

Outpatient Facility Coding Alert

APC Payment Update: Don't Miss These Changes to EAM Codes for 2014

Hint: More services will qualify than ever before.

Every outpatient coder needs to know the new revamped Extended Assessment and Management (EAM) codes for 2014. New APC 8009, which reimburses at an APC base rate of \$1,198.91, replaces APCs 8002 (Level 1) and 8003 (Level 2).

2014 advantage: When there were five levels to choose from in 2013, only the Level 5 clinic visit would trigger the Level 1 EAM; but in 2014, with only a single code (HCPCS G0463) for visits, any clinic visit will receive the EAM reimbursement.

Level 4 Type A ED visits and Level 5 Type B ED as well as critical care visits and direct referral to observation will continue to trigger an EAM in 2014.

Hidden payment: Visits that would have not qualified for the EAM in 2013 (low level visits) have the potential to earn an EAM payment in 2014 when reported with eight hours of observation. For example: A patient who goes to a provider-based clinic and is placed directly under observation for at least 8 hours will qualify for EAM. However, if a patient is seen in the ED and then placed in observation for at least 8 hours, the facility will only be paid for the ED visit.