Coding Level-One Office Visits

Billing Services “Incident to” a Medical Provider
Review of CPT Code 99211
CPT Description of 99211

- Office or other outpatient visit for the evaluation and management of an “established” patient that may not require the presence of a physician or other qualified health professional.

- Presenting problem(s) are minimal.

- Typically, no more than 5 minutes are spent performing or supervising these services.
Basic Guidelines

- “Incident to” services are provided by a non-physician practitioner (e.g., RN or MA) and must be billed out under the supervising physician/qualified health care professional who is the office at the time of service.

- The patient must be established. An established patient is defined as one who has received professional services from a physician/qualified health care professional of the exact same specialty and subspecialty who belongs to the same group practice, within the past three years.

- The patient encounter must be face to face.

- An E/M service must be provided.

- The service must be separate from other services performed on the same day.

- The presence of a physician is not required in the exam room.
Documentation Requirements

Unlike other E/M codes, CPT 99211 does not have any documentation requirements for the history, physical exam or complexity of medical decision making, however, supporting documentation in the patient record is required.
You can’t run away from having to document the visit.

Just because there are not a lot of documentation requirements, you still need to justify the information in the medical record to support the E/M code.
Documentation should include the following:

- Sufficient information to support the reason for the encounter and E/M service.
- Any relevant history
- Physical assessment and plan of care.
- The date of service
- The identity of the person providing care
- Any interaction with the supervising physician or other practitioner
Supervision Requirements

CMS guidelines effective January 1, 2016, provide the following clarification:

- The ordering, referring or treatment initiating physician (or other practitioner) does NOT have to be the supervising provider.
- “Incident to” services must be billed under the supervising provider’s NPI.
- Services requiring only “general supervision” do not require the physician (or other practitioner) to be present in the office suite at the time of service.
# Examples of Using CPT 99211

<table>
<thead>
<tr>
<th>Service Provided</th>
<th>Who was Care Provided by?</th>
<th>What was documented?</th>
<th>Did Provider Review and/or make any recommendations?</th>
<th>Should service be billed as 99211?</th>
</tr>
</thead>
</table>
| Venipuncture (36415): Asymptomatic | MA or RN                  | • Pt here for lab draw only  
• No vitals or other symptoms were discussed. | Provider simply notes and signs off on documentation | No • Bill for blood draw only  
• Blood draws do not require the provider’s presence in the office |
| Venipuncture (36415) Symptomatic  | MA or RN                  | • Pt here for lab draw and mentions they have other symptoms.  
• MA/RN takes vitals and notes additional information reported by pt.  
• MA/RN reviews with medical provider. | • Provider reviews and makes any recommendations for patient but does not physically see the patient  
• Providers gives instructions to MA/RN to report to patient on his/her behalf, signs off on documentation. | YES • Bill 99211 and the venipuncture. Documentation clearly explains medical necessity.  
• A modifier 25 would need to be amended to the 99211 showing a separately necessary service was provided in addition to the venipuncture. |
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<tbody>
<tr>
<td>Blood Pressure Check</td>
<td>MA or RN</td>
<td>• BP reading &amp; any other pertinent vital signs.</td>
<td>• MA/RN reviews with provider. • Provider reviewed and makes any necessary recommendations for further treatment.</td>
<td>YES</td>
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<tr>
<td></td>
<td></td>
<td>• Clinical reason pt was being checked for BP.</td>
<td>• Provider signs off. • Provider did not physically see the patient.</td>
<td></td>
</tr>
<tr>
<td>Blood Pressure Check</td>
<td>MA or RN</td>
<td>• Only BP reading documented and nothing documented as indicated above to explain medical necessity.</td>
<td>• Provider does nothing with this information, nor was the information requested.</td>
<td>NO</td>
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<tr>
<td></td>
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<td>• There is nothing to support medical necessity of the BP check.</td>
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<td>Counseling, Health Education or Enabling Service</td>
<td>Health Educator, Nutritionist, RN or Social Worker</td>
<td>• Clinical reason for the visit</td>
<td>• Provider reviewed and made any necessary recommendations for further treatment.</td>
<td>YES</td>
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<tr>
<td></td>
<td></td>
<td>• Any vitals taken</td>
<td>• Provider signs off on documentation</td>
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<tr>
<td></td>
<td></td>
<td>• Service provided</td>
<td></td>
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<tr>
<td>Example of dual coding that may not be paid:</td>
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<tr>
<td>99211 – Level I</td>
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<tr>
<td>99401 – Indiv Counseling (15 min)</td>
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<tr>
<td>Diag: Z71.9 (Other specified counseling), Z71.3 (Dietary Counseling)</td>
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<td>Immunizations or Vaccines</td>
<td>RN or Medical Provider</td>
<td>• Pt here for any vaccines that are due, including Flu, pneumonia, tetanus, well child vaccines, etc.</td>
<td>• Provider simply notes and signs off on documentation.</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Patient does not have any other needs.</td>
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- Only the administration of the vaccine and the biologic is billable.
- CPT code 99211 is not separately reportable with vaccine administration codes 90460-80474, G008-G0010 per the National Corrective Coding Initiative.
Billers Nightmare

Encounter charges and diagnosis submitted:

- 99211
- 90471 – Vaccine Admin
- 90686 – Flu Vaccine

Diagnosis Code: Z23

Please stop the maddness!!!
Resources

- “Incident To” Clarification for Evaluation and Management Code CPT 99211
  https://www.noridianmedicare.com/provider/updates/docs/incident_to_billin
g_99211_acro.pdf

  https://www.cms.gov/Medicare/Coding/NationalCorrectCodingInitEd/index.ht
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- Coding Level-One Office Visits: A Refresher Course

- Understanding When to Use 99211, http://wwwaafp.org/fpm

Questions?
Thank you again for us joining today!

This webinar was presented by:

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