Establis w/ser
New pro work-up
New pro work-up

Risk	Presenting Problems	Diagnostic Procedures	Management Options
Minimal	<ul style="list-style-type: none"> •One self-limited or minor problem, e.g., cold, insect bite, tinea corporis. <input checked="" type="checkbox"/> 	<ul style="list-style-type: none"> •Laboratory tests •Chest X-rays •EKG/EEG, Echocardiogram 	<ul style="list-style-type: none"> •Rest •Gargles •Superficial dressings
Low	<ul style="list-style-type: none"> •Two or more self-limited or minor problems •One stable chronic illness •Acute uncomplicated injury or illness, e.g., cystitis, allergic rhinitis, sprain 	<ul style="list-style-type: none"> •Physiologic tests not under stress, e.g., PFTs •Non-cardiovascular imaging studies with contrast •ABG •Skin biopsies 	<ul style="list-style-type: none"> •Over the counter drugs •Minor surgery, with no risk factors •PT/OT •IV fluids without additives
Moderate	<ul style="list-style-type: none"> •One chronic illness, with mild exacerbation, •Two stable chronic illnesses •Undiagnosed new problem, with uncertain prognosis 	<ul style="list-style-type: none"> •Cardiac stress test •Cardiovascular imaging studies, with contrast, with no identified risk factors 	<ul style="list-style-type: none"> •Prescription drug management •IV fluids, with additives
High	<ul style="list-style-type: none"> •One or more chronic illness, with severe exacerbation •Acute or chronic illness or injury, which poses a threat to life or bodily function •An abrupt change in neurological status 	<ul style="list-style-type: none"> •Cardiovascular imaging, with contrast, with identified risk factors •Cardiac EP studies •Diagnostic endoscopies, with identified risk factors 	<ul style="list-style-type: none"> •Parenteral controlled substances •Drug therapy requiring intensive monitoring for toxicity •Obtain DNR or de-escalate care

Calculating the Overall MDM

Need 2 out of 3 to qualify for given level of MDM



Selecting the Target Code

E/M Code	History	Exam	MDM	Time

Planning out the Documentation

- Three out of three key components required
- We know we have the MDM
- Co

This must be a high H...
of only

3 out of 3 key components must qualify

Target Code	History	Exam	MDM
99202	EPF	EPF	SF <input checked="" type="checkbox"/>

History

History	HPI	ROS	PFSH
---------	-----	-----	------

CC:
HPI:
with
RO

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element
PFSH a

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HPI. Tw

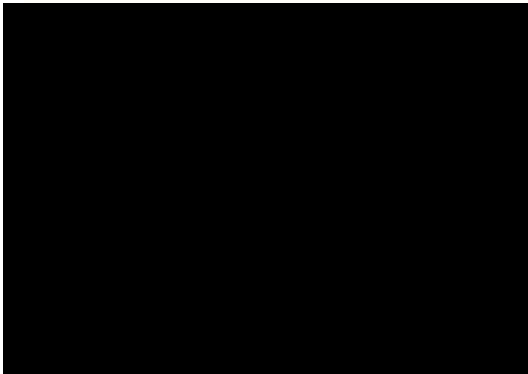


Exam

Constitutional	Eyes	ENMT	Neck	Lungs	CV	GI	GU
1	2	3	4	5	6	7	

CC: Sore throat

HPI: The patient is a pleasant a 15 year old male who presents with a sore throat which began three days ago.



ills

urished, non-toxic white male
update; TM's intact and pearly

Requires only 6 - 11
bullets from ANY organ
systems

Chest/Breasts
Skin
Musculoskeletal
Neurologic
Psychiatric

3 out of 3 key components must qualify

Target Code	History	Exam	MDM
99202	EPF <input checked="" type="checkbox"/>	EPF <input checked="" type="checkbox"/>	SF

E/M Insight: Expanded Problem Focused Exam

An expanded problem focused exam requires six to 11 bullets from any systems.

In this case the following seven bullets were documented:

1. Thr
2. Des
3. Exa
4. Ex
5. Exa
6. Aus
7. Auscultation of heart

This adds up more than enough bullets to qualify.

Medical Decision-Making

CC:
HPI:
with
ROS
Vitals
Gene
ENM
Neck
Lung
CV:
Asse
Plan:

Tar
9

Straight

- One
- One
- Mini

The ex
fact, the

99202

CC: Sore throat

HPI: T
throat

s with a sore

ROS:

125/75

ENMT:

arly

Neck:

Lungs:

CV: R

Assess

Plan:

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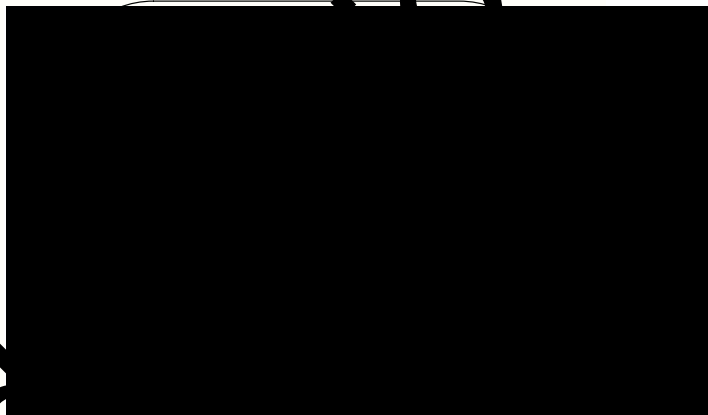


99203

E/M Code	History	Exam	MDM	Time
99203	Det	Det	Low	30

Time required would be 30 minutes

- Most frequently used code for these encounters
- Reimbursement is about \$90.00



99203

E/M Code	History	Exam	MDM	Time
99203	Det	Det	Low	30

3 out of 3 key components must qualify

Detailed History

Hx	HPI	ROS	PFSH
PF	Brief	None	None
EPF	Brief	1	None
Det	Ext	2 - 9	1/3
Comp	Ext	10	3/3

Detailed Exam

Exam	Bullets
PF	1 - 5 from any systems
EPF	6 - 11 from any systems
Det	12 from any systems
Comp	2 from 9 systems

Low Complexity MDM

MDM	Prob Pts	Data Pts	Risk
SF	1	0 - 1	Min
Low	2	2	Low
Mod	3	3	Mod
High	≥4	≥4	High

Requires two out of three

Readable

What Does a 99203 Look Like?

- You see a 45 YOM who complains of dyspepsia
- You suspect a diagnosis of GERD and start the patient on a trial of antacid therapy
- You also discuss the possibility of lifestyle modifications and cessation of tobacco use
- F/U visit scheduled in 4 weeks

Problems/DD	
Self limited or minor	1
Established problem, stable	2
Established problem, worsening	3
New problem, no additional work-up planned	3
New problem, additional work-up planned	4

Total Points = 3

Discuss test results with MD	1
Independent review of image, tracing, or specimen	2
Decision to obtain old records	1
Review of old records	2

Total Points = 1

Revised

Risk	Presenting Problems	Diagnostic Procedures	Management Options
Minimal	<ul style="list-style-type: none"> •One self-limited or minor problem, e.g., c tinea corporis. 	<ul style="list-style-type: none"> •Laboratory tests 	<ul style="list-style-type: none"> •Rest
Low	<ul style="list-style-type: none"> •Two or more s minor problems •One stable chr •Acute uncomp illness, e.g., cyst rhinitis, sprain 		
Moderate	<ul style="list-style-type: none"> •One chronic ill exacerbation, •Two stable chr •Undiagnosed n uncertain prognosis 		
High	<ul style="list-style-type: none"> •One or more chronic illness, with severe exacerbation •Acute or chronic illness or injury, which poses a threat to life or bodily function •An abrupt change in neurological status 	<ul style="list-style-type: none"> •Cardiovascular imaging, with contrast, with identified risk factors •Cardiac EP studies •Diagnostic endoscopies, with identified risk factors 	<ul style="list-style-type: none"> •Parenteral controlled substances •Drug therapy requiring intensive monitoring for toxicity •Obtain DNR or de-escalate care

Calculating the Overall MDM

MDM Complexity	Problems	Data	Risk
Low			
Moderate			
High			

Need 2 out of 3 to qualify for given level of MDM



Selecting the Target Code

EPF Code	History	Exam	MDM	Time
00201	PF	PF	SF	10
00202	PF	EPF	Med	20
99203	Det	Det	Low	30
99204	Comp	Comp	Med	45
99205	Comp	Comp	High	60

3 out of 3 key components must qualify

Planning out the Documentation

- Three out of three key components required
- We know we have the MDM
- Co

This list
extended
and 1/3 P

Target C

9920

History

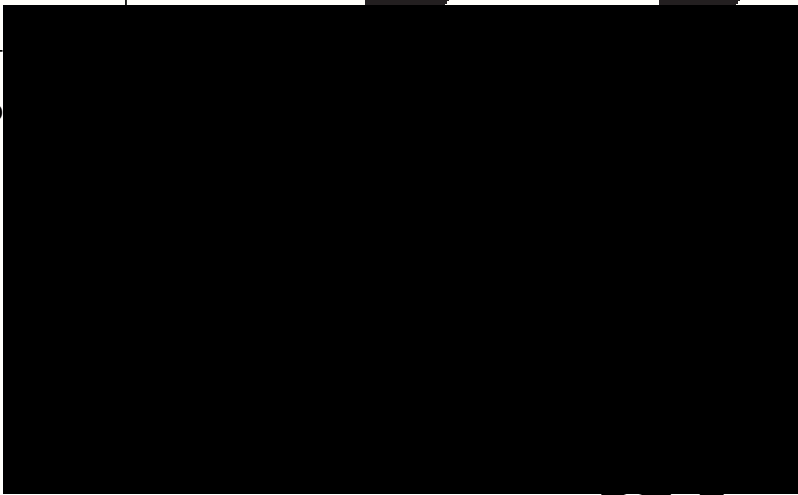
History	HPI	ROS	PFSH
Detail			1/3

CC: Dysp

HPI: The
intermitte
worse aft

Pertinent

ROS



3 out of 3 key components must qualify

Target Code	History	Exam	MDM
99203	Det	Det	Low

E/M Insight: Detailed History

Requires an

three

from

This

HPI

social

PFSH

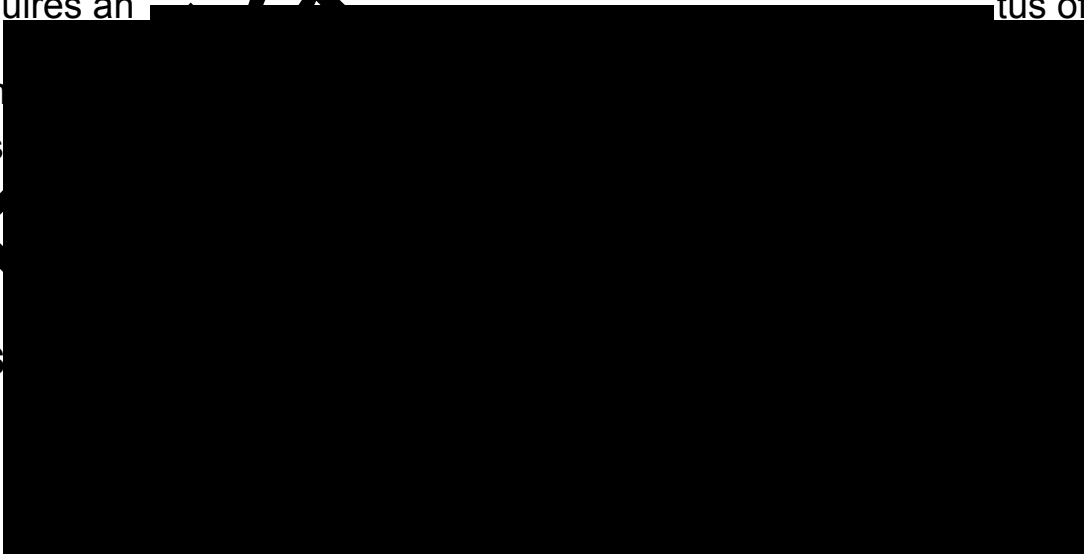
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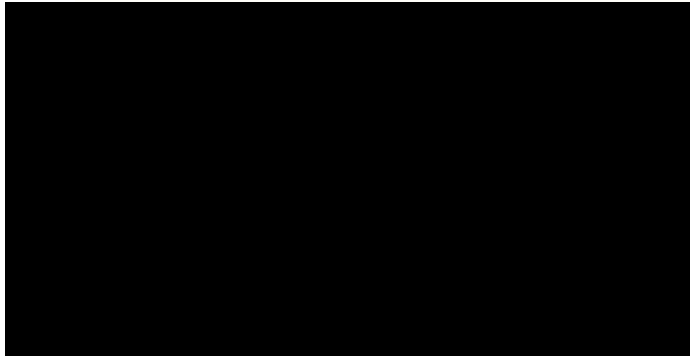
as-

In



Exam

Constitutional		Eyes	ENMT	Neck	Lungs		CV	GI	GU
1	2	3			4	5	6	7	8
								9	10
								11	12
								13	14
								15	16
								17	18
								19	20
								21	22
								23	24
								25	26
								27	28
								29	30
								31	32
								33	34
								35	36
								37	38
								39	40
								41	42
								43	44
								45	46
								47	48
								49	50
								51	52
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								57	58
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								73	74
								75	76
								77	78
								79	80
								81	82
								83	84
								85	86
								87	88
								89	90
								91	92
								93	94
								95	96
								97	98
								99	100



M looks stated age
 nias
 requires AT LEAST 2
 bullets from ANY organ
 systems

3 out of 3 key components must qualify

Target Code	History	Exam	MDM
99203	Det	Det <input checked="" type="checkbox"/>	Low

E/M Insight: Detailed Exam

A detailed exam requires 12 bullets from any organ systems. The example above contains the following bullets:

- Th
- Ge
- Ex
- Au
- Pe
- Au
- Pa
- Ex
- Ex
- As
- As
- Ex

Medical Decision-Making

Assessment: Probable GERD

- Plan:
1. OT
 2. Ele
 3. Sm
 4. Life
 5. RT
 6. Co

Target Cod
99203

E/M Insight: Low Complexity MDM

Low complexity

to qualify for any given level of complexity.

CC: Dyspepsia

HPI:
inter
wors

Perti

ROS

138/8

Gen:

Eyes

Lung

CV:

Abd:

Ext:

Asse

Plan:

weeks of
e pain is

DK 15 yrs

is



99204

E/M Code	History	Exam	MDM	Time
99204	Comp	Comp	Mod	45

Time required would be 45 minutes

- Second most frequently used code for these encounters
- Reimbursement is about \$137.00



99204

E/M Code	History	Exam	MDM	Time
99204	Comp	Comp	Mod	45

2 out of 3 key components must qualify

Comprehensive History

Hx	HPI	ROS	PFSH
PF	Brief	None	None
EPF	Brief	1	None
Det	Ext	2 - 9	1/3
Comp	Ext	10	3/3

Comprehensive Exam

Exam	Bullets
PF	1 - 5 from any systems
EPF	6 - 11 from any systems
Det	12 from any systems
Comp	2 from 9 systems

Moderate MDM

MDM	Prob Pts	Data Pts	Risk
SF	1	0 - 1	Min
Low	2	2	Low
Mod	3	3	Mod
High	≥4	≥4	High

Requires two out of three

What Does a 99204 Look Like?

- You see a patient who wishes to establish care with a lo
- She has stab

40
142 | 101 | 18
114

- You sche with r

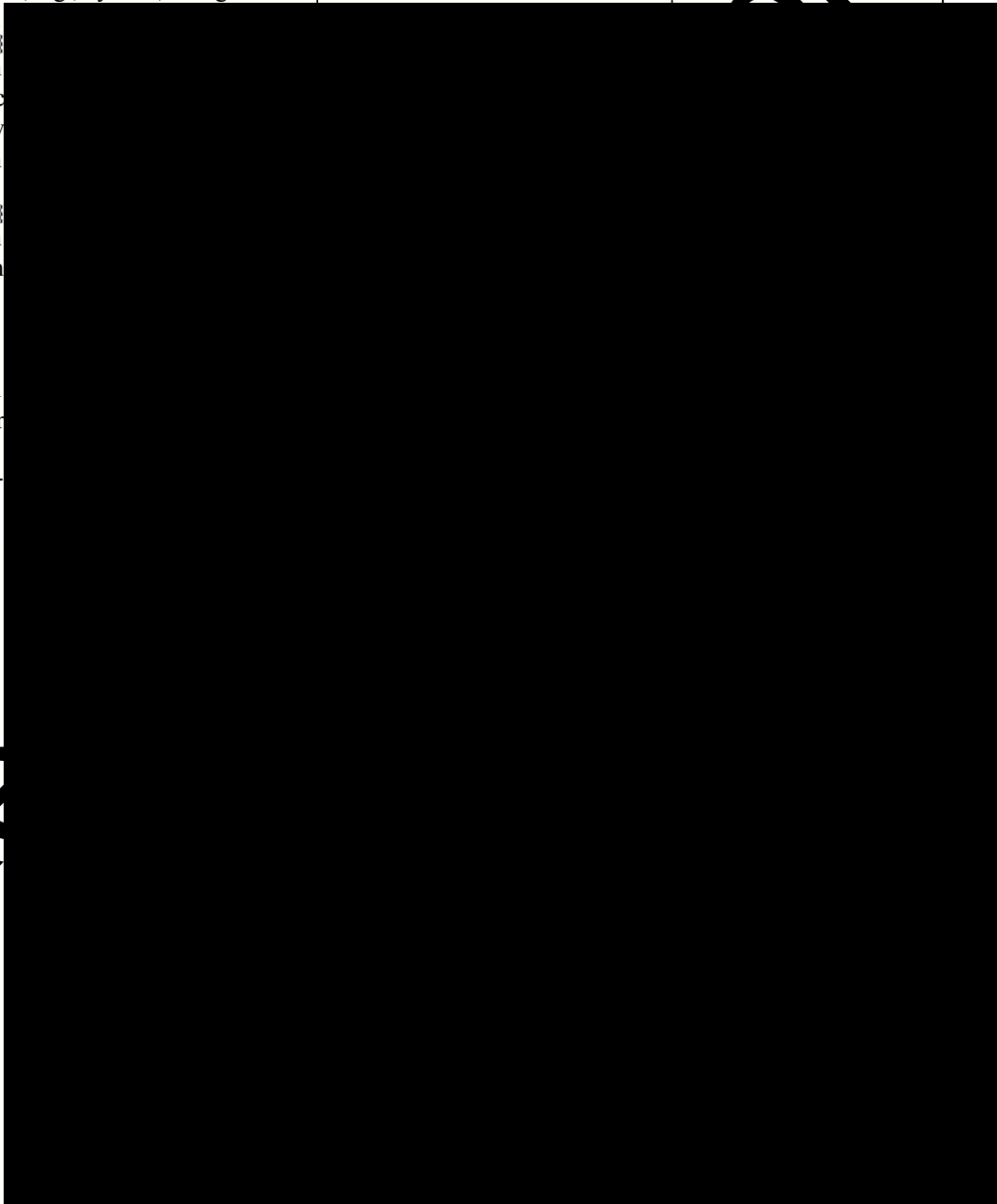
Problem	
Self limited	
Established pr	
Established pr pursuing	
New problem, no additional work-up planned	3
New problem, additional work-up planned	4

Total Points = 3

(echo, EKG, LHC, PFTs)	
Discuss test results with MD	1
Independent review of image, tracing, or specimen	2
Decision to obtain old records	1
Review of old records	2

Total Points = 1

Risk	Presenting Problems	Diagnostic Procedures	Management Options
Minimal	<ul style="list-style-type: none"> •One self-limited or minor problem, e.g., cold, insect bite, tinea corporis. 	<ul style="list-style-type: none"> •Laboratory tests •Chest X-rays •EKG/EEG, Echocardiogram 	<ul style="list-style-type: none"> •Rest •Gargles •Superficial dressings
Low	<ul style="list-style-type: none"> •Two or more self-limited or minor problems •One stable chronic illness •Acute uncomplicated injury or illness, e.g., cystitis, allergic rhinitis 	<ul style="list-style-type: none"> •Physiologic tests not under stress, e.g., PFTs •Non-cardiovascular imaging studies with contrast •ABG 	<ul style="list-style-type: none"> •Over the counter drugs •Minor surgery, with no risk factors •PT/OT •IV fluids, without
Moderate	<ul style="list-style-type: none"> •On •Exact •Two •Un •unc 		
High	<ul style="list-style-type: none"> •On with •Ac inju or b •An neur 		



RE



Selecting the Target Code

E/M Code	History	Exam	MDM	Time
99201	PF	PF	SF	10
99202	EPF	EPF	SF	20
99203	Det	Det	0	0
99204	Comp	Comp	Mod	45
99205	Comp	Comp	High	60

3 out of 3 key components must qualify

Planning out the Documentation

- Three
- We
- Co

This history
extended H
and 0.5 PF

Target Co

99204

History

History	HPI	ROS	PFSH
Comp	Extended	10	3/3

CC:
HPI:
contr
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NKD
PMH
SH:
FH:
fath
RO

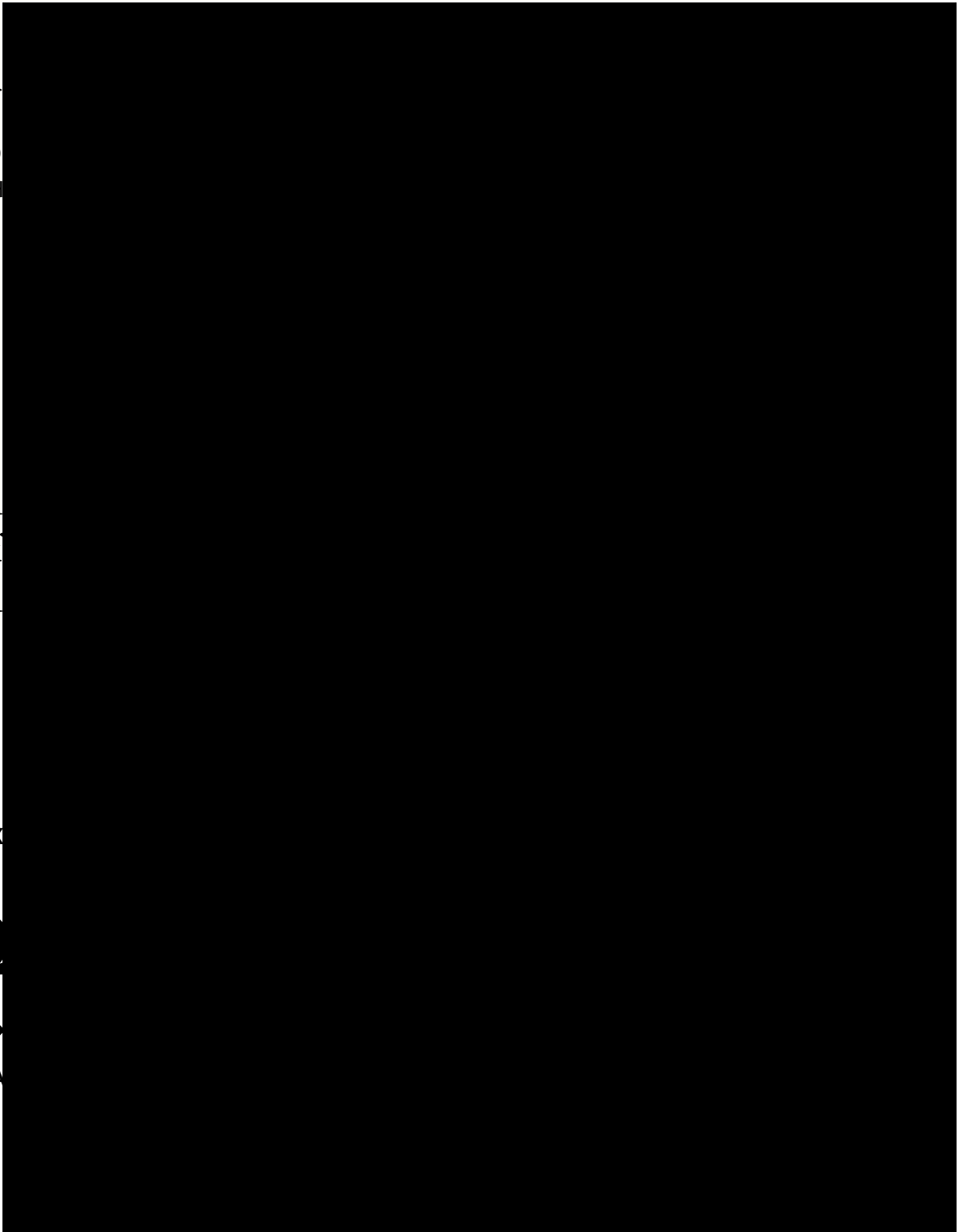
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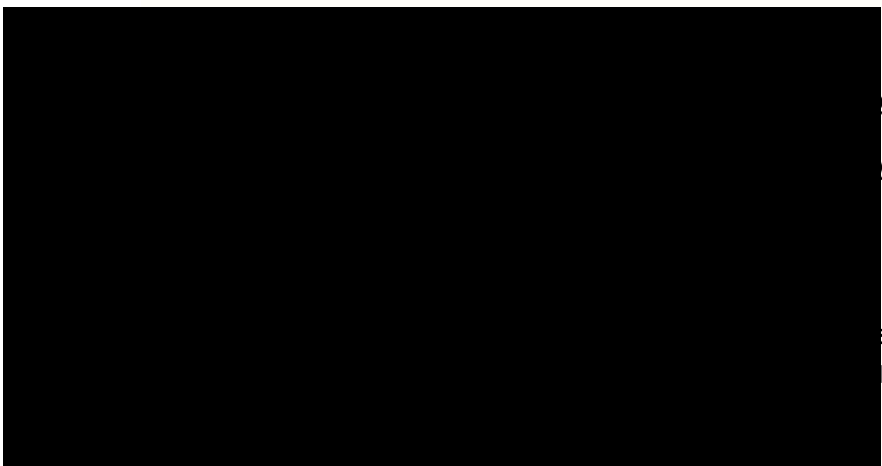
PFSH:

ROS: A
docum
E/M sh



Exam

Constitutional		Eyes		ENMT		Neck		Lungs		CV		GI		GU
1	2	3	4	5	6	7	8	9	10	11	12	13	14	



Chest/Breasts	
[Redacted]	
Skin	
15	16
Musculoskeletal	
[Redacted]	
Neurologic	
[Redacted]	
Psychiatric	
17	18

AT LEAST TWO BULLETS FROM EACH OF NINE ORGAN SYSTEMS

3 out of 3 key components must qualify

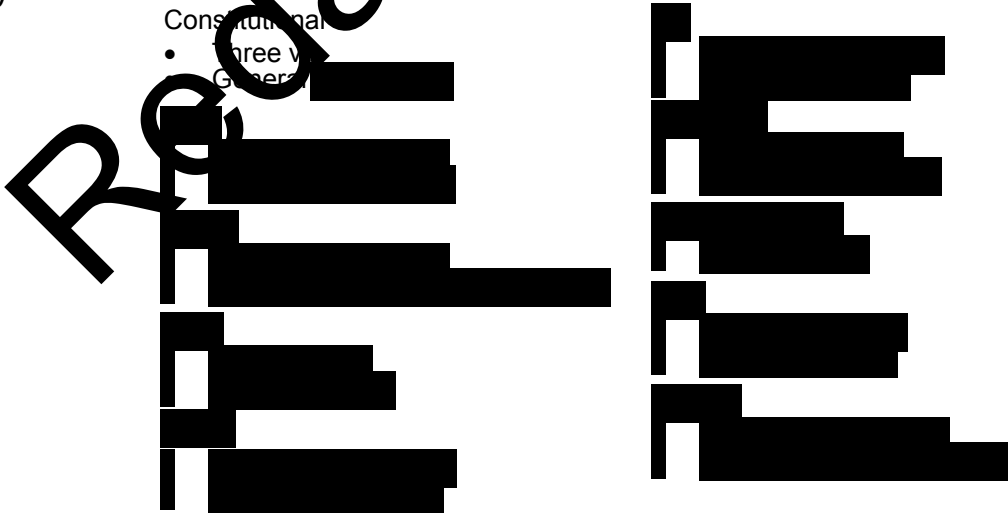
Target Code	History	Exam	MDM
99204	Comp	Comp <input checked="" type="checkbox"/>	Mod

E/M Insight: Comprehensive Exam

Requires at least two bullets from EACH of NINE organ systems.

The example above qualifies based on the following bullets and organ systems:

- Constitutional
- three v
- General



Medical Decision-Making

$\frac{15}{40}$
 $\frac{142}{4.1} \mid \frac{101}{24} \mid \frac{18}{0.8}$

MDM	Prob Pts	Data Pts	Risk
SF	1	0 - 1	Min

Assessment: 1.
2.
3.

Plan: 1.
2.
3.

3 out of 3 key components must qualify

Target Code	History	Exam	MDM
99204	Comp <input checked="" type="checkbox"/>	Comp <input checked="" type="checkbox"/>	Mod <input checked="" type="checkbox"/>

E/M Insight: Moderate Complexity MDM

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99204

CC: Establish care with local physician

HPI
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PM
SH:
FH:
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Vita
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Eye
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Nec
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CV:
Abd
Ext:
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Pla

- 1.
- 2.
- 3.

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99205

E/M Code	History	Exam	MDM	Time
99205	Comp	Comp	High	60

Time required would be 60 minutes

- Third most frequently used code for these encounters
- Reimbursement is about \$173.00



99205

E/M Code	History	Exam	MDM	Time
99205	Comp	Comp	High	60

3 out of 3 key components must qualify

Comprehensive History

Hx	HPI	ROS	PFSH
PF	Brief	None	None
EPF	Brief	1	None
Det	Ext	2 - 9	1/3
Comp	Ext	10	3/3

Comprehensive Exam

Exam	Bullets
PF	1 - 5 from any systems
EPF	6 - 11 from any systems
Det	12 from any systems
Comp	2 from 9 systems

High Complexity MDM

MDM	Prob Pts	Data Pts	Risk
SF	1	0 - 1	Min
Low	2	2	Low
Mod	3	3	Mod
High	≥4	≥4	High

Requires two out of three

Redacted

What Does a 99205 Look Like?

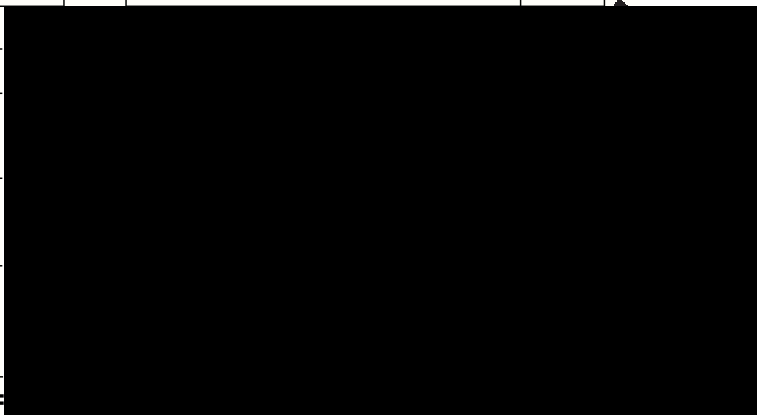
- You see a new patient with SOB
- He says he hospitalized a few months ago and placed on “water pills” which he ran out of
- Y
- C
- Y
- re
- M
- re



MMM Points

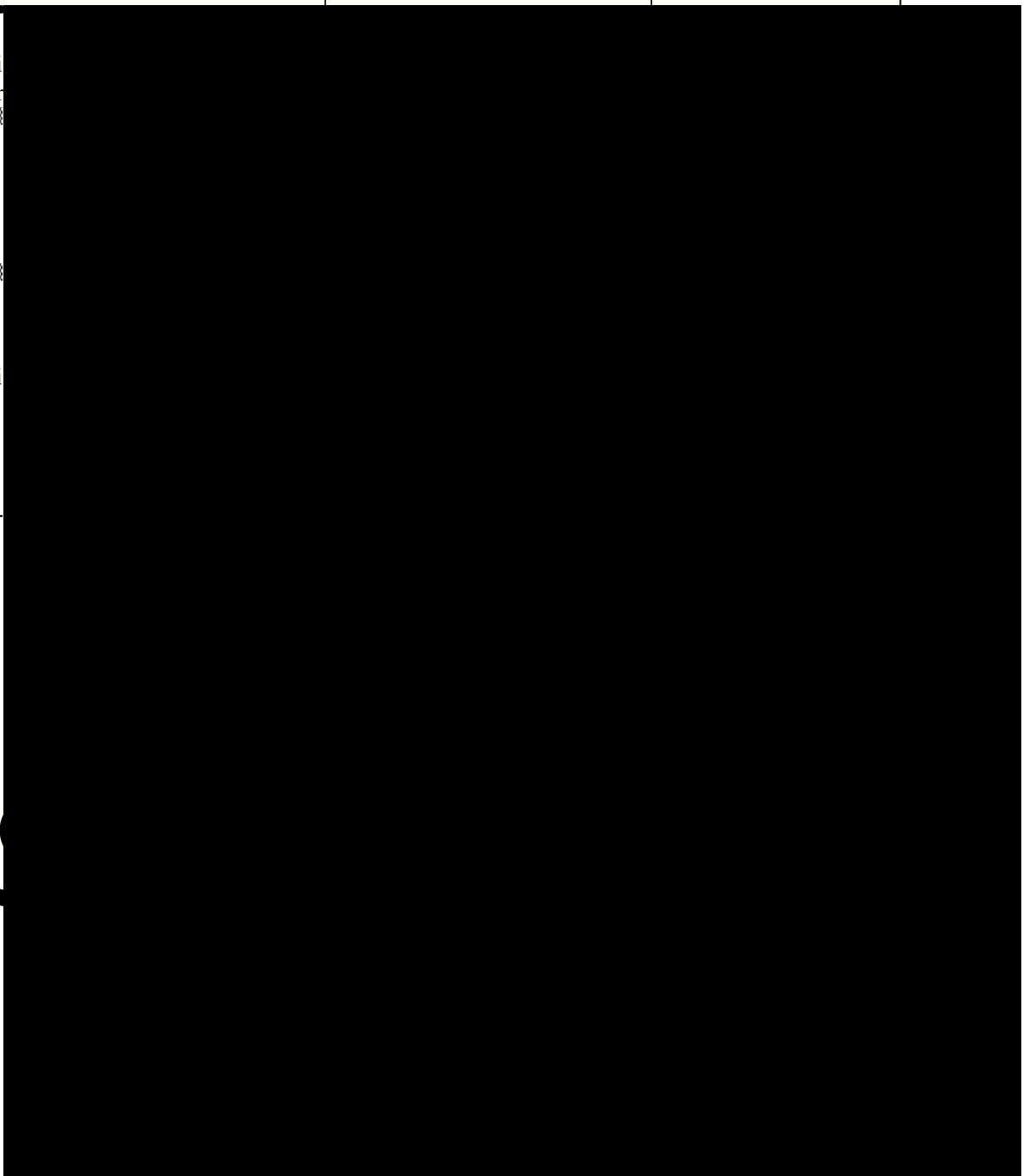
Problems/Dx	Pts	Data Reviewed	Pts
Self limited or minor (max 2)			
Established problem, stable			
Established problem, worsening			
New problem, no additional work-up planned			
New problem, additional work-up planned			

Total Points =



Redacted

Risk	Presenting Problems	Diagnostic Procedures	Management Options
Minimal	<ul style="list-style-type: none"> •One self-limited or minor problem, e.g., cold, insect bite, tinea corporis. 	<ul style="list-style-type: none"> •Laboratory tests •Chest X-rays •EKG/EEG, Echocardiogram 	<ul style="list-style-type: none"> •Rest •Gargles •Superficial dressings
Low	<ul style="list-style-type: none"> •Two or more self-limited or minor problems 	<ul style="list-style-type: none"> •Physiologic tests not under stress, e.g., PFTs 	<ul style="list-style-type: none"> •Over the counter drugs •Minor surgery, with no
Moderate			
High			

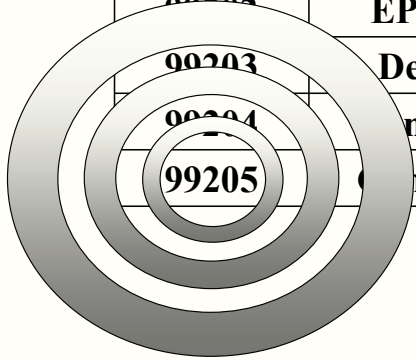


R



Selecting the Target Code

E/M Code	History	Exam	MDM	Time
99201	PF	PF	SF	10
00202	EPF	EPF	SF	20
00203	Det	Det	Low	30
00204	Comp	Comp		45
99205	Comp	Comp	High	60



3 out of 3 key components must qualify

Planning out the Documentation

- Three out of three key components required
- We
- Co

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and 3 P

Target C			
99205	Comp	Comp	High <input checked="" type="checkbox"/>

History

History	HPI	ROS	PFSH
Comp	Extended	10	3/3

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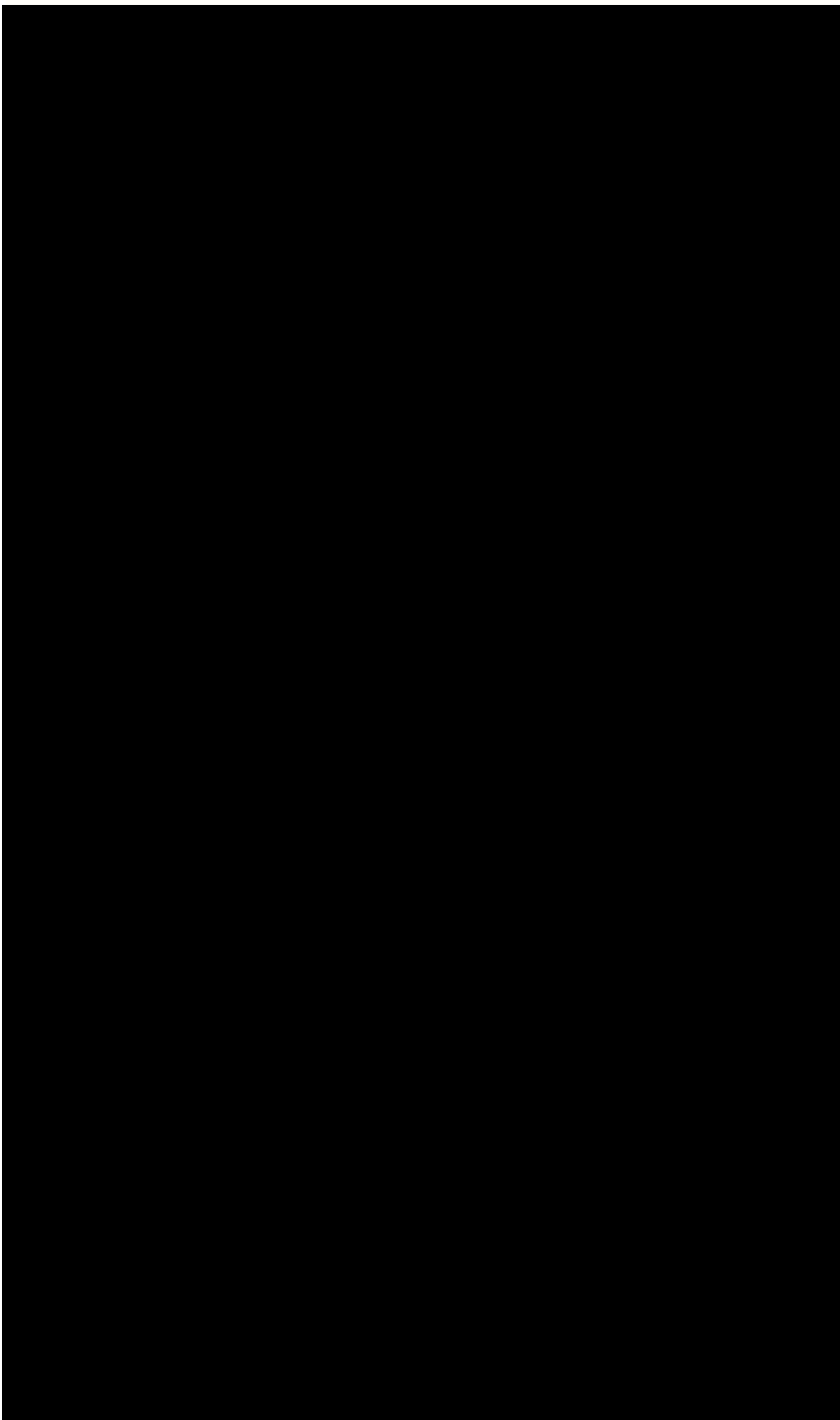
date a

placed

PFSH

Exam

Constitutional		Eyes		ENMT		Neck		Lungs		CV		GI		GU
1	2	3	4	5	6	7	8	9	10	11	12	13	14	
												19	Chest/Breasts	
													Skin	
												15	Musculoskeletal	
													Neurologic	
													Psychiatric	
												17	18	
													MDM	
												<input checked="" type="checkbox"/>	High	



A,

ONE

lify

Exam

organ systems.

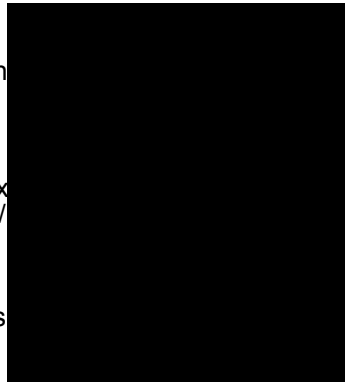
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- Auscultation of lungs
- Percussion of lungs

Medical Decision-Making

Assess

Plan:

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Lung

CV:

Abd:

Ext:

Skin:

Psyc

Asse

Plan:

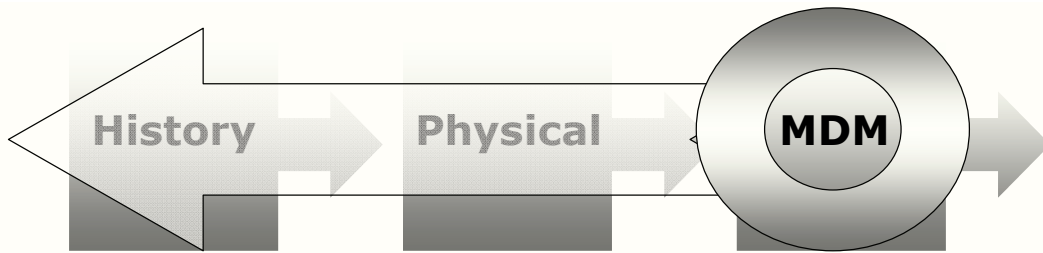
1. La

2. K

3. E

4. W

5. R



- Identify the “correct” level of care
- Perform the documentation in a purpose-driven manner
- Don’t over-document!
- Use the accepted documentation shortcuts



E/MUNIVERSITY

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