

Internal Medicine Coding Alert

READER QUESTIONS: Use Caution for ED Visit Code With 2 Docs

Question: Sometimes when my physician sees a patient in the emergency department, she dictates a consult or an H&P, but selects 99283. The emergency doctor also sees the patient. Which codes should I report in these situations?

New Mexico Subscriber

Answer: Codes 99281-99288 (Emergency department visit for the evaluation and management of a patient...) are payable only if the described services are provided. If your physician sees a patient who is registered in the emergency department, she may use these emergency department visit codes for services which match the code description. She does not need to be assigned to the emergency department.

If, however, your physician asks the patient to meet her in the emergency department as an alternative to the physician's office, and the patient isn't registered as a patient in the emergency department, your physician should bill an appropriate office/outpatient visit codes (99212-99215, Office or other outpatient visit for the evaluation and management of an established patient ...). If the ED physician asks your physician to evaluate a given patient, your physician should bill a consultation (99251-99255, Inpatient consultation for a new or established patient ...) (if the criteria for consultation are met). If the criteria are not met, and the patient is discharged from the emergency department or is admitted to the hospital by another physician, then your physician should bill an emergency department visit. If she admits the patient to the hospital and the criteria for a consultation aren't met, she should bill an initial hospital care code (99221-99223, Initial hospital care, per day, for the evaluation and management of a patient ...).

Note: Typically, a lower-level emergency department code is reported for a nonemergency condition.

Example: If Mr. Smith is admitted to the hospital by your physician, then she should bill only the appropriate level of the initial hospital care (99221-99223). All E/M services provided by her in conjunction with the admission are part of the initial hospital care (when performed on the same date as the admission). The ED physician who saw the patient in the emergency department will then bill the appropriate level of the ED codes.