Rational Physician Coding for Critical Care and Other Timed Services

Full non-redacted version may be downloaded and printed out after you register for the course. A hard copy of this handout if provided to CD-ROM customers.

Peter R. Jensen, MD, CPC
www.EMuniversity.com
Rational Physician Coding for Critical Care and Other Timed Services

Peter R. Jensen, MD, CPC

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

Goals

- Identify the types of patient encounters which may be coded based on time
- Understand how to calculate and report time spent
- Learn the documentation required for these encounters
Time-Based Services

- Critical Care
- E/M encounters (optional)
- Prolonged Services
- Discharge Services

Critical Care

take place in the intensive care unit
What is a Critical Illness?

- “A critical illness or injury is deterioration in the patient’s condition.”

Organ System Failure

- Circulatory failure
- Shock
- Renal failure

AMA CPT Manual
Critical Care Physician Services

- Critical care services require ongoing monitoring of the patient’s condition.

Services Included with Critical Care

Anything NOT included in this list should be billed separately (Modifier 25 must be added to the critical care service).

Examples
- Endotracheal intubation (31500)
- CPR (92950)
- Swan Ganz catheter (93503)
- Central line (36556)
Coding for Critical Care

Two time-based codes

99291
99292

- Reported for 2,636,587 encounters in 2004 for $528,971,410
99292

- Used to bill for each multiple times per day

Critical Care is a Time-Based Service

<table>
<thead>
<tr>
<th>Total Duration of Critical Care</th>
<th>CPT 4 Codes</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Less than 30 minutes</td>
<td></td>
</tr>
<tr>
<td>b) 30 - 144 minutes</td>
<td></td>
</tr>
<tr>
<td>c) 75 - 104 minutes</td>
<td></td>
</tr>
<tr>
<td>d) 105 - 134 minutes</td>
<td></td>
</tr>
<tr>
<td>e) 135 - 164 minutes</td>
<td></td>
</tr>
<tr>
<td>f) 165 - 194 minutes</td>
<td></td>
</tr>
</tbody>
</table>
Calculating Critical Care Time

- side or

Critical Care Documentation

- Must document
A Day in the Life of Critical Care

- You admit a patient with CHF
- Later that day you are paged stat and find the patient somnolent, hypotensive
  stabilizing the patient on the floor and transfer him to the ICU
- You spend another 21 minutes

How would you code and document this encounter?
Coding for this Patient

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
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<tbody>
<tr>
<td>P</td>
<td>$154.00</td>
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<td>$116.00</td>
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<td></td>
<td>$171.00</td>
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*Significant, separately identifiable evaluation and management service by the same physician on the same day of the procedure or other Service*

Interval History
CTSP stat following admisssion order today for CHF exacerbation. Pt found unresponsive and hypoxic

Plan
1. Continue Dobutamine gtt
2. Continue Bumex gtt
3. Recheck renal profile stat
4. 2 amps of on ETI and CPR

Redacted Version

Redacted Version
Critical Care Coding Pearls

- Add up

Redacted Version
Time-Based E/M Services

- Mobile time
- Phone-based time

Redacted Version
E/M Services Based on Time

- Strictly based on the history, physical exam and MDM
Prolonged Services

- Prolonged services codes and billed in addition to the E/M encounter
- May be used in either the outpatient

What is a Prolonged Service?
Calculating Time for Prolonged Services

- Clock starts ticking only during an E/M encounter.
- Time must be continuous.

Outpatient Prolonged Services
Inpatient Prolonged Services

- 9935
- No modifier is required

Documentation Required

- Normal
- Must document and total time spent
Example of Prolonged Services

- In the morning you perform and document a level [redacted] service.
- What would be the best way to code for these services?

Optimal Coding This Encounter

<table>
<thead>
<tr>
<th>E/M Code</th>
<th>History</th>
<th>Exam</th>
<th>MDM</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>[redacted]</td>
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</tr>
</tbody>
</table>
Documenting Prolonged Services

Addendum

I called cath... All known...

Total 6 min
Discharge Services

Inpatient Discharge Services

- Time: $95.53
- Include all time face-to-face
Documenting Discharge Services

Peter R. Jensen, MD, CPC
Online and On-site Physician-to-Physician E/M Coding Education

1-888-U-EM-CODE
pjensen@emuniversity.com
Practical E/M Coding Education
www.EMuniversity.com