

Eli's Rehab Report

Reader Question: 99301-99303 Do Not Reflect Level of Service

Question: We recently began referring patients to nursing facilities, and we also provide E/M services to the patients once they are admitted. Can you tell us some things to remember when using the nursing facility services codes?

Arkansas Subscriber

Answer: The most common misconception about comprehensive nursing facility assessment codes (99301-99303) is that they're structured the same way as the outpatient E/M series (99201-99215), with each code reflecting an increasing level of service.

The key difference between these codes is a lack of category change based on new versus established patients. You should focus on what occurrence triggered the need for the visit. Ask yourself, did the patient require an annual assessment, a major permanent change of status, or admission/readmission?

The following nursing facility assessment code primer can help you select the right code every time:

1. Report 99301 (Evaluation and management of a new or established patient involving an annual nursing facility assessment which requires these three key components: a detailed interval history; a comprehensive examination; and medical decision-making that is straightforward or of low complexity) when the physiatrist performs the patient's annual evaluation.
2. Report 99302 (Evaluation and management of a new or established patient involving a nursing facility assessment which requires these three key components: a detailed interval history; a comprehensive examination; and medical decision-making of moderate to high complexity) when the patient "has developed a significant complication or a significant new problem and has had a major permanent change in status," according to CPT.
3. Report 99303 (Evaluation and management of a new or established patient involving a nursing facility assessment at the time of initial admission or readmission to the facility, which requires a comprehensive history and examination, and medical decision-making of moderate to high complexity) when the nursing facility first admits the patient and the physiatrist creates a medical plan of care.

Note: Also use 99303 when the physician readmits a patient to the nursing facility after the physician discharged the patient.