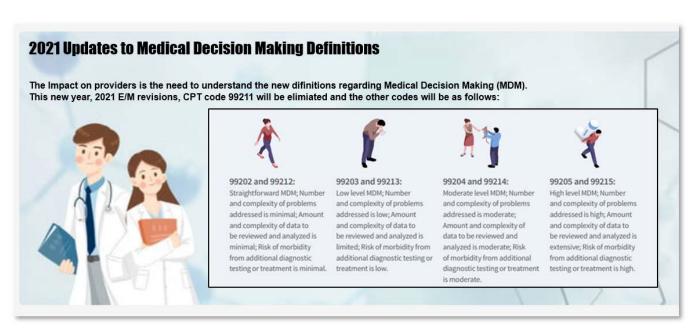


December 16, 2020

Medical Decision Making Updates for 2021

Effective January 1, 2021, major changes for E/M (Evaluation and Management) coding will be in effect. If time spent on the encounter is used as the determinant for the CPT code billed, the time values will change from typical time used to total time used:

New Patient Codes Existing Patient Codes CPT Code Time increment CPT Code Time increment 99201 **No longer a valid code 99211 **Time element removed 99202 15-29 minutes 99212 10-19 minutes 99203 30-44 minutes 99213 20-29 minutes 99204 45-59 minutes 99214 30-39 minutes 99205 60-74 minutes 99215 40-54 minutes





Understanding the effects

When coding according to time, physicians and other qualified health professionals can include the following:

- Preparing for the patient visit, such as reviewing test results
- Obtaining or reviewing history
- Performing a medically necessary examination/evaluation
- Educating or counseling the patient as well as their family and/or caregiver
- Ordering tests, medications, or procedures
- Referring to and communicating with other providers (if this has not been reported separately)
- Documenting clinical information in the EHR or paper chart, if applicable
- Independently interpreting results, provided this has not been otherwise reported, and communicating those results with the patient as well as their family and/or caregiver
- Care coordination that has not been otherwise reported. It is important to note that if two
 qualified health care professionals share or split an office visit, time can only be
 counted once and in total. Each activity, even if performed by two distinct
 practitioners, can only be counted towards time once

If you have any questions, please feel free to contact your Provider Relations Representative at 661-664-5000.

Thank you,

Melissa Lopez

Melissa Lopez Provider Relations Manager