

Internal Medicine Coding Alert

Reader Question: Do Not Bill 99051 as Stand-Alone Code

Question: I have three questions about using 99051:

1. Should we use 99051 in addition to the E/M code for that service (scheduled hours)?
2. What is the definition of "basic service"?
3. Would you provide references for using this code?

Oklahoma Subscriber

Answer: The answers to your first two questions are easy. The third is not.

1. Yes. You should always report 99051 (Service[s] provided in the office during regularly scheduled evening, weekend, or holiday office hours, in addition to basic service) in addition to an E/M service. Each of these codes is intended to be reported in addition to the service provided, as indicated in their descriptors.
2. Codes 99050-99060 are often referred to as adjunct services, meaning you should report the codes in addition to the basic- service. The basic service is the E/M service associated with the special service code. Because 99051 describes office services, you would assign 99051 in addition to the performed and documented E/M service, such as 99212-99215 (Office or other outpatient visit for the evaluation and management of an established patient ...).
3. Many insurers cite 99051's inclusion in the basic service as a "nonpayment" reason for the special service code. For instance, Blue Cross Blue Shield of North Carolina considers 99051 "incidental to evaluation and management services, surgical services, and laboratory services, and separate reimbursement is not allowed." Several Medicaid policies have similar rules, and Medicare does not reimburse the code.