

Internal Medicine Coding Alert

Reader Question: Reporting Time Spent with Family

Question: What is meant by the time spent counseling the patient and coordinating care? Does it include time spent discussing care arrangements with the patients family?

Arkansas Subscriber

Answer: In general, time spent discussing care arrangements with the patients family is considered time spent counseling and coordinating care. The CPT manual states, When counseling and/or coordination of care dominates (more than 50 percent) the physician-patient and/or family encounter (face-to-face time in the office or other outpatient setting or floor/unit time in the hospital or nursing facility), then time may be considered the key or controlling factor to qualify for a particular level of evaluation and management (E/M) service.

Many other sections of the CPT manual also emphasize that time spent counseling the patient can include time spent counseling the patients family. The CPT manual defines counseling as a discussion with a patient and/or a family concerning one or more of the following areas:

diagnostic results, impressions, and/or recommended diagnostic studies; prognosis;

risk and benefits of management (treatment) options; instructions for management (treatment) and/or followup; importance of compliance with chosen management (treatment) options; risk factor reduction; and patient and family education.

Discussions with family are also included in face-to-face time and floor/unit time. For office and outpatient E/M services, face-to-face time is only that time that the physician spends face-to-face time with the patient and/or family. When reporting inpatient hospital E/M services, floor/unit time includes Time in which the physician establishes and/or reviews the patients chart, examines the patient, writes notes and communicates with other professionals and the patients family.

Internists may want to record start and stop times for a visit if it is going to be billed based on the element of time spent counseling and coordinating care, according to **Catherine A. Brink, CMM, CPC,** president of Healthcare Resource Management Inc, a physician practice management consulting firm in Spring Lake, N.J. The internist should write 10:40 a.m. to 11:10 a.m. in the patients medical record and a brief synopsis of what was discussed with the patient, family or other providers, she says.