BHMG Physician Practice Coding Education Team   **October, 2020**

CMS 2021 E&M CHANGES

Coding/Documentation and E&M Questions? Contact
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Provider E&M documentation has not undergone any significant changes since the 1997 specialty examinations were presented, but 2021 will prove to be interesting for E&M documentation and coding.

HIGHLIGHTS to 2021 E&M CHANGES

- **Code 99201 will be deleted**
- **Clinicians may use either time or MDM to select a code**
- **No required level of history or exam for visits 99202 – 99215**
- **Visits will have a range of time**
- **New definitions within MDM; a new MDM Table of Risk**
  - **Also including a similar, but not identical MDM calculation**

- The changes only affect the ambulatory (office charges), the inpatient E&M still remains the same.
  - This can prove challenging for providers that attend to patients in both settings, as they must adhere to two different CMS E&M documentation requirements.
- The changes may be small, but they are significant.
- For the office setting, a provider must document and support their cognitive labor within the assessment and plan (Medical Decision Making).
- Although many providers have already documented close to at this level, the new CMS requirements for MDM identifies what services and labor can be supported for a certain E&M level.

*Final rule on all CMS proposed rules for CY 2021 can be expected for December 1, 2020

AMA Supports Documentation Guidance of the Coming Changes.

- No required level of history or exam for visits 99202-99215. The provider determines the level of history and exam. These will no longer be key components for 99202 – 99215

As per AMA website for 2021,

- *"Office or outpatient services include a medically appropriate history and/or examination, when performed. The nature and extent of the history and/or physical examination is determined by the treating. The care team may collect information and the patient or caregiver may supply information directly (eg, by portal or questionnaire) that is reviewed by the reporting physician or other qualified*

health care professional. The extent of history and physical examination is not an element in selection of office or other outpatient services."

New Definitions as per AMA: Presenting Problems

In collaboration, effective January 1, 2021, CMS is aligning E/M coding with changes adopted by the AMA CPT Editorial Panel for office/outpatient E/M visits.

Problem:
A problem is a disease, condition, illness, injury, symptom, sign, finding, complaint, or other matter addressed at the encounter, with or without a diagnosis being established at the time of the encounter.

Problem Addressed:
A problem is addressed or managed when it is evaluated or treated at the encounter by the physician or other qualified health care professional reporting the service.

Minimal Problem:
A problem that may not require the presence of the physician or other qualified health care professional, but the service is provided under the physician's or other qualified health care professional's supervision (see 99211)

Self-limited or minor problem:
A problem that runs a definite and prescribed course, is transient in nature, and is not likely to permanently alter health status.

Stable, chronic illness:
A problem with an expected duration of at least a year or until the death of the patient. For the purpose of defining chronicity, conditions are treated as chronic whether or not stage or severity changes (e.g., uncontrolled diabetes and controlled diabetes are a single chronic condition). 'Stable' for the purposes of categorizing medical decision making is defined by the specific treatment goals for an individual patient.

Acute, uncomplicated illness or injury:
A recent or new short-term problem with low risk of morbidity for which treatment is considered. There is little to no risk of mortality with treatment, and full recovery without functional impairment is expected.

Chronic illness with exacerbation, progression, or side effects of treatment:
A chronic illness that is acutely worsening, poorly controlled or progressing with an intent to control progression and requiring additional supportive care or requiring the attention to treatment for side effects, but that does not require consideration of hospital level of care,

Undiagnosed new problem with uncertain prognosis:
A problem in the differential diagnosis that represents a condition likely to result in a high risk of morbidity without treatment. An example may be a lump in a breast.

Acute illness with systemic symptoms:
An illness that causes systemic symptoms and has a high risk of morbidity without treatment. Examples may include pyelonephritis, pneumonitis, or colitis.

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Acute, complicated injury:

An injury which requires treatment that includes evaluation of body systems that are not directly part of the injured organ, the injury is extensive, or the treatment options are multiple and/or associated with risk of morbidity. For example, a head injury with brief loss of consciousness.

Chronic illness with severe exacerbation, progression, or side effects of treatment:

The severe exacerbation or progression of a chronic illness or severe side effects of treatment that have significant risk of morbidity and may require hospital level of care.

Acute or chronic illness or injury that poses a threat to life or bodily functions:

An acute illness with systemic symptoms, or an acute complicated injury, or a chronic illness or injury with exacerbation and/or progression or side effects of treatment, that pose a threat to life or bodily function in the near term without treatment. Examples may include myocardial infarction, pulmonary embolus, severe respiratory distress, and others.

PROVIDER CODING EDUCATION WEBINAR CALENDAR

Are you registered for any of the upcoming Coding Education Webinar Series?

- **Did you know that CMS is changing the E&M Documentation Guidelines for 2021?**
- **Are you familiar with HCC Documentation for Coding?**

How do you answer these questions?

Register today for the upcoming Coding Education Webinars available within the CME October calendar.

Follow this Link- Coding Education Webinar Provider Calendar and Registration:

https://cmeonline.baptisthealth.net/2020-coding/series/coding-and-documentation-conference-series

October Calendar Topics:

- Introduction to CMS 2021 E&M Guidelines
- HCC Coding- COPD
- HCC- Coding- Depression

November and December Calendar Topics:

- 2021 E&M Coding- by MDM
- 2021 E&M Coding- by Time