2021 E/M Coding Changes

- Code based **on either** total time **or** medical decision making. (Millette, K. W. (2020) Countdown to the E/M Coding Changes. *FPM*. www.aafp.org/fpm.

Visit level	Total time	Medical decision making	Example
Level 2	<20 minutes (<30 minutes for new patients)	No medication prescribed	viral URI, or simple recheck for stable problem
Level 3	20-29 minutes (30-44 minutes for new patients)	One acute problem PLUS medication prescribed OR one test ordered and reviewed	strep screen, UTI w/ Urinalysis
Level 4	30-39 minutes (45-59 minutes for new patients)	**At least one of the following:** • One unstable chronic illness • Two stable chronic illnesses addressed • Acute complicated injury (e.g., concussion, fracture), • Acute illness with systemic symptoms (e.g., pyelonephritis or pneumonia), • New problem with uncertain prognosis (e.g., breast lump). **PLUS at least one of the following:** A. Prescription drug management, B. X-ray or ECG that is ordered and interpreted C. Total of three unique tests ordered or reviewed, external notes reviewed, or independent historians used (requires three "points" where each instance equals one point — e.g., three unique tests ordered or reviewed equals three points), D. Patient's management or test discussed with external provider, E. Patient's diagnosis and treatment limited by lack of money, food, or housing. **OR:** Prescription drug management plus at least one of the following: B, C, or D above.	Unstable=includes BP or A1C not to goal Chronic illness: HTN, DM, CKD
Level 5	40-54 minutes (60-74 minutes for new patients)	Severe acute illness or worsening chronic illness posing a threat to life or bodily function (e.g., myocardial infarction, pulmonary embolism, acute renal failure, severe respiratory distress, acute neurological change) **PLUS at least one of the following:** • Two of three from B, C, or D above, • Patient admitted by someone other than yourself, • Patient placed on warfarin, • Patient made DNR, care de-escalated.	

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Time in Minutes when billing on Time

TIMELINE							
NEW	1-14	15-29	30-44	45-59	60-74	75-89	90-104
	Do not use time (99202 by MDM)	99202	99203	99204	99205	99205+ 99XXX	99205+ 2 units 99XXX
ESTABLISHED	1-9	10-19	20-29	30-39	40-54	55-69	70-84
	Do not use time (99212 by MDM)	99212	99213	99214	99215	99215+ 99XXX	99215+ 2 units 99XXX

MACROS to use in A/P Section:

.2021_Time	To guide billing based on time.
.2021_MDM	To guide billing based on medical decision making.
.Enhanced_Integrated_Time	Required macro to enter the time when billing by time.
.Enhanced_Provider_Time	Required macro to enter the time when billing by time.

Primary Care Add-On Code: G2211 Visit complexity inherent to evaluation and management associated with medical care services that serve as the continuing focal point for all needed health care services and/or with medical care services that are part of ongoing care related to a patient's single, serious condition or a complex condition. (Add-on code, list separately in addition to office/outpatient evaluation and management visit, new or established).

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from the AMA(2020)		Elements of MDM: Coding based on 2 out of 3 of these elements			
Established/New	**MDM**	**# of Problems Addressed**	**Amount/ Complexity of Data Reviewed**	**Risk Level**	**Examples**
Level 2: 99212/99202	Straightforward	1 self-limited, minor problem	Minimal/None	Minimal	
Level 3: 99213/99203	Low	2 or more self-limited problems -or- 1 stable chronic illness -or- 1 acute, uncomplicated illness or injury	Limited (1 of 2 categories required) **Category 1: Test/Documents/Historians (need 2)** -reviewing prior external notes -reviewing results, each unique test -ordering of a unique test **Category 2:** -assessment requiring a historian that is independent	Low Risk from testing/ treatment	URI
Level 4: 99214/99204	Moderate	1 or more chronic illness (w/ exacerbation/progression/ side effects of treatment) -or- 2 or more stable chronic illnesses -or- 1 undiagnosed new problems/ uncertain prognosis -or- 1 acute illness w/ systemic symptoms -or- 1 acute complicated injury	Moderate (1 out of 3 categories required) **Category 1: Test/Documents/Historians (need 3)** -reviewing prior external notes -reviewing results, each unique test -ordering of a unique test -assessment requiring a historian that is independent **Category 2: Independent Interpretation** -independent review of a test performed by another healthcare professional, not reported separately **Category 3: External Discussions** -Consultation/ discussion with external health care provider on management or test interpretation	Moderate Risk from additional testing/ treatment	Medication management, minor or elective surgery discussions, social determinants of health limit diagnosis & treatment
Level 5: 99215/99205	High	1 acute or chronic illness or injury that threatens life or bodily function	Extensive (2 out of 3 categories required) **Category 1: Test/Documents/Historians (need 3)** -reviewing prior external notes -reviewing results, each unique test -ordering of a unique test -assessment requiring a historian that is independent **Category 2: Independent Interpretation** -independent review of a test performed by another healthcare professional, not reported separately **Category 3: External Discussions** -Consultation/ discussion with external health care provider on management or test interpretation	High Risk from additional testing/ treatment	Decision to hospitalize, start Warfarin therapy, decision for elective major or emergent surgery, DNR discussion

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CODE New/Established	TOTAL TIME New/Established	MDM: medically appropriate H&P plus:
~~99201~~/99211	n/a	-
99202/99212	15-29 mins/ 10-19 mins	Straightforward
99203/99213	30-44 mins/ 20-29 mins	Low Level
99204/99214	45-59 mins/ 30-39 mins	Mod Level
99205/99215	60-74 mins/ 40-54 mins	High Level