

Eli's Rehab Report

READER QUESTIONS: Remember to Follow 3 R's for Consults

Question: When another physiatrist sees an established patient in the same practice for a completely different diagnosis, can that physician bill a consultation code? It has not been longer than 3 years since the patient was seen.

Alaska Subscriber

Answer: If another doctor referred the patient for a completely different diagnosis, you can report an initial consultation (99241-99245 or 99251-99255, because physiatrists can perform consults in either site of service depending on their subspecialty).

For a patient who is established in a practice, you can have a consultation by a different provider within his group for a different problem or diagnosis. A national coverage decision from Medicare states that a consultation request by one physician in a group and supplied by another member in the same group may be reimbursed, as long as all requirements for use of the CPT consultation codes are met.

When you report a consult, you must remember the three R's.

1. **Request** from an attending physician or other appropriate source
2. **Render** an opinion
3. **Report** findings by sending a written report to the requesting physician.

Note: Both CPT and CMS allow a consultant to initiate diagnostic and/or therapeutic services at the same or subsequent service and still consider it a consult. The issue is "transfer of care" or what was the intent of the requester - request an opinion or request that the physician "assume" care for the patient, even if only a portion. For example, a physician might write, "I will continue to manage the diabetes and heart disease but would like you to take over the late effects of the stroke."