

Pain Management Coding Alert

CPT® 2020: EEG, E/M Changes Are on the Horizon

EEG technologists get new codes.

CPT® has released its final list of additions, deletions, and revisions for 2020, and PM coders should stand up and take notice.

Why? One of the most voluminous changes to the CPT® 2020 manual involves electroencephalograms (EEGs), which are getting a bevy of new and revised codes. Also, you'll want to make note of a few important additions and revisions to the evaluation and management (E/M) code set - specifically for online digital E/M services.

Dive in and have a quick look at a couple of CPT® coding changes for the 2020 CY.

EEG Code Sets Get Major Upgrade

EEGs will see an explosion of new codes in January. First, if your practice employs an EEG technologist, you'll have over 10 new codes to choose from, among them:

- 95700 (Electroencephalogram (EEG) continuous recording, with video when performed, setup, patient education, and takedown when performed, administered in person by EEG technologist, minimum of 8 channels)
- 95705 (Electroencephalogram (EEG), without video, review of data, technical description by EEG technologist, 2-12 hours; unmonitored)
- 95708 (Electroencephalogram (EEG), without video, review of data, technical description by EEG technologist, each increment of 12-26 hours; unmonitored)
- 95711 (Electroencephalogram with video (VEEG), review of data, technical description by EEG technologist, 2-12 hours; unmonitored)
- 95714 (Electroencephalogram with video (VEEG), review of data, technical description by EEG technologist, each increment of 12-26 hours; unmonitored).

Note: This is not a comprehensive list of the new codes for EEG technologists. Consult CPT® 2020 for more information on these codes.

There's also some new codes for EEGs that your physician or other provider might perform, among them:

- 95717 (Electroencephalogram (EEG), continuous recording, physician or other qualified health care professional review of recorded events, analysis of spike and seizure detection, interpretation and report, 2-12 hours of EEG recording; without video)
- 95719 (Electroencephalogram (EEG), continuous recording, physician or other qualified health care professional review of recorded events, analysis of spike and seizure detection, each increment of greater than 12 hours, up to 26 hours of EEG recording, interpretation and report after each 24-hour period; without video)
- 95721 (Electroencephalogram (EEG), continuous recording, physician or other qualified health care professional review of recorded events, analysis of spike and seizure detection, interpretation, and summary report, complete study; greater than 36 hours, up to 60 hours of EEG recording, without video).

Note: This is not a comprehensive list of the new and revised codes for EEGs. Consult CPT® 2020 for more information on these codes.

See New and Revised Changes to E/M Code Set

Practically speaking, you might be relieved to find that the 2020 changes to the evaluation and management (E/M) code set are unlikely to have a profound impact on your day-to-day coding responsibilities. The most substantial changes come by the way of some new codes for online digital E/M services for established patients. Have a look at the following codes:

- 99421 (Online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 5-10 minutes)
- 99422 (... 11-20 minutes)
- 99423 (... 21 or more minutes).

These codes will be replacing the wordy 99444 (Online evaluation and management service provided by a physician or other qualified health care professional who may report evaluation and management services provided to an established patient or guardian, not originating from a related E/M service provided within the previous 7 days, using the Internet or similar electronic communications network), which will be deleted for 2020.