

Part B Insider (Multispecialty) Coding Alert

PART B CODING QUIZ: Think You're 99211 Savvy? Take Our Quiz to Find Out

Hint: 99211 may not be just for nurses

Some practices report 99211 every day, but how much do you really know about when to report this code? Take the following short quiz to determine your current 99211 knowledge level.

Know Who Can Report 99211

Question 1: Which members of a practice's medical staff can report 99211 (Office or other outpatient visit that may not require the presence of a physician)?

Answer: Many coders don't realize that they can bill 99211 to report services that clinical staff other than the nurse provides, says **Heather Corcoran** with **CGH Billing**.

Any qualified -auxiliary personnel- who are the physician's employees (such as medical assistants, licensed practical nurses, technicians and other aides) and are working under the physician's direct supervision can provide services to patients under the incident-to umbrella using 99211 and can report 99211 as long as the patient visit meets the medical-necessity requirement for billing an E/M code.

Example: Your physician sees a patient for a blood pressure check but doesn't perform an in-depth E/M service. If the visit doesn't qualify for 99212, you can bill 99211.

Don't Assign 99211 as a Catchall

Question 2: Our nurse had to show a patient how to apply his splint three times (three days in a row). Can we bill 99211 for each visit?

Answer: Possibly. Suppose your physician applies a wrist splint and teaches the patient how to reapply it, but the patient forgets how to do it the next day after his shower. He returns to your office, and the nurse shows him how to apply the splint. The nurse can report 99211 for this service.

If the patient calls your practice the next day and says he'd like the nurse to reapply the splint once again, you probably can't report 99211 for that third visit.

-Remember that the service must be medically necessary,- says **Deneen Carlson** with **Pro Billing** in Trenton, N.J. -If the patient comes in every day after he showers and asks the nurse to resplint his arm, the service is probably not medically necessary.- The assumption is that the nurse taught the patient how to apply the wrist splint in the first place, Carlson says.

Red flag: If the patient calls and simply says that he tore the splint and needs a new one, you cannot report 99211 if the nurse simply hands the patient a new splint.