

2021 OFFICE VISIT CODE SELECTION

One of the biggest changes the AMA made to evaluation and management E/M codes for office and outpatient visit is that clinicians can choose codes for visits based on either time or MDM. Here is what you need to know:

99201 IS DELETED

Under the new guidelines, a visit that satisfies the requirements for 99201 also satisfies the requirements for 99202.

MDM



MDM-Based Code Selection

Level	New	Est
Strfwd	99202	99212
Low	99203	99213
Mod	99204	99214
High	99205	99215

MDM Highlights

Must meet two of three elements to select the MDM level:

- Number and complexity of problems addressed at the encounter, not just listed or comorbidities
- Data reviewed and analyzed - categories instead of points
- Table of risk largely unaltered

TIME



New Patient DOS time

99202	15-29
99203	30-44
99204	45-59
99205	60-74

Est. Patient DOS time

99212	10-19
99213	20-29
99214	30-39
99215	40-54

Time Highlights

Time is now total time spent caring for the patient on the date of the encounter. NOT just face-to-face at the visit! This includes (when not separately reported):

- Preparing to see the patient (ex. reviewing tests)
- Obtaining or reviewing separate history
- Performing a medically appropriate exam and/or evaluation
- Counseling and educating the patient, family, and/or caregiver
- Ordering meds, tests, procedures
- Making referrals and communicating with other care professionals
- Documenting clinical information in the health record
- Interpreting and communicating results
- Care coordination

Notes for Successful Billing Coding in 2021

- Document a medically appropriate history and exam. It does not affect selected level
- Make the note meaningful for the current visit. Avoid “note bloat”

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