

Eli's Rehab Report

Reader Question: Preventive Visit

Question: Our lead physician handles all of the coding in our PM&R practice, and I send out the bills and process the claims. I believe he is improperly assigning preventive visit codes to visits that don't meet the criteria. For instance, his most recent chart read, "16-year-old, 110 lbs; 60 in.; UA neg; BP 110/78. Diet good; ROM excellent. Healthy patient." This was coded as preventive exam 99394, but I don't believe it meets CPT's criteria for this code. How should it be coded?

New Jersey Subscriber

Answer: It is possible that the physician's actual visit met the criteria of a 99394 (... adolescent [age 12 through 17 years]), but his documentation does not substantiate the code, so it cannot be billed.

The physician seems to have provided a very brief visit in which he checked vital signs, asked about the patient's diet, and checked range of motion. Since the visit does not contain any problems or diagnoses, and yet does not fit the criteria for billing a preventive code, your best bet is to bill the unlisted evaluation and management code (99499). Medicare may not reimburse for this, but it wouldn't have paid for the preventive visit either, so you aren't losing money; you are merely making your documentation and codes match the first rule of coding.