

Dermatology Coding Alert

Reader Question: Distinguish Consultation, Transfer of Care

Question: We commonly see patients referred by another physician. Our dermatologist performs an office exam that frequently results in a later procedure. Should we code these as consultations or transfer of care? Do we need a written notice from the referring physician for consultations?

Texas Subscriber

Answer: Typically, the situations you describe involve a consultation, such as 99241 (Office consultation ...), not a transfer of care. You do not need to have anything in writing from the requesting physician to bill a consult. That said, you should abide by some protocols to ensure you're billing these cases correctly.

Document consult: Although you don't need a written request, you do need to document a consultation service. The documentation can come from the referring physician or the consultant. On your end, you can justify the referral by specifically stating in your note who referred the patient, and for what condition. For instance, the note might say "Dr. Smith referred Mrs. Jones for evaluation and possible treatment of shingles."

Report findings: Your dermatologist must send the written results of his consultative evaluation to the requesting physician. Make sure this is a timely report -- not weeks after surgery.

Transfer of care is different: When one physician is already treating the patient for a specific condition and transfers that care to a different physician, the situation is a transfer of care rather than a consultation. You won't often have this situation in a surgical practice. Typically, ongoing patient care reverts to the referring physician following surgery.