

Internal Medicine Coding Alert

READER QUESTIONS: Warning--Rest Home, NF Aren't the Same

Question: Should I use the same codes when an internist performs an E/M service on a rest home patient as I would if the patient were in a nursing facility?

Colorado Subscriber

Answer: No. Unlike nursing facilities (NFs), rest homes do not have a medical component. Therefore, CPT includes different series for E/M services performed on patients in each of these facilities.

When an internist treats a rest home patient, you should use domiciliary, rest home or custodial care service codes. For a new patient, report 99324-99328 (Domiciliary or rest home visit for the evaluation and management of a new patient ...). Report established patient visits with 99334-99337 (Domiciliary or rest home visit for the evaluation and management of an established patient ...).

You should report NF services with 99304-99318. Codes exist for initial (99304-99306, Initial nursing facility care, per day ...) and subsequent care (99307-99310, Subsequent nursing facility care, per day ...).

CPT also contains codes for discharge (99315-99316, Nursing facility discharge day management ...) and annual assessment services (99318, Evaluation and management of a patient involving an annual nursing facility assessment ...).

Remember also to use different place-of-service codes with 99324-99337 and 99304-99318. CPT classifies rest home, domiciliary and custodial care facilities as POS 33 (Custodial care facility). For claims involving NF care, use POS 32 (Nursing facility).