

No More 99201? What's Coming in 2021 for E/M

April 04, 2019

There's been a lot of buzz about what Medicare has planned for E/M in 2021. One question that all raises is how it will mesh with AMA CPT coding rules? Here are some hints from the February 2019 CPT Editorial Summary of Panel Actions about what is in store for the code descriptors and guidelines.

Do You Review Panel Action Summaries? You Should!

First a note about the source. Each [Editorial Summary of Panel Actions](#) gives a glimpse into (but not much detail about) the codes and topics discussed at a CPT Editorial Panel Meeting. Codes and wording aren't finalized until closer to the time of the code set publication, but the summary offers some helpful information to help you prepare for what's ahead. And don't look at just the most recent Summary. Plans for changes to CPT codes may happen years in advance.

Find Out What the February 2019 Summary Says About 2021 E/M Changes

The February 2019 Summary presents changes planned for the January 2021 update of the AMA CPT code set. The points listed for 99201-99205 and 99211-99215 take up more space than is usual for the Summary, giving you an idea that big changes are coming. Here's the scoop:

- ⇒ Code 99201 will be deleted, and there will be revisions to the other codes, as noted in the bullets below.
- ⇒ The code descriptors will no longer have history and examination listed as key components for E/M level. The descriptors will still include a requirement for history and/or exam to be performed.
- ⇒ The descriptors will specify that medical decision making (MDM) or total time spent will be the basis for code selection.
- ⇒ The definition for the time element will change from typical face-to-face time to total time spent on the day of the encounter. As you might expect from this change, the time associated with each code will be revised.

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MDM elements will change like this:

- ⇒ “Number of Diagnoses or Management Options” will become “Number and Complexity of Problems Addressed”
- ⇒ “Amount and/or Complexity of Data to be Reviewed” will become “Amount and/or Complexity of Data to be Reviewed and Analyzed”
- ⇒ “Risk of Complications and/or Morbidity or Mortality” will become “Risk of Complications and/or Morbidity or Mortality of Patient Management.”

Prepare for E/M Guideline Changes, Too

The E/M guidelines are getting their own makeover for 2021. According to the Summary, this is what you can expect:

The guidelines will be structured in three sections, making it easier to separate the new reporting guidelines for the office/outpatient E/M codes 99202-99215:

1. Guidelines Common to All E/M Services
2. Guidelines for Hospital Observation, Hospital Inpatient, Consultations, Emergency Department, Nursing Facility, Domiciliary, Rest Home or Custodial Care and Home E/M Services
3. Guidelines for Office or Other Outpatient E/M Services.

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- ⇒ There is a plan for a table showing a summary of the guideline differences, and the guidelines themselves will get a review to be sure all sections line up with the applicable 2021 rules.
- ⇒ You'll have definitions explaining MDM terms and an MDM table.
- ⇒ The guidelines will define total time for you to use with codes 99202-99215.
- ⇒ There will be guidance on how to report time when different individuals perform part of an E/M.

Final tip: There will also be some clarifications to existing language in the MDM table and adjustments like removing office/outpatient services from prolonged services codes +99354 and +99355 (and adding a new code for prolonged office/outpatient services). So stay alert for adjustments that are ripples of these bigger E/M changes.