BCA's Evaluation and Management Coding Tool: Inpatient and Observation Services

CPT Code & Medical Decision Making (MDM)	Number & Complexity of Problems Addressed	Amount and/or Complexity of Data to be reviewed and Analyzed	Risk of Complications and/or Morbidity/Mortality of Patient Management
STRAIGHTFORWARD/LOW MDM **99221: Initial** hospital inpatient or observation care: ≥ 40 minutes **99231: Subsequent** hospital inpatient or observation care, per day: ≥ 25 minutes **99234:** Hospital inpatient or observation care, including **admission and discharge** on the same date: ≥ 45 minutes	**MINIMAL:** • 1 self-limited or minor problem • 2 or more self-limited or minor problems; • 1 stable chronic illness; or • 1 acute uncomplicated illness or injury requiring hospital inpatient or observation level of care	**LIMITED:** (Must meet at least 1 out of 2 categories) Category 1: Tests, documents, or independent historian(s) Any combination of 2 of the following: • Review of prior external note(s), each unique source*; • Review of the result(s) of each unique test*; • Ordering of each unique test*; Category 2: Assessment requiring independent historian(s)	**LOW RISK** of morbidity from additional diagnostic testing or treatment **Documentation Tip:** Clinicians are encouraged to document details that speak well to other care team members, provide better patient care experiences and support services reported for reimbursement. **S** = Subjective: Problems | Incoming status | Interval history **O** = Objective: Clinicians observations | Medically elevant exam **A** = Assessment: Professional opinion reguarding evaluation **P** = Plan: Plan/Next Steps | Significance of concerns
MODERATE MDM **99222: Initial** hospital inpatient or observation care: ≥ 55 minutes **99232: Subsequent** hospital inpatient or observation care, per day: ≥ 35 minutes **99235:** Hospital inpatient or observation care, including **admission and discharge** on the same date: ≥ 70 minutes	**MODERATE:** • 1 or more chronic illnesses w/exacerbation; • 2 or more stable chronic illnesses; or • 1 undiagnosed new problem w/uncertain prognosis; or • 1 acute illness w/systemic symptoms; or • 1 acute complicated injury	**MODERATE:** (Must meet at least 1 out of 3 categories) Category 1: Tests, documents, or independent historian(s) Any combination of 3 from the following: • Review of prior external note(s) from each unique source*; • Review of the result(s) of each unique test*; • Ordering of each unique test*; • Assessment requiring an independent historian(s) Category 2: Independent interpretation of tests performed by another qualified health care professional; Category 3: Discussion of management or test interpretation with external qualified health care professional/appropriate source	**MODERATE RISK** of morbidity from additional diagnostic testing or treatment: MODERATE RISK (Examples only): • Prescription drug management • Decision regarding minor surgery w/ identified risk factors • Decision regarding major surgery w/o identified risk factors • Diagnosis/treatment significantly limited by Social Determinants of Health (SDoH)
HIGH MDM **99223: Initial** hospital inpatient or observation care: ≥ 75 minutes **99233: Subsequent** hospital inpatient or observation care, per day: ≥ 50 minutes **99236:** Hospital inpatient or observation care, including **admission and discharge** on the same date: ≥ 85 minutes	**HIGH:** • 1 or more chronic illnesses w/severe exacerbation, progression, or side effects of treatment; or • 1 acute or chronic illness or injury that poses a threat to life or bodily function	**EXTENSIVE:** (Must meet at least 2 out of 3 categories) Category 1: Tests, documents, or independent historian(s) Any combination of 3 from the following: • Review of prior external note(s) from each unique source*; • Review of the result(s) of each unique test*; • Ordering of each unique test*; • Assessment requiring an independent historian(s) Category 2: Independent interpretation of tests performed by another qualified health care professional; Category 3: Discussion of management or test interpretation with external qualified health care professional/appropriate source	**HIGH RISK** of morbidity from additional diagnostic testing or treatment: HIGH RISK (Examples only): • Drug therapy requiring intensive monitoring for toxicity • Decision regarding: emergency major surgery, hospitalization or escalation of hospital-level care • Decision regarding elective major procedure with identified patient or procedure risk factors • Decision not to resuscitate or to de-escalate care d/t poor prognosis • Decision regarding parenteral controlled substances

All Evaluation and Management (E/M) Services require a medically appropriate history and/or

DISCHARGE SERVICES: (For hospital inpatient or observation care including the admission and discharge of the patient on the same date, see 99234, 99235, 99236)
99238: Hospital inpatient or observation discharge day management; 30 minutes* or less on the date of the encounter
99239: Hospital inpatient or observation discharge day management; more than 30 minutes* on the date of the encounter
*Time must be documented. Only the attending physician of record may report the discharge day management service.

CODE SELECTION IS BASED ON EITHER MEDICAL DECISION MAKING (MDM) OR TOTAL ENCOUNTER TIME

Total Encounter Time includes both face to face (F2F) and non-F2F time personally spent by the clinician on the day of the encounter. Clinical staff time cannot be counted. Activities including relevant pre, intra and post-service work should be well-documented. Time spent performing separately reported services other than the E/M service is not counted toward the time.

Elements (3) of Medical Decision Making (MDM): In order to qualify for a particular Level of Medical Decision Making: **TWO** of the **THREE ELEMENTS** of **MDM MUST BE MET** or exceeded

1. Number & Complexity of Problems Addressed: A problem is addressed when it is evaluated or treated at the encounter by the qualified health care professional reporting the service.

2. Amount and/or Complexity of Data to be reviewed and Analyzed: Data includes medical records, tests, and/or other information that must be obtained, ordered, reviewed, and analyzed for the encounter.

3. Risk of Complications and/or Morbidity/Mortality of Patient Management: For the purposes of medical decision making, level of risk is based upon consequences of the problem(s) addressed at the encounter when appropriately treated.

+99418 Prolonged inpatient or observation evaluation and management service(s) time with or without direct patient contact beyond the required time of the primary service when the primary service level has been selected using total time, each 15 minutes of total time (List separately in addition to the code of the inpatient and observation Evaluation and Management service). Use 99418 in conjunction with 99223, 99233, 99236.

This quick-reference coding tool is based off of AMA guidelines as published in CPT© 2024 Professional Edition. See AMA guidelines for full details. Visit us at www.bcarev.com for training on the use of this tool and others.