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EMERGENCY DEPARTMENT E/M CODING CHANGES

Q As a family physician working in an emergency department, what should I know about the 2023 evaluation and management (E/M) code changes?

A You should still use CPT codes 99281-99285 for emergency department E/M visits, but the history and physical exam components are no longer factors in E/M code selection. Using total time for E/M code selection is not an option in



the emergency department, unlike other settings. Instead, you must use medical decision making (MDM), which is determined based on two of these three elements:

- Number and complexity of problems addressed,
- Amount and complexity of data reviewed and analyzed,
- Risk of complications, morbidity, or mortality of patient management.

It is important to learn the general MDM guidelines, which include definitions and directions to guide you in using the levels of MDM table (<https://www.ama-assn.org>).

ABOUT THE AUTHOR

Cindy Hughes is an independent consulting editor based in El Dorado, Kan., and a contributing editor to *FPM*. Author disclosure: no relevant financial relationships.

EDITOR'S NOTE

Reviewed by the *FPM* Coding & Documentation Review Panel. Some payers may not agree with the advice given. Refer to current coding manuals and payer policies.

[org/system/files/2023-e-m-descriptors-guidelines.pdf](https://www.aafp.org/system/files/2023-e-m-descriptors-guidelines.pdf)).

Code 99281 is now described as a service that may not require a physician or other qualified health care professional, similar to code 99211 for E/M services provided to an established patient in an office or other outpatient setting.

Editor's note: For information on the 2023 hospital and nursing home E/M visit coding changes, see <https://www.aafp.org/pubs/fpm/issues/2023/0100/hospital-em-coding.html>.

ASSISTED LIVING AND HOME VISIT E/M CODING CHANGES

Q My practice cares for patients in assisted living facilities. Do the 2023 E/M changes affect our coding?

A Yes. Services provided to patients in assisted living facilities on or after Jan. 1, 2023, should be reported with the same codes as services provided in patients' homes.

The CPT codes for home or residence E/M services for *new patients* are as follows:

- 99341, straightforward MDM or at least 15 minutes total time,
- 99342, low level MDM or at least 30 minutes total time,
- 99344, moderate level MDM or at least 60 minutes total time,
- 99345, high level MDM or at least 75 minutes total time.

(Code 99343 has been deleted.)

The CPT codes for home or residence E/M services for *established patients* are as follows:

- 99347, straightforward MDM or at least 20 minutes total time,
- 99348, low level MDM or at least 30 minutes total time,
- 99349, moderate level MDM or at least 40 minutes total time,
- 99350, high level MDM or at least 60 minutes total time.

Select specific codes within these groups based on either your level of MDM or total time on the date of the encounter (including face-to-face and non-face-to-face time), similar to selecting codes for E/M office visits. In addition to applying to E/M services provided in assisted living and private residences, these codes also apply to E/M services provided in temporary or short-term accommodations (e.g., a shelter or hotel), group homes, residential substance abuse treatment facilities, or any other residential facility where only minimal health care is provided. The E/M codes specific to domiciliary, rest home (e.g., boarding home), or custodial care (99324-99238, 99334-99337, 99339, and 99340) have been deleted, and the above codes should also be used in those settings.

DIAGNOSIS CODES FOR DIFFICULTY WITH DAILY ACTIVITIES

Q When is it appropriate to report diagnosis codes for problems related to difficulty with daily tasks, such as Z73.6, "limitation of activities due to disability?"

A Report codes in category Z73, "problems related to life management difficulty," as well as codes in category Z72, "problems related to lifestyle," *only* when the documentation specifies that the patient has an associated health problem (e.g., the patient is unable to perform wound care due to physical limitations). The same instruction applies to social determinants of health categories Z55-Z65, per ICD-10-CM guidelines for 2022-2023. Report these codes only when the patient has an associated health problem or risk factor. **FPM**

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