

Internal Medicine Coding Alert

Reader Questions: Check Payer's 99211 Supervision Rules

Question: Does CPT's note following 90772 mean that I may report 99211 for a physician-ordered Versed injection that a medical assistant administers to a private-pay patient when the internist is available by telephone?

Kansas Subscriber

Answer: CPT's parenthetical note following 90772 (Therapeutic, prophylactic or diagnostic injection [specify substance or drug]; subcutaneous or intramuscular) does direct you to assign 99211 (Office or other outpatient visit for the evaluation and management of an established patient ...) when staff perform a therapeutic, prophylactic or diagnostic injection without direct physician supervision. But the rule may conflict with the CMS incident-to requirements.

Remember, incident-to is a CMS concept. CPT does not contain any specific incident-to rules. The AMA did not consider the CMS incident-to rules that require direct supervision for 99211.

CPT's note contradicts Medicare guidelines. Medicare does require that a physician provide direct supervision, meaning the doctor must be on-site, to satisfy 99211 incident-to provisions. But for non-Medicare, the AMA is saying direct supervision is not necessary via the note following 90772, which states, "Do not report 90772 for injections given without direct physician supervision. To report, use 99211."

Some insurers may follow Medicare's lead and also require direct supervision for 99211. Others may have looser policies. When an insurer does not follow CMS' incident-to requirements, you may assign 99211 when staff perform an injection and the internist is not in the office. In these cases, you may consider coding per insurers' rules, rather than universally applying Medicare guidelines.

Strategy: For the above Versed injection scenario, check the insurer's physician-supervision requirements. If the private payer permits billing services provided without direct supervision, report 99211.

For insurers that require the physician be in the office to bill a service incident-to, you should not charge the administration. Regardless of injection service coding, report the Versed with J2250 (Injection, midazolam HCl, per 1 mg).