

Internal Medicine Coding Alert

You Be the Coder: Multiple Admissions Create Multiple Issues

Test your coding knowledge. Determine how you would code this situation before looking at the box below for the answer.

Question: As an internist in a hospital, I was consulted for medical coverage on a neurosurgical patient. Six days later, the patient was transferred to the rehabilitation unit, where the primary provider, the physiatrist, reconsulted me for medical coverage. Should I bill this as a new consult using 99254, or should I bill this as an ongoing consult because it is not the first time I have seen this patient?

The day after moving to the rehabilitation unit, the patient had complications and was transferred back to the neurosurgery unit under my service. Should I bill this as a first-time visit because this is a new admit (99223) or as a follow-up visit (99233) because this is not a true first-time visit?

Illinois Subscriber