## **RESULTING E&M CODE - INPATIENT**

Patient Name:	Date of Service:	E&M Code: 99
	Enter the number in each of the categories in Column A in the table be	elow. Do not catoregize the problems(s)

Γ	Number of Diagnoses or Treatment Ontions
	the encounter is dominated by counseling/coordinating of care and duration of time is not specified. In that case, enter 3 in the total box.
_	3. Identify each problem of treatment option mentioned in the record. Enter the number in each of the categories in Column A in the table below. Do not catolegize the problems(s) in

Number of Diagnoses of Treatment Options			
	Α :	КВ	= C
Problem(s) Status	Number	Points	Result
Self-limited or minor (stable, improving or worsening)	Max = 2	1	
Established problem (to examiner); stable, improved		1	
Established problem (to examiner), worsening		2	
New problem (to examiner), no additional workup planned	Max = 1	3	
New problem (to examiner), additional workup planned		4	

Multiply the number in columns A & B and put the result in column C. Enter a total for column C.

Enter appropriate level in row A of "Final Result for Medical Decision Making".

B). Use the risk table below as a guide to assign risk factors. The table does not contain all specific instances of medical care; it is intended to be used as a guide. Circle the most appropriate factor(s) in each category. The overall measure of risk is the highest level circled in any category. Enter the level of risk identified in Final Result Medical Decision Making.

	Table of Risk							
Level of Risk	Presenting problem(s)	Diagnostic procedure(s) ordered	Management options selected					
Minimal	* One self-limited or minor problem, e.g., cold, insect bit, tinea corporis	* Laboratory test requiring venipuncture * Ultrasound, e.g., echo * Chest X-rays * Urinalysis * KOH Prep * EKG/EEG	* Rest * Gargles * Elastic bandages * Superficial dressings					
Low	* Two or more self-limited or minor problems  * One stable chronic illness, e.g., well controlled hypertension or non-insulin dependent diabetes, cataract, BPH  * Acute uncomplicated illness or injury, e.g., cystitis, allergic rhinitis, simple sprain	* Physiologic tests not under stress, e.g., pulmonary function tests * Non-cardiovascular imaging studies with contrast, e.g., barium enema * Superficial needle biopsies * Clinical laboratory tests requiring arterial puncture * Skin biopsies	* Over-the-counter drugs * Minor surgery with no identified risk factors * Physical therapy * Occupational therapy * If fluids without additives					
Moderate  * One or more chronic illnesses with mild exacerbation, progression, or side effects of treatment  * Two or more stable chronic illnesses  * Undiagnosed new problem with uncertain prognosis, e.g., lump in breast  * Acute illness with systemic symptoms, e.g., pyelonephritis, pneumonitis, colitis  * Acute complicated injury, e.g., head injury with brief loss of consciousness.		Physiologic tests under stress, e.g., cardiac stress test, fetal contraction stress test Diagnostic endoscopies with no identified risk factors Deep needle or incisional biopsy Cardiovascular imaging studies with contrast and no identified risk factors, e.g., arteriogram cardiac cath Obtain fluid from body cavity, e.g., lumbar puncture, thoracentesis, culdocentesis	Minor surgery with identified risk factors     Elective major surgery (open, percutaneous or endoscopic) with no identified risk factors     Prescription drug management     Therapeutic nuclear medicine     IV fluids with additives     Closed treatment of fracture without manipulation					
High	* One or more chronic illnesses w/ severe exacerbation, progression or side effects of treatment  * Acute or chronic illnesses or injuries that may pose a threat to life or bodily function, e.g., multiple trauma, acute MI, pulmonary embolus, severe respiratory distress, progressive severe rheumatoid arthritis, psychiatric illness w/ potential threat to self or others, peritonitis, acute renal failure  * An abrupt change in neurological status, e.g., seizure, TIA, weakness or sensory loss	* Cardiovascular imaging studies with contrast with identified risk factors * Cardiac electrophysiological tests * Diagnostic endoscopies with identified risk factors * Discography	Telective major surgery (open, percutaneous, or endoscopic with identified risk factors) Emergency major surgery (open, percutaneous or endoscopic) Parenteral controlled substances Drug therapy requiring intensive monitoring for toxicity Decision not to resuscitate or to de-escalate care because of poor prognosis					

**C).** For each category of reviewed data identified, circle the number in the points column. Total the points.

Amount and/or Complexity of Data Reviewed					
Reviewed Data	Points				
Review and/or order of clinical lab test	1				
Review and/or order of tests in the radiology section of CPT	1				
Review and/or order of tests in the medicine section of CPT	1				
Discussion of test results with performing physician	1				
Decision to obtain old records and/or obtain history from someone other than patient	1				
Review and summarization of old records and/or obtaining history from someone other than patient and/or discussion of case with another health care provider	2				
Independent visualization of image, tracing or specimen itself (not simply review of report)	2				
Bring total to row C in <u>Final Result for Medical Decision Making</u> (table below)	AL				

D). Draw a line down any column with 2 or 3 circles to identify the type of decision-making in that column. Otherwise, draw a line down the column with the 2<sup>nd</sup> circle from the left. After completing this table, which classifies complexity, circle the type of decision making within the appropriate grid in Section 5, Level of Service.

П	Final Result for Complexity of Medical Decision Making					
Ш	A Number of Diagnosis or treatment options	≤ 1 = Minimal	2 = Limited	3 = Multiple	4 = Extensive	
IL	B Highest Risk	Minimal	Low	Moderate	High	
Ш	C Amount and complexity of data	≤ 1 = Minimal or Low	2 = Limited	3 = Multiple	≥ 4 = Extensive	
П	TYPE OF DECISION MAKING	STRAIGHT-FORWARD	LOW COMPLEX	MODERATE COMPLEX	HIGH COMPLEX	

## Section 5. Level of service - INPATIENT

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П		Initial Hospital/Observation Requires 3 components within the shaded area			Subsequent Inpatient/Follow-up Consult		
П					Requires 2 components within the shaded area		
Ш	History	D or C	С	С	PF interval	EPF interval	D interval
	Examination	D or C	С	С	PF	EPF	D
	Complexity of medical decision making	SF/L	М	Н	SF/L	М	н
	Average Time (minutes) (Observation care has no average time)	30 Init hosp (99221) Observ care (99218)	50 Init hosp (99222) Observ care (99219)	70 Init hosp (99223) Observ care (99220)	15 Subsequent (99231)	25 Subsequent (99232)	35 Subsequent (99233)
1	Level	ı	II	III		II	