

Internal Medicine Coding Alert

File Cleaner 99291 Claims by Keeping Up With Transmittals

CMS' latest missive excludes critical care and an ED E/M on same date

CMS has released a flurry of transmittals regarding critical care in the past months: 1473 on March 7, 1530 on June 6, 1545 on June 27 and now 1548, released July 9. The latest states that you cannot report critical care and an ED E/M by the same physician on the same date for the same patient.

We checked with an ED expert on this latest addition to the transmittal tangle; here's what he had to say about how it will affect your coding.

99291 Is the E/M Reporting Exception

The rub: Medicare makes an allowance for reporting critical care in association with other E/M services, but does not make an allowance for reporting 99291 (Critical care, evaluation and management of the critically ill or critically injured patient; first 30-74 minutes) with the 9928X ED service codes, states **Michael Granovsky, MD, CPC**, president of MRSI, an ED coding and billing company in Woburn, Mass.

According to transmittal 1548: "Contractor shall instruct physicians and qualified NPPs that hospital ED services are not payable for the same calendar date as critical care services when provided by the same physician to the same patient."

Also, from Section H on page 20 of Transmittal 1548:

"When critical care services are provided on a date where an inpatient hospital or office/outpatient evaluation and management service was furnished earlier on the same date at which time the patient did not require critical care, both the critical care and the previous evaluation and management service may be paid. Hospital emergency department services are not payable for the same calendar date as critical care services when provided by the same physician to the same patient."

Check out the transmittal yourself at <http://www.cms.hhs.gov/transmittals/downloads/R1548CP.pdf>.

You can also read the updated MLN Matters article at <http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM5993.pdf>.

ACEP Questions Critical Care Exclusion

"We have been offered no explanation as to why the ED is singled out for this special exclusion," states Granovsky. The American College of Emergency Physicians (ACEP) is making a formal inquiry, he notes.

Previously, Medicare would pay for critical care following an ED E/M service, but not for an ED E/M service following critical care. (CPT allows billing both without restriction as to the order delivered.)