

Internal Medicine Coding Alert

Reader Question ~ 'Per Day' Refers to Calendar Days

Question: An elderly patient of ours fell off of a ladder and presented with leg pain for an E/M visit at 5 p.m. on Tuesday. The physician billed 99213 for that date. On Wednesday at 10 a.m., the patient returned to the same physician complaining of wrist pain from the same accident. The physician evaluated the problem and billed 99213. I know that I can only report one E/M "per day." Because both services were in the same 24-hour period, we considered combining the Wednesday visit into the Tuesday E/M and billing just one code. Is this accurate?

Florida Subscriber

Answer: CPT's descriptions refer to E/M services "per day," not per 24-hour period, so you can report separate codes for your physician's services.

The day starts at midnight and ends at 11:59:59 p.m. Even though you are only allowed one inpatient E/M per day, keep in mind that if you perform an initial hospital visit for a patient at 10 p.m. and submit hospital admission code 99222, it is completely appropriate to see the same patient at 7:30 a.m. the next "day" and submit 99232 for subsequent hospital care.

The same coding principles apply to outpatient services, allowing you to bill separate services on different dates, assuming that the physician's documentation meets CPT criteria to report the E/M visits on both dates.