

## Evaluation and Management Audit Tool Supplement *CPT*<sup>®</sup> 2023

Category (Elements)	Codes (Minutes)	Number/Complexity of Problems Addressed	Risk of Complications and/or Morbidity or Mortality of Patient Management	Amount and/or Complexity of Data to be Reviewed & Analyzed
	99202 (15-29 min)	Minimal	Minimal	Minimal
New Patient	99203 (30-44 min)	Low	Low	Limited
OV/Outpatient (2/3)	99204 (45-59 min)	Moderate	Moderate	Moderate
	99205 (60-74 min)	High	High	Extensive
Established Patient	99212 (10-19 min)	Minimal	Minimal	Minimal
	99213 (20-29 min)	Low	Low	Limited
OV/Outpatient	99214 (30-39 min)	Moderate	Moderate	Moderate
(2/3)	99215 (40-54 min)	High	High	Extensive

Category	Codes (Minutes)	Number/Complexity of Problems Addressed	Risk of Complications and/or Morbidity or Mortality of Pt Management	Amount and/or Complexity of Data to be Reviewed & Analyzed
	99221 (40 min)	Straightforward/Low	Straightforward/Low	Limited
Initial Hospital Inpatient	99222 (55 min)	Moderate	Moderate	Moderate
or Observation Care	vation Care 99223 (75 min) High High		Extensive	
Subsequent Hospital	99231 (25 min)	Straightforward/Low	Straightforward/Low	Limited
Inpatient or Observation	99232 (35 min)	Moderate	Moderate	Moderate
Care	99233 (50 min)	High	High	Extensive
Hospital Inpatient or	99234 (45 min)	Straightforward/Low	Straightforward/Low	Limited
<b>Observation Care Services</b>	99234 (45 min) 99235 (70 min)	Moderate	Moderate	Moderate
(Including Admission and	, ,			
Discharge Services)	99236 (85 min)	High	High	Extensive
	99242 (20 min)	Straightforward	Straightforward	Minimal
Consultation:	99243 (30 min)	Low	Low	Limited
OV/Outpatient	99244 (40 min)	Moderate	Moderate	Moderate
	99245 (55 min)	High	High	Extensive
	99252 (35 min)	Straightforward	Straightforward	Minimal
Inpatient or Observation	99253 (45 min)	Low	Low	Limited
Consultation	99254 (60 min)	Moderate	Moderate	Moderate
	99255 (80 min)	High	High	Extensive
Initial Number Coelling	99304 (25 min)	Straightforward/Low	Straightforward/Low	Limited
Initial Nursing Facility	99305 (35 min)	Moderate	Moderate	Moderate
Care	99306 (45 min)	High	High	Extensive
	99307 (10 min)	Straightforward	Straightforward	Minimal
Subsequent Nursing	99308 (15 min)	Low	Low	Limited
Facility Care	99309 (30 min)	Moderate	Moderate	Moderate
	99310 (45 min)	High	High	Extensive
Home or Residence	99341 (15 min)	Straightforward	Straightforward	Minimal
Services	99342 (30 min)	Low	Low	Limited
	99344 (60 min)	Moderate	Moderate	Moderate
New Patient	99345 (75 min)	High	High	Extensive
	99347 (20 min)	Straightforward	Straightforward	Minimal
Home or Residence	99348 (30 min)	Low	Low	Limited
Services Established Patient	99349 (40 min)	Moderate	Moderate	Moderate
established Patient	99350 (60 min)	High	High	Extensive

+Prolonged Codes (add only with 99205 & 99215)				
99417 x 1	+ 99205 75–89 minutes	+ 99215 55–69 minutes		
99417 x 2	+ 99205 90–104 minutes	+ 99215 70-84 minutes		

+Prolonged Codes (add only with 99255) (Private Payers only)		
993X0	+99255 – 95 minutes or longer	

+Prolonged Codes (add only with 99205 & 99215) (CMS only)			
G2112	+ 99205 89–103	+ 99215 69–83	
	minutes	minutes	

Discharge Day Management Services			
Hospice Discharge Day	99328	<30 minutes	
Management	99239	>30 minutes	
Discharge Day Management	99238	<30 minutes	
Services	99239	>30 minutes	

+Prolonged Codes - Inpatient or Observation Care (add only with 99223, 99233, & 99236) (CMS only)				
G0316	+99223 - 105 minutes	+99233 – 80 minutes	+99236 – 125 minutes	

+Prolonged Codes - Other E/M Prolonged Services (CMS only)				
Initial NF Visit (99306)	G0317	95 minutes	1 day before visit + date of visit + 3 days after	
Subsequent NF Visit (99310	G0317	85 minutes	1 day before visit + date of visit + 3 days after	
Home/Residence Visit New Patient (99345	G0318	140 minutes	3 days before visit + date of visit + 7 days after	
Home/Residence Visit Established Patient (99350)	G0318	110 minutes	3 days before visit + date of visit + 7 days after	
Cognitive Assessment and Care Planning (99483)	G2212	100 minutes	3 days before visit + date of visit + 7 days after	

Note: Services/codes with a + sign are "add on" codes and must be reported with a companion code.

Hospices should check with their MAC before billing Prolonged Services.

This supplement is intended only as a quick reference guide. Before reporting a code, make sure to review all current coding and payer guidelines and requirements.