

## **Dermatology Coding Alert**

## Reader Question: Count Prescriptions as Part of E/M

Question: My dermatologist heard that there's a code we can bill and be paid on just for the physician's writing of a prescription. Is there actually such a code, and if so, can we report it in addition to an E/M service or when a patient calls in and the physician simply writes a prescription out?

New Jersey Subscriber

Answer: There is no CPT® code that you should report when your physician writes a prescription for a patient. CPT® specifically includes writing prescriptions as part of an E/M service. Your office should just consider prescription writing as part of the cost of seeing patients.

Coding solution: If someone in your office, either the physician or a nurse, is seeing the patient, you should report the appropriate E/M code -- for example, an established patient code (99211-99215, Office or other outpatient visit for the evaluation and management of an established patient ...).

However, guidelines must be met to report 99211 (Office or other outpatient visit for the evaluation and management of an established patient, that may not require the presence of a physician), which means there must be a plan of care with medical necessity for the patient to be seen by the nurse. There must also be documentation to support the visit, and the supervising physician must be immediately available in the office suite.

Keep in mind that the service must be for a problem that has already been diagnosed by a physician who also documents a specific treatment plan. The practice of taking a patient's vitals, documenting them and giving them medications or a prescription does not support billing of a 99211 office visit. Additionally, any time an appropriate 99211 service is rendered (B/P check ordered by a physician), the physician must be physically present in the office at the time of service. The provider does not actually have to see the patient but must be immediately available to do so if needed.

Diagnosis option: There is a diagnosis code, V68.1 (Issue of repeat prescriptions), which might be appropriate for you to report. However, there would need to be medical necessity and a need for the patient to be re-assessed prior to giving a repeat prescription and reporting a 99211 office visit code.