cpt 2015

Evaluation & Management

The following codes, medium descriptors, and abbreviated guidelines are a subset of the AMA's Current Procedural Terminology (CPT') code set. For unabbreviated code descriptors and complete guidelines, please refer to the CFT 2014 codebook or data file.

EVALUATION AND MANAGEMENT (E/M)

Evaluation and Management (E/M) Services Guidelines The \$.00 section is divided into broad categories such as office. shifts, hospital visits, and consultations. Most of the categories are further divided into two or more subcategories of E/NI services. For example, there are two subcategories of effice visits (new patient. and established outlined) and there are two subsationaries of bountal staits (initial and subsequent). The subcategories of E/M services are further distalled into levels of \$750 services that are identified by specific codes. This classification is important because the nature of work varies by type of sension, place of sension, and the patient's

Solely for the purposes of distinguishing between new and extablished patients, professional services are those face to face sensions are dened by physicians, and other qualified health care professionals who may report evaluation and management services. reported by a specific CPT code(s). A new putient is one who has not seasized any professional seniors from the physician/qualified. health care professional or another physician/qualified health care: professional of the exact same specialty and subspecialty who belongs to the same group practice, within the past three years.

An established patient is one who has received professional services from the physician levalified health care professional or physician/qualified health care professional of the ell cialty and subspecialty who belongs to the within the past three years.

in one call for or in the reach same

as perceivers, fines, therapittall or than over physician or other qualified broith care's ofessional on the same day. When concurrest care is provided, no special reporting is required. Stander of care is the process whereby a physician or other qualified health. care professional who is providing management for some or all of a patient's problems relinquishes this sesponsibility to another physician or other qualified health care professional who melicitly agrees. to accept this responsibility and who, from the initial encounter, is not providing consultative services. The physician or other qualifind bealth-care professional transferring care is then no larger providing care for these problems though be or she may continue providing care for other conditions when appropriate. Consultation codes should not be reported by the physician or other qualified. health care professional who has agreed to accept transfer of care before an initial evaluation but are appropriate to report if the desision to accept transfer of care cannot be made until after the initial consultation evaluation, regardless of site of service.

Office or Other Outputient Services

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99390	Office outputient new 20	minutes.
99,393	Office outputient new 30	animates.
99394	Office outgutient new 45	manager of the last

DESCRIPTION OF	Office-outputsent new or minutes
994710	Office outputtent visit 5 minutes.
99312	Office outgations visit 10 minutes.
99213	Office outputient violt 15 minutes
993194	Office outputient visit 25 minutes.
99215	Office-outputient visit 40 minutes.
Office or Disk	er dutactivet Genultotians

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99040	Office-consultation ment/estab patient (to min
99040	Office consultation new lestab patient 40 min
990394	Office consultation new lestab patient 60 min
9903485	Office consultation new/estab patient 80 min

Probanged Services

Profesqual Service With Direct Patient Contact

P99934	Proling sect offices of p-dir contract 1 2004	
M99935	Prolog sucjettice is in directed to the contract.	ı
M990356	Protonged service i/p regions second a for se-	8

quive additional work to perform on unionted E.M. service, then the sputrient code 99/201-99/21/5 should also be differ 25 should be added to the Office/Outputient to indicate that a significant, separately identifiable evaluation. and management service was provided on the same day as the preventive medicine sonice. The appropriate preventive medicine service is additionally reported.

99088	Initial preventive medicine new patient «Tyear
99383	Initial precentive medicine new pt. age 1-4 yrs
99040	Initial preventive medicine new pt. age 5-18 pm
99384	Initial preventive medicine new pt age 12-17 yr.
99385	Initial preventive medicine new pt upe 18-19yrs.

99086	Initial preventive medicine new patient 40-64yrs
9990007	Initial preventive medicine new publicat 65yrs&>
99099	Periodic preventive med established potient < by
59090	Residic preventive med-est patient 1-4ym
59030	Periodic powertise med est patient 5-17pm.
99004	Periodic powerative med est pictions 12-17yrs
59035	Periodic preventive med-est patient 1th 30 yrs
99096	Periodic preventive med est partient 40-64yrs
SECURE OF T	Manipully record to a most set explicant dilated address

9948401	Physics	el como exaction 5-10 min de la mere evaluation 11-20 min ply religibore evaluation 21-20 min
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THE RES	16.10	glig velophone evaluation 21-30 min

Commence of the Person of the	the state of the s
	Interprof phone Internet assess/manage 5-10
40 (20 4 407)	Interpret phone internet assess/manage 10-20
40 (99)4488	Interpret phonoclinterset access/manage 21-30
ARREST CONTRACTOR	the second of th

Complex Chronic Care Coordination Services

GOLD T Compile change care coordinate pt yet but for per me-99-180 Compile chase care coord w/ pt vot for he per no-4-22-68 Complix chape case coord-ou add! 10-min per month (Report 99489 in conjunction with 99487, 99488)

(Bo not report 99487-99489 during the same month with 90951-90970, 98900-98962, 98966-98968, 99071, 99070, 90080, 99090. 99091, 19539, 99340, 99358, 19539, 99362, 59364, 59366-19368, 99374-99380, 99440-99484, 99495, 99494, 99405-99407]

Transitional Care Management Services

Specificant care manage and 14 day discharge framitional care manage and I day discharge SPORTS. (Do not report 90951-90970, 98960-98962, 98966-98969, 95071,

Table 1. Complexity of Medical Decision Making.

Number of Diagnoses or Management Options	Rescuet and/or Complexity of Data to Be Reviewed	Rick of Complications, and or Mortadity or Mortality	Type of Decision Making
minimal	manimal or cone	minimal	straightforward
lumbed .	Instel	Nove	law complexity
multiple	moderate	moderate	moderate complexity
cidimichie	me fermiline	high	high complexity



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