

Eli's Rehab Report

Reader Question: Inpatient Consult, Rehab Admit Same Day

Question: Your May issue had a reader question on billing for an inpatient hospital visit and an inpatient rehab admission on the same day, and you suggested that the time for the two visits should be added together and billed as one E/M code. However, we have been successful in billing and being paid for both services. The first would be a consultation, as we are not the "attending physician" in the hospital. We would bill 99254 as an inpatient consult and then bill 99222 for the admit in the inpatient rehab facility. Are we at risk by billing this way?

Montana Subscriber

Answer: You are correct, and should have no problem getting paid for such a bill.

The example in the reader question you referenced was an inpatient subsequent hospital visit (not a consult) and an inpatient rehab facility visit on the same day. This is a different scenario because your physiatrist is performing a true consult, whereas the prior example was a normal subsequent hospital visit. In that example, because the rehab facility is part of the hospital, the subsequent hospital visit in the acute-care hospital and the visit to the hospital rehab unit cannot be billed separately they would more likely be combined into one E/M code.

As we noted in the May issue, when two subsequent hospital visits are performed on the same day, CPT advises that the work from the first visit would be "carried over" to the second code and combined. However, in your case, if the physician is performing a true consultation (request for opinion, review of patient, report back to requesting physician), you should have no problem billing an inpatient consult and an inpatient rehab admission on the same day.