

Internal Medicine Coding Alert

Reader Question: Discharge After Nursing-Home Patients Death

Question: My physician wants to code a discharge summary when a patient dies in a nursing home. I do not feel this is the appropriate code range to choose from. If he went in to see the patient that day, I think it should be coded as a normal subsequent nursing-home service. I don't think that he would go there and actually discharge a dead patient.

Ohio Subscriber

Answer: To use one of the nursing-facility discharge codes in this situation, the physician must have pronounced the patient dead or actively participated in some way in the patient's care on the date of death (face-to-face service). If the visit meets that criteria, you can use code 99315 (Nursing facility discharge day management; 30 minutes or less) or 99316 (more than 30 minutes).

Principles of CPT Coding does not address a nursing-home death/discharge. However, it does discuss the topic as it applies to a hospital patient and states that you CAN use the hospital discharge code if a patient dies during the hospital stay: "The hospital discharge services codes may be used to report discharge services provided to patients who die during the hospital stay. The attending physician may still be performing the final examination of the patient (pronouncing the patient dead), discussing the hospital stay with family members or others, and preparing discharge records (such as the discharge summary for the hospital record)."

Because Principles of CPT Coding does not directly discuss this issue as it relates to nursing-home discharges, we can only assume that the same general rule applies in the nursing home. You should be able to charge one of the nursing-home discharge codes if the physician meets the same criteria required in the hospital, i.e., pronounces the patient, has discussions with family, prepares records.