

Internal Medicine Coding Alert

Reader Question: Report 99354 for Bee-Sting Complications

Question: A patient presented to our office with complications from a bee sting. Our internist administered the appropriate medications for the reaction and stayed with the patient for two hours until he was stable. How should I code for this office visit? Can I report the medications separately?

Alabama Subscriber

Answer: For your physician's administering the medication, you could report an E/M code, such as 99213 (Office or other outpatient visit ... of an established patient). Also, you can bill a J code, such as J0170 (Epinephrine).

In addition, you could assign codes +99354 (Prolonged physician service in the office or other outpatient setting requiring direct [face-to-face] patient contact beyond the usual service [e.g., prolonged care and treatment of an acute asthmatic patient in an outpatient setting]; first hour [list separately in addition to code for office or other outpatient evaluation and management service]) and +99355 (... each additional 30 minutes [list separately in addition to code for prolonged physician service]).

But before using these codes, you should know how to calculate your time - which might be harder than you think. CPT assigns each office or other outpatient E/M code (99201-99215) a typical time for completing the service. For example, 99214 states, "Physicians typically spend 25 minutes face-to-face with the patient." When you use the prolonged service codes, you must subtract the stated E/M time (25 minutes) from the amount of time your physician treated the patient (two hours). For an additional 30 minutes (99355), you must add that time with the initial E/M code and subtract 55 minutes from the total time spent. Therefore, the physician could only bill for the additional hour, so you should report 99214 and 99354. You could not assign codes for the remaining five minutes.