

Internal Medicine Coding Alert

Reader Question: 2 Days of Critical Care Require 2 Codes

Question: The internist began to provide critical care at 11 p.m., and the service continued into the next calendar day. How should I report this?

New York Subscriber

Answer: The physician should bill for the consecutive time spent providing critical care services (99291-99292) on the same calendar day. If the physician began providing care at 11 p.m., you may report 99291 (Critical care, evaluation and management of the critically ill or critically injured patient; first 30-74 minutes) for that first day of service, as long as the documentation supports the code. And if the physician provided at least 30 minutes of critical care the second day, you can assign 99291 again.

Code 99291 covers 74 minutes of care. For each additional 30 minutes on the second day, use +99292 (... each additional 30 minutes [list separately in addition to code for primary service]). If the physician's time on the second day does not add up to at least 30 minutes, you should report the appropriate subsequent hospital care code (99231-99233).

-- Answers for You Be the Coder and Reader Questions were reviewed by **Kathy Pride, CPC, CCS-P,** a coding consultant for QuadraMed in Port St. Lucie, Fla.; and **Bruce Rappoport, MD, CPC**, a board-certified internist who works with physicians on compliance, documentation, coding and quality issues for RCH Healthcare Advisors LLC, a Fort Lauderdale, Fla.-based healthcare consulting company.