

Eli's Rehab Report

Reader Question: Report E/M for Oxygen Administration

Question: One of our patients suffered syncope and collapsed in the office. We administered oxygen, and the physiatrist provided one-on-one care until the paramedics arrived. How should we code for the oxygen administration?

Dallas Subscriber

Answer: CPT does not include any oxygen administration codes, but bundles the oxygen into your E/M service for the day. You should report the appropriate E/M code that describes the service that he or she performed.

Depending on your services, the patient's condition, and how long it took the paramedics to arrive, you will most likely bill an office visit code (99201-99215). You might be able to use a critical care code (99291-99292), but the described encounter does not sound as if it meets the criteria. To warrant a critical care E/M code, the patient must meet the definition of "critically ill or injured" as outlined by CPT guidelines, and the physician must spend at least 30 minutes face-to-face with the patient before the paramedics take over her care.

If your patient is simply dizzy and faints, she does not qualify as critically ill. But if she suffers a heart attack and faints, your carrier would most likely consider her critically ill.

Advice for You Be the Coder and Reader Questions was provided by **Laureen Jandroep, OTR, CPC, CCS-PCPC-H, CCS**, director and senior instructor for the CRN Institute, an online coding certification training center; and **Marvel J. Hammer, RN, CPC, CHCO**, owner of MJH Consulting, a physician reimbursement consulting firm in Denver.