

BRIEF OVERVIEW OF E/M UPDATES EFFECTIVE JANUARY 1, 2021

99201 has been deleted as it is too similar to 99202.

Selecting the proper level of the visit is no longer a combination of medical decision making (MDM) and time. You may now choose the visit level based on MDM **OR** *Total Time*.

Total Time is defined as the total amount of time spent working on a patient's visit for a single date of service, this includes face-to-face time as well as non-face-to-face time.

Non-face-to-face time-activities:

- Preparing to see the patient
- Obtaining and/or reviewing separately obtained history
- Performing a medically appropriate examination
- Counseling and educating the patient/family/caregiver
- Ordering medications, test, or procedures
- Referring and communicating with other health care professional (when not separately reported)
- Documenting clinical information in the electronic or other health record
- Independently interpreting results (not separately reported) and communicating results to the patient/family/caregiver
- Care coordination (not separately reported)

Procedure Code	Medical Decision Making	Time
99202	Straight Forward	15-29min
99203	Low	30-44min
99204	Moderate	45-59min
99205	High	60-74min
99211	N/A	N/A
99212	Straight Forward	10-19min
99213	Low	20-29min
99214	Moderate	30-39min
99215	High	40-54min

Report prolonged service code, 99417, with new consult (99205) when visits last at least 75min+ use and with an established visit (99215) of at least 55min+. This code may be reported for EACH ADDITIONAL 15min.