

Internal Medicine Coding Alert

Reader Question: Family Conferences

Question: A patients family member came to our office for a conference with the doctor. The doctor spent 30 minutes discussing medication, diet, activity, sitting arrangements, and setting a follow-up appointment. The doctor also wrote new prescriptions. Could you please advise us on the correct procedure code for this family conference?

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Answer: The most appropriate way to report this service would be to use the CPT E/M codes for prolonged physician service without direct (face-to-face) contact (99358, first hour and 99359 each additional 30 minutes), says Palmerton.

Many coders consider these codes only applicable to services performed on the same day as another E/M involving direct care and evaluation of the patient, but Palmerton says this is not necessarily the case.

The CPT definition says, prolonged evaluation and management service before and/or after direct (face to face) patient care (e.g., review of extensive records and tests, communication with other professionals and/or the patient or patients family.), she says.

CPT instructions state that these codes are add-on codes and can only be applied to time spent on patient care after it exceeds time normally spent on a visit at a particular E/M level. "Prolonged service of less than 15 minutes beyond the first hour or less than 15 minutes beyond the final 30 minutes is not reported separately (from the initial E/M level), CPT states.

Many carriers may not pay for any services provided that do not directly involve the patient, Palmerton admits.

However, if the physician spent a significant amount of time on this and it had a direct impact on patient care, then he or she should be reimbursed for it, Palmerton adds. In this case, it may have been that the patient was unable to understand the doctors orders and the conference with the family member had a direct impact on the patients ability to receive care.

She recommends submitting supporting documentation with such a claim. There should probably be a letter explaining the situation to go along with the claim, she adds.