

## **Internal Medicine Coding Alert**

## Reader Questions: Verify Payer Details Before Billing 99307

Question: How do I bill if our physician went to the nursing home to see Medicare patients for consultations, but did not meet all three requirements to charge a new patient visit. Would I use 99307?

New York Subscriber

Answer: The codes for nursing home consultations are 99304-99306 (Initial nursing facility care, per day, for the evaluation and management of a patient ...). However, these codes do require the three key components. Since you did not do the three components, you cannot bill these codes.

Under these circumstances most Medicare carriers require unlisted code 99499 (Unlisted evaluation and management service) and request to see all of your physician's documentation. Then, the carrier will reimburse as they see fit based on your documentation.

For commercial and private carriers you may be able to use 99307 (Subsequent nursing facility care per day, for the evaluation and management of a patient ...) as you suggested.