

Dermatology Coding Alert

Reader Question: Put Locum Tenens Rules to Work for You Using These Tips

Question: Our practice recently hired a locum tenens (LT) physician to fill in for a physician who is on maternity leave. I've never coded for an LT physician. Notes indicate that she recently performed a level-three E/M visit for an established patient. How do I code this scenario?

Montana Subscriber

Answer: You'll code for the substitute physician's services with Medicare ☐ or payers who follow Medicare's billing and coding guidelines ☐ under LT rules and regulations. On the claim, report 99213 (Office or other outpatient visit for the evaluation and management of an established patient, which requires at least 2 of these 3 key components: an expanded problem focused history; an expanded problem focused examination; medical decision making of low complexity) with modifier Q6 (Service furnished by a locum tenens physician) appended to 99213 to show that an LT provided the service. In fact, append Q6 whenever you code for a service that an LT physician provides.

In short: An LT physician must be substituting for another physician. In other words, you can't hire an LT as "extra help" if your practice experiences a temporary surge in business.

There are also three rules you must remember when you are billing for an LT physician:

Medicare ID billing number: Bill the LT's services with the ID number of the physician for whom he is subbing.

Example: Your practice hires an LT physician to fill in for Dr. X. The LT physician performs a level-two E/M service for an established patient. On the claim, you should report 99212 (Office or other outpatient visit for the evaluation and management of an established patient, which requires at least 2 of these 3 key components: a problem focused history; a problem focused examination; straightforward medical decision making...) for the LT's services under Dr. X's Medicare ID number.

Time limit: Medicare does place limits on the amount of time you can bill under LT rules. A locum tenens doctor can fill in for 60 continuous days starting with his first date of service.

Example: Dr. Y goes on maternity leave March 1, and you hire an LT physician to fill in for Dr. Y. The LT performs his first service for a patient on March 3.

In this example, the LT physician can bill under Dr. Y's Medicare ID until May 1; 60 days after the March 3 service.