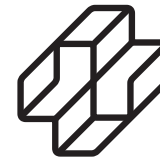


Revenue Cycle Strategist



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Coding Q&A

By Jennifer Swindle, RHIT, CCS-P

Q: For a variety of reasons, including the need for extended counseling and difficulty communicating with patients who are confused or have hearing, speech, or language problems, our physicians often spend much more time with patients than anticipated under the primary hospital inpatient evaluation and management (E&M) codes. When and how may organizations bill Medicare for this extra physician time?

A: For inpatient E&M services extending at least 30 minutes beyond the service time specified in the primary E&M code, you may be entitled to bill a prolonged service code in addition to the primary code. When a service extends 30 minutes beyond the time allotted in an E&M code, you

may bill 99356, the prolonged service code covering the first hour beyond the usual service. For services extending at least 15 minutes beyond the first additional hour, or a total of 75 minutes beyond the primary code, you may also bill 99357, the prolonged service code for each additional 30 minutes beyond the first additional hour.

For example, if an initial inpatient visit of moderate complexity requires 90 minutes of face-to-face time with the patient, you would bill 99222 for the visit, which covers 50 minutes, and 99356 to cover the additional 40 minutes spent. If the service were to last more than 125 minutes, you would also be allowed to add 99357 for the additional time beyond the first additional hour.

Note, however, that Medicare rules for billing prolonged service codes are more restrictive than the CPT definitions of these codes. The CPT definition includes “unit/floor” time, but Medicare allows only face-to-face time with the patient to be counted. Time spent reviewing charts or coordinating care may not be counted, although all face-to-face patient time in a day may be included, even if it is not continuous. This is useful for inpatient situations in which the patient must be seen more than once in a day for medical reasons, but you are limited to billing one E&M service daily.

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Send your coding questions to Carole Bolster at cbolster@hfma.org.