Class 9: Module 1.c Homework: Consultations

1. While CPT Consultation E/M codes may never be coded for Medicare, they may be submitted for other payer types. Consider this example: Dr. Jones, a family doctor has been managing diabetes and HTN for her patient for two years. The patient's clinical picture is worse now and Dr. Jones wants the opinion and advice of an endocrinology specialist, Dr. Anderson. Dr. Anderson performed a medically necessary history and examination with moderately complex MDM for the patient. What code should be assigned by Dr. Anderson today?

2. Office consultation for a new or established patient, which requires these three key components: an expanded problem focused history and examination and straightforward MDM.

3. T/F: Consultations can involve either new patients or established patients.

4. T/F: A consultation is a request for opinion or advice by one clinician of another clinician.

5. If there is relevant documentation support and qualify for an inpatient consultation, and you are sure that their insurer recognizes consultant codes, you should choose an appropriate-level initial inpatient consultation code from _____for the physician's first meeting with the patient requested by another provider.

a. 99202-99215 Office and other outpatient services

b. 99252 – 99255 Initial inpatient consultation services

c. 99242 – 99245 Office and Outpatient Consultations

d. 99221-99223 Initial Hospital Services