E&M Emergency Department Coding (MDM Based on 2 of 3 Components)

E/M LEVEL, MDM *99281;provider not required*	NUMBER AND COMPLEXITY OF **PROBLEMS** ADDRESSED	AMOUNT AND/OR COMPLEXITY OF **DATA** TO BE REVIEWED AND ANALYZED (Each unique test, order, or doc. reviewed counts)	**RISK** OF COMPLICATIONS, and/or MORBIDITY/MORTALITY OF PATIENT MANAGEMENT
99282 Strfwd	MINIMAL • One self-limited or minor prob.	Minimal but usually none	Minimal risk of morbidity from additional diagnostic testing/treatment.
99283 Low	LOW • 2 or more self-limited or minor prob. *OR* • 1 chronic stable illness *OR* • 1 acute, uncomplicated illness/injury *OR* • 1 acute, uncomplicated illness/injury requiring IP or OBS level of care *OR* • 1 stable, acute illness	**(Must Meet 1 of 2 Categories)** <u>Category 1</u>: Tests and documents (any 2) 1. Review of prior external note(s) from EACH unique source 2. Review results of EACH unique test 3. Order of EACH unique test *OR* <u>Category 2</u>: Assessment requiring an independent historian	Low risk for undergoing additional testing/treatment Consider: OTC drugs, non-contrast imaging, PT/OT, skin bx, minor surgery
99284 Moderate	MODERATE NUMBER AND COMPLEXITY • One or more chronic illnesses with exacerbation, progression, or treatment of side effects • 2 or more chronic stable illnesses • New prob w/ uncertain prognosis • Acute illness with systemic symptoms • Acute complicated injury	**(Must Meet 1 of 3 Categories: Moderate)** <u>Category 1</u>: Tests, documents, historian (any 3) 1. *Review of prior external note(s) from EACH unique source 2. *Review results of EACH unique test 3. *Order of EACH unique test 4. Assessment requiring an independent historian. *OR* <u>Category 2</u>: Independent interpretation of tests • Independent interpretation of tests performed by another provider (not separately billed) *OR* <u>Category 3</u>: Discussion of management or test interpretation • Discuss mgmt./interpretation of test with another provider (not separately billed) **(Must Meet 2 of 3 Categories: High)**	Moderate risk of morbidity from additional tests/treatment Consider: • Rx mgmt., • Discussion regarding minor surgery w/ patient or procedure risk factors • Discussion regarding elective major surgery w/o risk factors • Diagnosis or treatment significantly limited by social determinants of health
99285 High	HIGH NUMBER AND COMPLEXITY • 1 or more chronic illness with severe exacerbation, progression, or treatment side effects • Acute/chronic illness that may pose threat to life or bodily function		High risk of morbidity from additional diagnostic testing or treatment Consider: Drug therapy req. intensive monitoring for toxicity, Decision regarding hospital care (admit/escalate), Decision regarding elective major surgery w/ patient and/or procedure risk factors, Decision to de-escalate care/decide DNR due to poor prog, IV controlled substance use

Critical Care: CMS and Commercial

CMS/Medicare Guidelines

Total Duration of Critical Care per CMS	Code(s)
Less than 30 minutes	Appropriate E/M Code
30-103 minutes	99291 x 1
104-133 minutes	99291 x 1 and 99292 x 1
134-163 minutes	99291 x 1 and 99292 x 2
164-193 minutes	99291 x 1 and 99292 x 3
194 minutes or longer	99291 x 1 and 99292 as appropriate (see illustrated reporting examples above)

CPT Guidelines / Commercial Carriers

- 99291 is OK for critical care if over 30 min for both
- For CMS: need to eclipse 104 for added 99292
- For Commercial: +99292 can be billed at 75 minutes

Total Duration of Critical Care	Code(s)
Less than 30 minutes	Appropriate E/M Code
30-74 minutes	99291 x 1
75-104 minutes	99291 x 1 and 99292 x 1
105-134 minutes	99291 x 1 and 99292 x 2
135-164 minutes	99291 x 1 and 99292 x 3
165-194 minutes	99291 x 1 and 99292 x 4
195 minutes or longer	99291 x 1 and 99292 as appropriate (see illustrated reporting examples above)