

Introduction to Evaluation & Management Coding

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Objectives

After this session, participants should:

- Be familiar on how to document E&M services to communicate successfully a patient encounter;
- Be able to identify the various E&M codes per level of service; and
- Be able to distinguish between E&M and Psychiatric procedure services in the CPT manual

Most frequently used E/M codes

Category	Code Numbers
▶ Outpatient Services	
New patients	99201–99205
Established patients	99211–99215
▶ Consultations	
Outpatient consultations	99241–99245
Inpatient consultations	99251–99255
▶ Emergency Department Services	99281–99288

Most frequently used E/M codes

Category	Code Numbers
▶ Hospital Observational Services	
Observation Care Discharge Service	99217
Initial Observation Care	99218–99220
Subsequent Observation Care	99224-99226
▶ Hospital Inpatient Services	
Initial Hospital Care	99221–99223
Subsequent Hospital Care	99231–99233
Hospital Discharge Services	99238–99239

Most frequently used E/M codes

Category	Code Numbers
▶ Nursing Facility Services	
Initial Nursing Facility Care	99304–99306
Subsequent nursing facility care	99307-99310
Nursing facility discharge services	99315-99316
▶ Domiciliary Care Services	
New patient	99324–99328
Established patient	99334–99337
▶ Home Care Services	
New patient	99341–99345
Established patient	99347–99350

E & M Coding

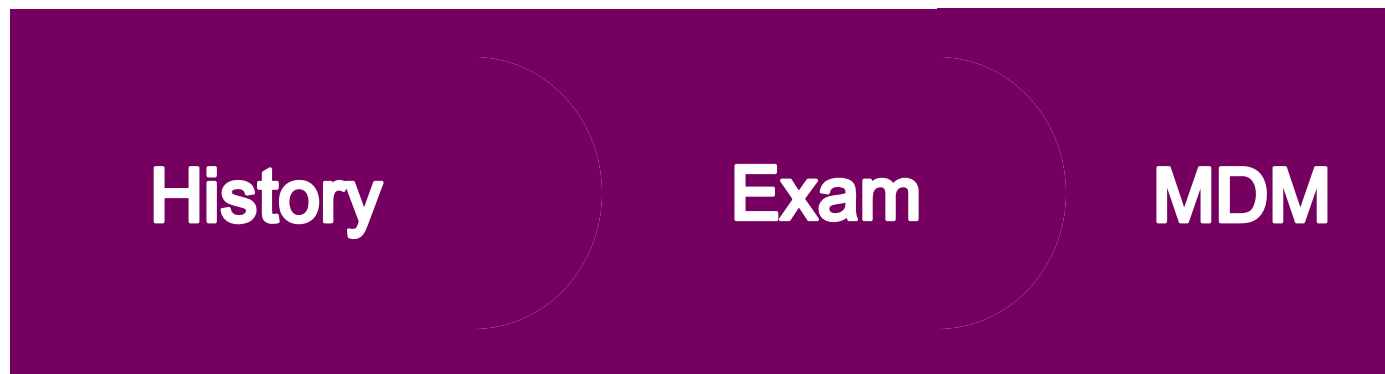
- 5-digit numbers of patient encounters that facilitate billing
- Various levels of care within each patient encounter
- In order to be paid properly, we need to document our encounters accurately
- Facilitates how the physician's cognitive work is translated into reimbursement

E & M Guidelines

- Developed by the AMA and CMS
- Two sets are available (1995 and 1997)
- You have the option to use any of the two but you can not mix elements from both guidelines in one note
- Most psychiatrists nowadays use the 1997 guideline

E & M Guidelines

- 3 “key components” should fit just right to achieve compliance



- There are 4 specific levels per component
- Time spent with the patient is NOT a major component

History

Building Blocks of History

Level	HPI	PFSH	ROS
Problem Focused	Brief	None	None
Expanded Problem Focused	Brief	None	1
Detailed	Extended	1 of 3	2-9
Comprehensive	Extended	3 of 3	10

History of Present Illness

Brief HPI	Extended HPI
Requires 1 to 3 HPI elements	Requires at least 4 HPI elements
*Comment on chronic conditions	*Describe 4 “associated comorbidities”
	*Comment on the status of 3 or more “chronic or inactive problems”

HPI Elements

- Location
- Severity
- Duration
- Quality
- Timing
- Context
- Modifying Factors
- Associated Signs and Symptoms

Past, Family and Social History

- **Past Medical History**

Major illnesses

Surgeries

Current medications

Allergies

- **Family History**

Diseases related to identified problems in the HPI

Health status of first-degree relatives

Hereditary diseases

- **Social History**

Marital status

Current employment

Occupational history

Substance abuse history

Review of Systems

Constitutional

Eyes

Ears, Nose, Mouth, Throat

Respiratory

Cardiovascular

Gastrointestinal

Genitourinary

Musculoskeletal

Integumentary/Skin

Neurological

Psychiatric

Endocrine

Hematologic/Lymphatic

Allergic/Immunologic

Problem Focused History

Level	HPI	PFSH	ROS
PF	Brief	None	None
EPF	Brief	None	1
Detailed	Ext	1 of 3	2-9
Comp	Ext	3 of 3	10

- 1 to 3 HPI elements

HPI Elements	
Location	Timing
Severity	Context
Duration ●	Modifying Factors
Quality	Associated S & Sx

- Or status of 1 to 2 chronic problems
- No PFSH
- No ROS

CC: "I still hear the voices."

HPI: Patient reports constant command auditory hallucinations.

Expanded Problem Focused History

Level	HPI	PFSH	ROS
PF	Brief	None	None
EPF	Brief	None	1
Detailed	Ext	1 of 3	2-9
Comp	Ext	3 of 3	10

- 1 to 3 HPI elements

HPI Elements	
Location	Timing
Severity	Context
Duration ●	Modifying Factors
Quality ●	Associated S & Sx

- Or status of 1 to 2 chronic problems
- No PFSH
- Review of 1 system

CC: "I still hear the voices and now they are telling me to hurt myself"






HPI: Patient reports constant command auditory hallucinations which started to tell him to hurt himself

ROS: Psychiatric: (+) insomnia; (-) depressed mood, suicidal ideations

Detailed History

Level	HPI	PFSH	ROS
PF	Brief	None	None
EPF	Brief	None	1
Detailed	Ext	1 of 3	2-9
Comp	Ext	3 of 3	10

- at least 4 HPI elements

HPI Elements	
Location	Timing
Severity 	Context
Duration 	Modifying Factors 
Quality 	Associated S & Sx 

- Or status of 3 chronic problems ('97)
OR 4 associated comorbidities ('95)
- 1 of 3 components of PFSH
- Review of 2 to 9 systems

CC: "I still hear the voices and now they are telling me to hurt myself"

HPI: Patient reports constant command auditory hallucinations telling him to hurt himself, associated with poor sleep, more severe during the day, but relieved by intake of medications






PFSH: Patient reports using marijuana daily

ROS: Constitutional: no weight gain, feels physically well
Psychiatric: (+) insomnia; (-) depressed mood, suicidal ideations

Comprehensive History

Level	HPI	PFSH	ROS
PF	Brief	None	None
EPF	Brief	None	1
Detailed	Ext	1 of 3	2-9
Comp	Ext	3 of 3	10

- at least 4 HPI elements

HPI Elements	
Location	Timing
Severity 	Context
Duration 	Modifying Factors 
Quality 	Associated S & Sx 

- Or status of 3 chronic problems ('97)
OR 4 associated comorbidities ('95)
- All 3 components of PFSH
- Review of 10 systems

CC: "I still hear the voices and now they are telling me to hurt myself"

HPI: Patient reports constant command auditory hallucinations telling him to hurt himself, associated with poor sleep, more severe during the day, but relieved by intake of medications

PFSH: Patient currently takes Clozapine 100mg BID. Patient's uncle also suffers from Schizophrenia. Patient reports using marijuana daily

ROS: Constitutional: no weight gain, feels physically well
Psychiatric: (+) insomnia; (-) depressed mood, suicidal ideations
All other systems reviewed and are negative

Examination

1995 Physical Examination

7 Body Areas

- Head, including face
- Neck
- Chest, including breast and axilla
- Abdomen
- Genitalia, groin, buttocks
- Back, including spine
- Extremities

12 Organ Systems

- Constitutional
- Eyes
- ENMT
- Cardiovascular
- Respiratory
- Gastrointestinal
- Genitourinary
- Musculoskeletal
- Skin
- Neurologic
- Psychiatric

1997 Physical Examination

14 Organ Systems

- Constitutional
- Eyes
- ENMT
- Neck
- Respiratory
- Cardiovascular
- Chest, including breasts
- Gastrointestinal
- Genitourinary
- Lymphatic
- Musculoskeletal
- Skin
- Neurologic
- Psychiatric

Examination for Psychiatry

Level	Exam Bullets
Problem Focused	1 to 5 bullets
Expanded Problem Focused	6 to 8 bullets
Detailed	At least 9 bullets
Comprehensive	At least 1 bullet from the unshaded box AND every bullet in each of the shaded box

Level	Exam Bullets
Comprehensive	At least 1 bullet from the unshaded box AND every bullet in each of the shaded box
System or Body Area	Elements
Musculoskeletal	<ul style="list-style-type: none"> • Muscle strength and tone; any atrophy or abnormal movements • Examination of gait and station
Constitutional	<ul style="list-style-type: none"> • Any 3 of the following VS: 1) sitting or standing BP, 2) supine BP, 3) PR and rhythm, 4) RR, 5) temp, 6) Ht, 7) Wt • General appearance
Psychiatric	<ul style="list-style-type: none"> • Speech – rate, volume, articulation, coherence, and spontaneity • Thought Process – rate of thoughts, content, abstract reasoning, computation • Associations (loose, tangential, circumstantial, intact) • Abnormal psychotic thoughts – hallucinations, delusions, preoccupation with violence, homicidal or suicidal ideation, obsessions • Judgment and Insight <p>Complete Mental Status Examination:</p> <ul style="list-style-type: none"> • Orientation to time, place and person • Recent and remote memory • Attention span and concentration • Language • Fund of Knowledge • Mood and Affect

Problem Focused Exam

Level	Exam Bullets		
PF	1 to 5 bullets	Musculoskeletal: strength and tone OR gait and station	
EPF	6 to 8 bullets	Constitutional:	
Detailed	At least 9 bullets	<ul style="list-style-type: none"> Any 3 of ff - supine BP, sit/stand BP, PR, RR, T, Wt, Ht General appearance 	
Comp	1 bullet from unshaded box AND each bullet in the shaded box	Psychiatric <ul style="list-style-type: none"> Speech Thought Process Associations Abnormal psychotic thoughts ● Judgment and Insight 	Mental Status Exam: <ul style="list-style-type: none"> Orient to time, place, person Recent and remote memory Attention span and concen. Language Fund of Knowledge Mood and Affect

Psychiatric

- (+) command auditory hallucinations to hurt self, (-) suicidal ideations

Expanded Problem Focused Exam

Level	Exam Bullets		
PF	1 to 5 bullets	Musculoskeletal: strength and tone OR gait and station	
EPF	6 to 8 bullets	Constitutional:	
Detailed	At least 9 bullets	<ul style="list-style-type: none"> • Any 3 of ff - supine BP, sit/stand BP, PR, RR, T, Wt, Ht • General appearance 	
Comp	1 bullet from unshaded box AND each bullet in the shaded box	Psychiatric <ul style="list-style-type: none"> • Speech • Thought Process ● • Associations ● • Abnormal psychotic thoughts ● • Judgment and Insight ● 	Mental Status Exam: <ul style="list-style-type: none"> • Orient to time, place, person ● • Recent and remote memory • Attention span and concen. • Language • Fund of Knowledge • Mood and Affect ●

Psychiatric

- mild racing thoughts, illogical at times
- no looseness of associations
- (+) command auditory hallucinations to hurt self, (-) suicidal ideations
- insight and judgment both fair
- oriented to time, place and person
- depressed mood, constricted affect

Detailed Exam

Level	Exam Bullets
PF	1 to 5 bullets
EPF	6 to 8 bullets
Detailed	At least 9 bullets
Comp	1 bullet from unshaded box AND each bullet in the shaded box

Musculoskeletal: strength and tone OR gait and station

Constitutional:

- Any 3 of ff - supine BP, sit/stand BP, PR, RR, T, Wt, Ht
- General appearance

Psychiatric

- Speech
- Thought Process
- Associations
- Abnormal psychotic thoughts
- Judgment and Insight

Mental Status Exam:

- Orient to time, place, person
- Recent and remote memory
- Attention span and concen.
- Language
- Fund of Knowledge
- Mood and Affect

Psychiatric

- mild racing thoughts, illogical at times
- normal prosody
- no looseness of associations
- (+) command auditory hallucinations to hurt self, (-) suicidal ideations
- insight and judgment both fair
- oriented to time, place and person
- intact recent and remote memory
- intact attention span and concentration
- depressed mood, constricted affect

Comprehensive Exam

Level	Exam Bullets
Comp	1 bullet from unshaded box AND each bullet in the shaded box

Musculoskeletal: strength and tone OR gait and station

Constitutional:

- Any 3 of ff - supine BP, sit/stand BP, PR, RR, T, Wt, Ht
- General appearance

Psychiatric

- Speech
- Thought Process
- Associations
- Abnormal psychotic thoughts
- Judgment and Insight

Mental Status Exam:

- Orient to time, place, person
- Recent and remote memory
- Attention span and concen.
- Language
- Fund of Knowledge
- Mood and Affect

Musculoskeletal: normal gait

Constitutional: PR-95, RR-16, Sitting BP-110/80, no gross abnormalities in appearance

Psychiatric

- mild racing thoughts, illogical at times
- normal prosody
- no looseness of associations
- (+) command auditory hallucinations to hurt self, (-) suicidal ideations
- insight and judgment both fair

MSE

- oriented to time, place and person
- intact recent and remote memory
- intact attention span and concentration
- no deficiencies in language
- good fund of knowledge
- depressed mood, constricted affect

Medical Decision-Making

Medical Decision-Making

- No difference between the 1995 and 1997 guidelines
- Most important of the key factors
- Reflects the cognitive work done by the physician
- Dimensions to quantify MDM:
 - Nature and number of problems
 - Extent of data reviewed
 - Medical risk

Levels of MDM

- Straightforward
- Low Complexity
- Moderate Complexity
- High Complexity

Quantifying the MDM

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

Note: Only 2 out of 3 are needed to qualify for a given level

MDM Point System

MDM	Problem Points	Data Points	Risk
Straightforward	≤ 1	≤ 1	Minimal
Low Complexity	2	2	Low
Moderate Complexity	3	3	Moderate
High Complexity	≥ 4	≥ 4	High

Note: Only 2 out of 3 are needed to qualify for a given level

Problem Points

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

Note:

- “New or old” will be relative to the examiner, not the patient
- Points are additive within the encounter

Data Review Points

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

Note: Points are additive within the encounter

Risk of Complications

Level of Risk	Presenting Problem(s)	Diagnostic Procedure(s) Ordered	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 test requiring venipuncture Chest x-rays EKG/EEG Urinalysis Ultrasound, e.g. echo KOH prep 	<ul style="list-style-type: none"> Rest Gargle 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 hypertension or non-insulin dependent diabetes, cataract or BPH Acute, uncomplicated illness or injury, e.g. cystitis, allergic rhinitis, simple sprain 	<ul style="list-style-type: none"> Physiologic tests not under stress, e.g. pulmonary function tests Non-cardiovascular imaging studies with contrast, e.g. barium enema Superficial needle biopsies Clinical laboratory tests requiring arterial punctures 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 additive
Moderate	<ul style="list-style-type: none"> One or more chronic illnesses 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, pneumonitis, 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 biopsy Cardiovascular imaging studies with contrast and no identified risk factors, e.g. arteriogram, cardiac cath Obtain fluid from body cavity, e.g. lumbar puncture, thoracentesis, culdocentesis 	<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 illnesses with severe exacerbation, progression, or side effects of treatment Acute or chronic illnesses or injuries that may pose a threat to life or bodily function, e.g. multiple trauma, acute MI, pulmonary embolus, severe respiratory distress, progressive severe rheumatoid arthritis, psychiatric illness with potential threat to self or others, peritonitis, acute renal injury An abrupt change in neurological status, e.g. seizure, TIA, weakness or sensory loss 	<ul style="list-style-type: none"> Cardiovascular imaging studies with contrast with identified risk factors Cardiac electrophysiological tests 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 or endoscopic) Parenteral controlled substances Drug therapy requiring intensive monitoring for toxicity Decision not to resuscitate or to de-escalate care because of poor prognosis

Straightforward MDM

Patient with chronic psychosis; to return in 3 days to assess safety

Final Result of Complexity

A	Number of Diagnosis or Treatment Options	≤ 1 Minimal	2 Limited	3 Multiple	≥ 4 Extensive
B	Highest Risk	Minimal	Low	Moderate	High
C	Amount and Complexity of Data	≤ 1 Minimal or Low	2 Limited	3 Multiple	≥ 4 Extensive
	Type of Decision-Making	Straightforward	Low Complexity	Moderate Complexity	High Complexity

Low Complexity MDM

Patient with worsening psychosis; discussed treatment history with previous psychiatrist; return to clinic in 3 days to assess safety

Final Result of Complexity

A	Number of Diagnosis or Treatment Options	≤ 1 Minimal	2 Limited	3 Multiple	≥ 4 Extensive
B	Highest Risk	Minimal	Low	Moderate	High
C	Amount and Complexity of Data	≤ 1 Minimal or Low	2 Limited	3 Multiple	≥ 4 Extensive
	Type of Decision-Making	Straightforward	Low Complexity	Moderate Complexity	High Complexity

Moderate Complexity MDM

Patient with worsening psychosis; discussed treatment history with previous psychiatrist; order Clozapine levels and adjust dosage as needed; return to clinic in 3 days to assess safety

Final Result of Complexity

A	Number of Diagnosis or Treatment Options	≤ 1 Minimal	2 Limited	3 Multiple	≥ 4 Extensive
B	Highest Risk	Minimal	Low	Moderate	High
C	Amount and Complexity of Data	≤ 1 Minimal or Low	2 Limited	3 Multiple	≥ 4 Extensive
	Type of Decision-Making	Straightforward	Low Complexity	Moderate Complexity	High Complexity

High Complexity MDM

Patient with worsening psychosis; discussed treatment history with previous psychiatrist; old records requested for review; order Clozapine levels and adjust dosage as needed; could potentially need hospitalization; return to clinic in 3 days to assess safety

Final Result of Complexity

A	Number of Diagnosis or Treatment Options	≤ 1 Minimal	2 Limited	3 Multiple	≥ 4 Extensive
B	Highest Risk	Minimal	Low	Moderate	High
C	Amount and Complexity of Data	≤ 1 Minimal or Low	2 Limited	3 Multiple	≥ 4 Extensive
	Type of Decision-Making	Straightforward	Low Complexity	Moderate Complexity	High Complexity

Time

If the physician documents total time and suggests that counseling or coordinating care dominates (more than 50%) the encounter, time may determine level of service. Documentation may refer to: prognosis, differential diagnosis, risks, benefits of treatment, instructions, compliance, risk reduction or discussion with another health care provider.

Does documentation reveal total time? Time: Face-to-face in outpatient setting or unit/floor in inpatient setting	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does documentation describe the content of counseling or coordinating care?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does documentation reveal that more than half of the time was counseling or coordinating care?	<input type="checkbox"/> Yes <input type="checkbox"/> No

If all answers are “yes”, select level based on time.

Level of Service

Outpatient, Consultations (Outpatient & Inpatient) and ER

	New Office / Consults / ER Requires 3 components within shaded area				
History	PF ER:PF	EPF ER:EPF	D ER:EPF	C ER:D	C ER:C
Examination	PF ER:PF	EPF ER:EPF	D ER:EPF	C ER:D	C ER:C
MDM	SF ER:SF	SF ER:L	L ER:M	M ER:M	H ER:H
Average Time (minutes) ER has no average time	10 New (99201) 15 Outpt cons (99241) 20 Inpt cons (99251) ER (99281)	20 New (99202) 30 Outpt cons (99242) 40 Inpt cons (99252) ER (99282)	30 New (99203) 40 Outpt cons (99243) 55 Inpt cons (99253) ER (99283)	45 New (99204) 60 Outpt cons (99244) 80 Inpt cons (99254) ER (99284)	60 New (99205) 80 Outpt cons (99245) 110 Inpt cons (99255) ER (99285)
Level	I	II	III	IV	V

Level of Service

Outpatient, Consultations (Outpatient & Inpatient) and ER

		Established Office			
		Requires 2 components within shaded area			
History	Minimal problem that may not require presence of any physician	PF	EPF	D	C
Examination		PF	EPF	D	C
MDM		SF	L	M	H
Average Time (minutes) ER has no average time	5 (99211)	10 (99212)	15 (99213)	25 (99214)	40 (99215)
Level	I	II	III	IV	V

Level of Service

Hospital Care

	Initial Hospital/Observation Requires 3 components within shaded area			Subsequent Hospital Requires 2 components within shaded area		
History	D/C	C	C	PF Interval	EPF Interval	D Interval
Examination	D/C	C	C	PF	EPF	D
MDM	SF/L	M	H	SF/L	M	H
Average Time (minutes) Observation has no average time	30 Init hosp (99221) Observ care (99218)	50 Init hosp (99222) Observ care (99219)	70 Init hosp (99223) Observ care (99220)	15 Subsequent (99231)	25 Subsequent (99232)	35 Subsequent (99233)
Level	I	II	III	I	II	III

Level of Service

Nursing Facility Care

	Initial Nursing Facility Requires 3 components within shaded area			Subsequent Nursing Facility Requires 2 components within shaded area			
History	D/C	C	C	PF Interval	EPF Interval	D Interval	C Interval
Examination	D/C	C	C	PF	EPF	D	C
MDM	SF/L	M	H	SF	L	M	H
	99304	99305	99306	99307	99308	99309	99310
Level	I	II	III	I	II	III	IV

Level of Service

Nursing Facility Care

	Other Nursing Facility (Annual Assessment) <small>Requires 3 components within shaded area</small>
History	D Interval
Examination	D
MDM	L/M
	99318
Level	

Level of Service

Domiciliary, Rest Home (e.g. Boarding Home), or Custodial Care Services and Home Care

	Requires 3 components within shaded area					Requires 2 components within shaded area			
History	PF	EPF	D	C	C	PF Interval	EPF Interval	D Interval	C Interval
Examination	PF	EPF	D	C	C	PF	EPF	D	C
MDM	SF	L	M	M	H	SF	L	M	M/H
Average Time (minutes)	20	30	45	60	75	15	25	40	60
ER has no average time	Domiciliary (99324) Home care (99341)	Domiciliary (99325) Home care (99342)	Domiciliary (99326) Home care (99343)	Domiciliary (99327) Home care (99344)	Domiciliary (99328) Home care (99345)	Domiciliary (99334) Home care (99347)	Domiciliary (99335) Home care (99348)	Domiciliary (99336) Home care (99349)	Domiciliary (99337) Home care (99350)
Level	I	II	III	IV	V	I	II	III	IV

Thank you very much