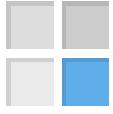


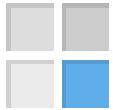
Risk Adjustment Coding Webinar: A review of the October 1, 2021 ICD-10 diagnosis code updates

Nancy M. Enos, CPC, CPMA, CEMC Emeritus
Enos Medical Coding



Agenda

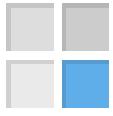
- 2022 ICD-10 Update
 - New Status Codes to Report Social Determinants of Health
- 2022 CPT Update
- Q&A's



Chapter 1 Changes

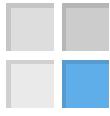
U09.9 Post COVID-19 condition, unspecified

- This code enables establishment of a link with COVID-19.
 - This code is not to be used in cases that are still presenting with active COVID-19. However, an exception is made in cases of re-infection with COVID-19, occurring with a condition related to prior COVID-19.
- Post-acute sequela of COVID-19
- **Code first the specific condition related to COVID-19 if known, such as:**
- chronic respiratory failure (J96.1-)
- loss of smell (R43.8)
- loss of taste (R43.8)
- multisystem inflammatory syndrome (M35.81)
- pulmonary embolism (I26.-)
- pulmonary fibrosis (J84.10)



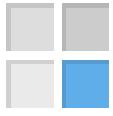
Chapter 2 Changes

- Chapter 2 now includes three new codes. Added are two codes to capture bilateral ovarian malignancies, allowing classification as malignant or secondary malignant neoplasm.
 - C56.3 Malignant neoplasm of bilateral ovaries
 - C79.63 Secondary malignant neoplasm of bilateral ovaries
- Another addition to the code set is
 - C84.7A *Anaplastic large cell lymphoma, ALK-negative, breast.*



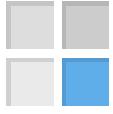
Chapter 3 changes

- The 2022 code set brings five new codes to this chapter. First, the novel codes under *D55.2 Anemia due to disorders of glycolytic enzymes* allow more specific options such as
 - *D55.21 Anemia due to pyruvate kinase deficiency* and
 - *D55.29 Anemia due to other disorders of glycolytic enzymes*.



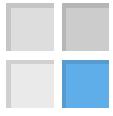
Chapter 3 changes

- Other changes include the addition of codes
 - D75.838 *Other thrombocytosis* (including secondary and reactive)
 - D75.839 *Thrombocytosis, unspecified* under new subcategory
 - D75.83- *Thrombocytosis*
- Also added is code D89.44 *Hereditary alpha tryptasemia*.
 - Mast cell activation syndromes (MCAS) encompass a group of conditions involving hyper-responsive mast cells.
 - There are three known types of MCAS-primary, secondary, and idiopathic



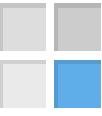
Chapter 4 changes

- The primary update to this chapter is the addition of one code under E75.24- *Niemann-Pick disease*:
E75.244 Niemann-Pick disease type A/B.



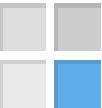
Chapter 5

- Changes in Chapter 5 include one new code for depression F32.*A Depression, unspecified* under revised category F32 *Depressive episode*.
- The 2022 code set also adds to this chapter F78.A1 *SYNGAP1-related intellectual disability* and F78.A9 *Other genetic related intellectual disability* under new subcategory F78.A- *Other genetic related intellectual disabilities*.



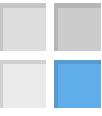
Chapter 6

- The updates to Chapter 6 relate primarily to the 10 new codes in these areas:
 - G04.82 Acute flaccid myelitis
 - G44.86 Cervicogenic headache
 - Added under the new subcategory G92.0 *Immune effector cell-associated neurotoxicity syndrome* are six codes to classify immune effector cell-associated neurotoxicity syndrome by grade.
- Two codes to distinguish other and unspecified toxic encephalopathy: G92.8 *Other toxic encephalopathy*; G92.9 *Unspecified toxic encephalopathy*.



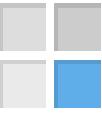
Chapter 9

- The addenda do not show any changes for Chapter 7: Diseases of the Eye and Adnexa or Chapter 8: Diseases of the Ear and Mastoid Process (H60-H95).
- The 2022 code set does add one code to Chapter 9: *I5A Non-ischemic myocardial injury (non-traumatic)*.
 - Code first the underlying cause, if known and applicable, such as:
 - acute kidney failure ([N17](#).-)
 - acute myocarditis ([I40](#).-)
 - cardiomyopathy ([I42](#).-)
 - chronic kidney disease (CKD) ([N18](#).-)
 - heart failure ([I50](#).-)
 - hypertensive urgency ([I16.0](#))
 - nonrheumatic aortic valve disorders ([I35](#).-)
 - paroxysmal tachycardia ([I47](#).-)
 - pulmonary embolism ([I26](#).-)
 - pulmonary hypertension ([I27.0](#), [I27.2](#).-)
 - sepsis ([A41](#).-)
 - takotsubo syndrome ([I51.81](#))
 - The remainder of the updates to this chapter involve additions and modifications to Excludes1/2 and Code first notes.



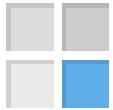
Chapter 11

- The addenda do not show any new codes for Chapter 10: Diseases of the respiratory system.
- Three new codes are added to Chapter 11 to classify esophageal diseases:
 - K22.81 Esophageal polyp
 - K22.82 Esophagogastric junction polyp
 - K22.89 Other specified disease of esophagus (hemorrhage of the esophagus NOS)
- Another notable change in this chapter is new subcategory K31.A- *Gastric intestinal metaplasia* and ten codes to capture gastric intestinal metaplasia.
- To determine the correct code among the new codes, you need to check for documentation of the location involved and the presence of dysplasia.



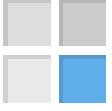
Chapter 12

- The update brings eight new codes to Chapter 12.
- There are two new subcategories for irritant contact dermatitis:
 - Under L24.A- *Irritant contact dermatitis due to friction or contact with body fluids*
 - [L24.A0](#) Irritant contact dermatitis due to friction or contact with body fluids, unspecified
 - [L24.A1](#) Irritant contact dermatitis due to saliva
 - [L24.A2](#) Irritant contact dermatitis due to **fecal, urinary or dual incontinence**
 - [L24.A9](#) Irritant contact dermatitis due **friction or contact with other specified body fluids**
 - Under L24.B- *Irritant contact dermatitis related to stoma or fistula,*
 - [L24.B0](#) Irritant contact dermatitis related to unspecified stoma or fistula
 - [L24.B1](#) Irritant contact dermatitis related to **digestive** stoma or fistula
 - [L24.B2](#) Irritant contact dermatitis related to **respiratory** stoma or fistula
 - [L24.B3](#) Irritant contact dermatitis related to **fecal or urinary** stoma or fistula



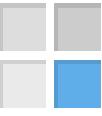
Chapter 13

- The numerous changes in Chapter 13 relate primarily to new codes in these areas:
- Three codes under subcategory M31.1- to allow reporting hematopoietic stem cell transplant-associated thrombotic microangiopathy.
 - The code set adds a Use Additional note after code M31.11, instructing you to also code for the specific organ dysfunction.
- Several codes under revised subcategory M35.0 *Sjögren syndrome* are also revised, and seven codes are added for identification of associated diseases or conditions.
- New subcategory M45.A *Non-radiographic axial spondyloarthritis* and ten codes which allow for classification based on the affected region of the spine. (occipito-atlanto-axial, cervical, cervicothoracic, thoracic, thourcolumbar, lumbar, lumbosacral, sacral and sacrogccoccygeal)
- Expansion of M54.5 *Low back pain*, with the addition of three codes:
 - M54.50 *Low back pain, unspecified*,
 - M54.51 *Vertebrogenic low back pain*, and
 - M54.59 *Other low back pain*.



Chapter 16

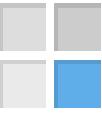
- The addenda do not show any changes for
 - Chapter 14: Diseases of the genitourinary system or
 - Chapter 15: Pregnancy, childbirth and the puerperium,
- Chapter 16 has nine new codes: one code for newborn affected by maternal group B Streptococcus colonization
 - P00.82 Newborn affected by (positive) maternal group B streptococcus (GBS) colonization



New codes Neonatal Screening

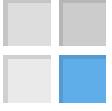
- Eight codes to capture specific abnormal findings on neonatal screening. P09 deleted (Abnormal findings on neonatal screening)

ICD-10 Code	Abnormal findings on neonatal screening for:
P09.1	inborn errors of metabolism
P09.2	Congenital endocrine disease
P09.3	Congenital hematologic disorders
P09.4	Cystic fibrosis
P09.5	Critical congenital heart disease
P09.6	Other abnormal findings on neonatal screening
P09.9	unspecified



Chapter 17

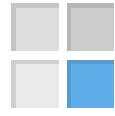
- Two minor revisions are the only changes noted in the addenda for Chapter 17 and include revising “Nephronophthisis” under code
- Q61.5 *Medullary cystic kidney*.
 - Nephronophthisis is a similar condition to medullary cystic kidney disease, with almost identical symptoms and kidney damage.
 - Age of onset is the distinguishing factor between these two conditions: **nephronophthisis** typically occurs before age [20](#) and **MCKD** occurs later into adulthood.



Chapter 18

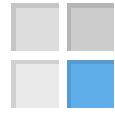
- The 2022 code set adds 14 codes to Chapter 18. Many coders have probably memorized R05 *Cough*, but R05 is not a reportable code in the 2022 code set.
- Instead, use one of the six new codes, which provide added specificity to cough.

ICD-10 Code	Description
R05.1	Acute cough
R05.2	Subacute cough
R05.3	Chronic cough
R05.4	Cough syncope
R05.8	Other specified cough
R05.9	Cough, unspecified



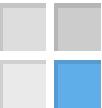
Chapter 18

- Updates to this chapter also include the addition of two codes to differentiate between nocturnal polyuria and polyuria not otherwise specified (NOS).
- Other additions include
- R45.88 *Nonsuicidal self-harm*
- R79.83 *Abnormal findings of blood amino-acid level.*



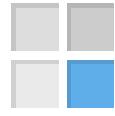
Chapter 18

- Another noteworthy change is the addition of the following four codes:
- R63.30 Feeding difficulties, unspecified
- R63.31 Pediatric feeding disorder, acute
- R63.32 Pediatric feeding disorder, chronic
- R63.39 Other feeding difficulties (feeding problem (elderly) (infant) NOS, picky eater)



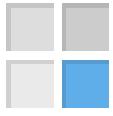
Chapter 19

- You'll find the longest list of changes in this chapter of ICD-10-CM 2022. The first big change is the addition of six codes to differentiate traumatic brain compression with or without herniation under new subcategory S06.A- *Traumatic brain compression and herniation*.
- The next major change in this chapter involves reporting for cannabis. Added under new subcategories T40.71 Cannabis (derivatives) and T40.72 Synthetic cannabinoids are 36 new codes to classify poisoning, adverse effect, and underdosing of cannabis and synthetic cannabinoids. These codes replace deleted subcategory T40.7X- Cannabis (derivatives) and all of the codes classified under it.
- The final update for this chapter adds three codes — specifying initial, subsequent, sequela — for complication of immune effector cellular therapy. Keep in mind that each code in T80.82- requires a 7th character (A, D, or S), so the five-character addition in the addenda translates to three new seven-character codes.



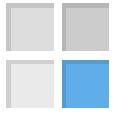
Chapter 20

- Chapter 20 includes three new codes for legal interventions involving other specified means to include an unspecified injured person.
- The codes in Y35.899- also require a 7th character (A, D, or S), so the six-character addition in the addenda translates to three new seven-character codes.



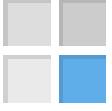
Chapter 21

- The 2022 code set introduced 19 new codes in Chapter 21 that relate primarily to updates focusing on these areas:
 - Z71.85 *Encounter for immunization safety counseling*
 - Z91.014 *Allergy to mammalian meats*
- Two codes to differentiate between history of suicidal behavior and non-suicidal self-harm
 - Z91.51 Personal history of suicidal behavior
 - Z91.52 Personal history of nonsuicidal self-harm

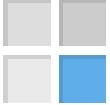


Chapter 21

- Under *Z92.8 Personal history of other medical treatment*, the 2022 code set adds four codes.
- Z92.85 Personal history of cellular therapy (new subcategory)
 - Z92.850 Personal history of Chimeric Antigen Receptor T-cell therapy
 - Z92.858 Personal history of other cellular therapy
 - Z92.859 Personal history of cellular therapy, unspecified
 - Z92.86 Personal history of gene therapy



SOCIAL DETERMINANTS OF HEALTH



Social Determinants of Health

- Required ICD-10 codes for ACO Requirements
- Essential new component of Medical Decision Making using the 2021 AMA's Complexity of Medical Decision Making Grid
- This element can change the complexity of a visit from a level 99213 to 99214
- Documentation in the note must support the SDoH codes
 - This may be found in the History section (Social) or HPI
 - Can also be added in the Assessment/Plan as appropriate

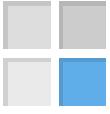
Table 2 – CPT E/M Office Revisions
Level of Medical Decision Making (MDM)

Revisions effective January 1, 2021:

Note: this content will not be included in the CPT 2020 code set release

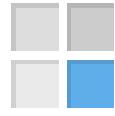


Code	Level of MDM (Based on 2 out of 3 Elements of MDM)	Number and Complexity of Problems Addressed	Elements of Medical Decision Making Amount and/or Complexity of Data to be Reviewed and Analyzed <i>*Each unique test, order, or document contributes to the combination of 2 or combination of 3 in Category 1 below.</i>	Risk of Complications and/or Morbidity or Mortality of Patient Management
99211	N/A	N/A	N/A	N/A
99202	Straightforward	Minimal • 1 self-limited or minor problem	Minimal or none	Minimal risk of morbidity from additional diagnostic testing or treatment
99212				
99203	Low	Low • 2 or more self-limited or minor problems; or • 1 stable chronic illness; or • 1 acute, uncomplicated illness or injury	Limited <i>(Must meet the requirements of at least 1 of the 2 categories)</i> Category 1: Tests and documents • Any combination of 2 from the following: • Review of prior external note(s) from each unique source*; • review of the result(s) of each unique test*; • ordering of each unique test* or Category 2: Assessment requiring an independent historian(s) <i>(For the categories of independent interpretation of tests and discussion of management or test interpretation, see moderate or high)</i>	Low risk of morbidity from additional diagnostic testing or treatment
99213				
99204	Moderate	Moderate • 1 or more chronic illnesses with exacerbation, progression, or side effects of treatment; or • 2 or more stable chronic illnesses; or • 1 undiagnosed new problem with uncertain prognosis; or • 1 acute illness with systemic symptoms; or • 1 acute complicated injury	Moderate <i>(Must meet the requirements of at least 1 out of 3 categories)</i> Category 1: Tests, documents, or independent historian(s) • Any combination of 3 from the following: • Review of prior external note(s) from each unique source*; • Review of the result(s) of each unique test*; • Ordering of each unique test*; • Assessment requiring an independent historian(s) or Category 2: Independent interpretation of tests • Independent interpretation of a test performed by another physician/other qualified health care professional (not separately reported); or Category 3: Discussion of management or test interpretation • Discussion of management or test interpretation with external physician/other qualified health care professional/appropriate source (not separately reported)	Moderate risk of morbidity from additional diagnostic testing or treatment Examples only: • Prescription drug management • Decision regarding minor surgery with identified patient or procedure risk factors • Decision regarding elective major surgery without identified patient or procedure risk factors <i>Diagnosis or treatment significantly limited by social determinants of health</i>
99214				
99205	High	High • 1 or more chronic illnesses with severe exacerbation, progression, or side effects of treatment; or • 1 acute or chronic illness or injury that poses a threat to life or bodily function	Extensive <i>(Must meet the requirements of at least 2 out of 3 categories)</i> Category 1: Tests, documents, or independent historian(s) • Any combination of 3 from the following: • Review of prior external note(s) from each unique source*; • Review of the result(s) of each unique test*; • Ordering of each unique test*; • Assessment requiring an independent historian(s) or Category 2: Independent interpretation of tests • Independent interpretation of a test performed by another physician/other qualified health care professional (not separately reported); or Category 3: Discussion of management or test interpretation • Discussion of management or test interpretation with external physician/other qualified health care professional/appropriate source (not separately reported)	High risk of morbidity from additional diagnostic testing or treatment Examples only: • Drug therapy requiring intensive monitoring for toxicity • Decision regarding elective major surgery with identified patient or procedure risk factors • Decision regarding emergency major surgery • Decision regarding hospitalization • Decision not to resuscitate or to de-escalate care because of poor prognosis
99215				



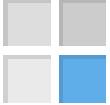
Social Determinants of Health

- New Codes
 - Z55.5 Less than High School Diploma
 - Z58.6 Inadequate drinking-water supply



Social Determinants of Health 2022 changes

- Z59.0- Homelessness
 - Z59.01 sheltered or Z59.02 unsheltered
- Z59.4 Lack of food to include
 - Z59.41 Food insecurity
- Z59.48 Other specified lack of adequate food
- Z59.8- Other Problems Related to Housing and Economic Circumstances providing three new codes
- Z59.81 Housing instability, housed and Z59.89 Other problems related to housing and economic circumstances to account for foreclosure on loan, isolated dwelling, and problems with creditors.

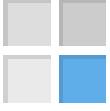


Social Determinants of Health

- Z55 Problems related to education and literacy

ICD-10 Code	Description
Z55.0	Illiteracy and low-level literacy
Z55.1	Schooling unavailable and unattainable
Z55.2	Failed school examinations
Z55.3	Underachievement in school
Z55.4	Educational maladjustment and discord with teachers and classmates
Z55.5	Less than a high school diploma
Z55.8	Other problems related to education and literacy
Z55.9	Problems related to education and literacy, unspecified
	Excludes: disorders of psychological development F80-F89

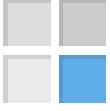




Social Determinants of Health

- Z56 Problems related to employment and unemployment

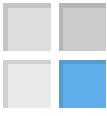
ICD-10 Code	Description
Z56.0	Unemployment, unspecified
Z56.1	Change of Job
Z56.2	Threat of job loss
Z56.3	Stressful work schedule
Z56.4	Discord with boss and workmates
Z56.5	Uncongenial work environment
Z56.6	Other physical and mental strain related to work



Social Determinants of Health

- Z56.8 Other problems related to employment

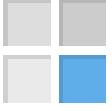
ICD-10 Code	Description
Z56.81	Sexual harassment on the job
Z56.82	Military deployment status: Individual (civilian or military) currently deployed in theater or in support of military war, peacekeeping and humanitarian operations
Z56.89	Other problems related to employment
Z56.9	Unspecified problems related to employment



Social Determinants of Health

- Z59.4 Lack of adequate food

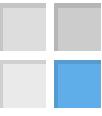
ICD-10 Code	Description
Z59.41	Food insecurity
Z59.48	Other specified lack of adequate food
T73.0-T3.0XXS	Deprivation of food
T73.0 – T30.XXS	Effects of hunger
Z72.4	Inappropriate diet or eating habits
E400-E46	Malnutrition
Z58.6	Inadequate drinking-water supply



Social Determinants of Health

Financial Resources and Housing

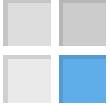
ICD-10 Code	Description
Z59.5	Extreme Poverty
Z59.6	Low Income
Z59.7	Insufficient social insurance and welfare support
Z59.811	Housing instability, housed, with risk of homelessness
Z59.812	Housing instability, housed, homelessness in past 12 months
Z59.819	Housing instability, housed unspecified
Z59.89	Other problems related to housing and economic circumstances
Z59.9	Problem related to housing and economic circumstances, unspecified



Social Determinants of Health

- Stress and Depression

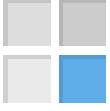
ICD-10 Code	Description
F43.0	Acute stress reaction
F43.11	Post-traumatic stress disorder; acute
F43.12	Post-traumatic stress disorder; chronic
R45.7	State of emotional shock and stress,unspecified
Z86.51	Personal history of combat and operational stress reaction
F32.3	Major depressive disorder, single episode, severe with psychotic features
F32.0	Major depressive disorder, single episode, mild
F32.1	Major depressive disorder, single episode, moderate
F32.2	Major depressive disorder, single episode, severe without psychotic features
F53.0	Postpartum depression



Social Determinants of Health

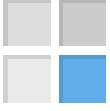
- Lack of social connection

ICD-10	Description
Z60.2	Problems related to living alone
Z60.0	Problems of adjustment to life-cycle transitions (empty nest, retirement, phase)
Z60.3	Acculturation difficulty (migration, social transplantation)
Z60.4	Social exclusion and rejection (personal characteristics such as physical appearance, illness or behavior)
Z60.5	Target of (perceived) adverse discrimination and persecution
Z60.8	Other problems related to social environment



Social Determinants of Health

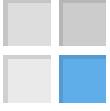
- Lack of Transportation
- There are no ICD-10 codes related to transportation, some advocates have suggested use of lack of funds
- Today, use Z59.6 low income
- Future code may include:
 - **Z59.641** Unable to pay for transportation for medical appointments or prescriptions
 - **Z59.642** Unable to pay for transportation unrelated to health care – work
 - **Z59.643** Unable to pay for transportation unrelated to health care – getting things needed for daily living



Social Determinants of Health

- Tobacco, Alcohol and Drug Abuse (partial list)

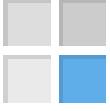
ICD-10 Code	Description
F17.2	Nicotine dependence, cigarettes
F12.150	Cannabis abuse with psychotic disorder with delusions
F11.13	Opioid abuse with withdrawal
F10.131	Alcohol abuse with withdrawal delirium
F14.13	Cocaine abuse, unspecified with withdrawal
Z72.0	Tobacco use



Social Determinants of Health

- Lack of Physical Activity, High risk sexual behavior

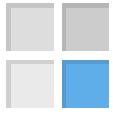
ICD-10 Code	Description
Z72.3	Lack of Physical exercise
Z72.51	High risk heterosexual behavior
Z72.52	High risk homosexual behavior
Z72.53	High risk bisexual behavior



Social Determinants of Health

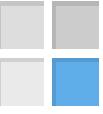
- Abuse and Domestic Violence

ICD-10 Code	Description
Z91.410	Personal history of adult physical and sexual abuse
T74.11, T76.11	Current adult physical abuse
T74.21, T76.11	Current adult sexual abuse
Z91.411	Personal history of adult psychological abuse
Z91.412	Personal history of adult neglect
Z91.42	Personal history of forced labor or sexual exploitation



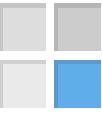
Takeaway

- Notes should support all “reportable” ICD-10 Codes
- **MEAT** – was the condition
 - Managed, Evaluated, Assessed, Treated?
- Remember to report all chronic conditions addressed
- Order of diagnoses- Primary reason listed first, etc
- Link diagnosis and procedure
- SDoH and risks that affected management



NEW CPT CODES

Discover new codes, including an expansion of chronic care management (CCM) services, that offer new revenue



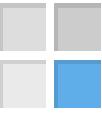
CPT Code Changes

- Nearly 250 new CPT codes will be implemented on January 1, 2022
 - 24 vaccine-specific codes for Coronavirus (SARS-CoV-2)
 - August 2021 2 new vaccine-administration codes for use in 3rd dose COVID-19 vaccines from Pfizer and Moderna
 - October 2021 8 new vaccine administration codes to report Pfizer trisucrose, Pfizer and Moderna Boosters



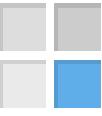
Therapeutic Remote Monitoring

CPT Code	Description
98975	Remote therapeutic monitoring (eg, respiratory system status, musculoskeletal system status, therapy adherence, therapy response); initial set-up and patient education on use of equipment
98976	Remote therapeutic monitoring (eg, respiratory system status, musculoskeletal system status, therapy adherence, therapy response); device(s) supply with scheduled (eg, daily) recording(s) and/or programmed alert(s) transmission to monitor respiratory system, each 30 days
98977	Remote therapeutic monitoring (eg, respiratory system status, musculoskeletal system status, therapy adherence, therapy response); device(s) supply with scheduled (eg, daily) recording(s) and/or programmed alert(s) transmission to monitor musculoskeletal system, each 30 days
98980	Remote therapeutic monitoring treatment management services, physician or other qualified health care professional time in a calendar month requiring at least one interactive communication with the patient or caregiver during the calendar month; first 20 minutes
98981	Remote therapeutic monitoring treatment management services, physician or other qualified health care professional time in a calendar month requiring at least one interactive communication with the patient or caregiver during the calendar month; each additional 20 minutes (List separately in addition to code for primary procedure)



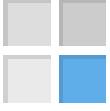
Principal Care Management-

CPT Code	Description
99424	Principal care management services, for a <u>single high-risk disease</u> , with the following required elements: one complex chronic condition expected to last at least 3 months, and that places the patient at significant risk of hospitalization, acute exacerbation/decompensation, functional decline, or death, the condition requires development, monitoring, or revision of disease-specific care plan, the condition requires frequent adjustments in the medication regimen and/or the management of the condition is unusually complex due to comorbidities, ongoing communication and care coordination between relevant practitioners furnishing care; first 30 <u>minutes provided personally by a physician or other qualified health care professional</u> , per calendar month
99425	each additional 30 minutes provided personally by a physician or other qualified health care professional, per calendar month (List separately in addition to code for primary procedure)
99426	Principal care management services, for a <u>single high-risk disease</u> , with the following required elements: one complex chronic condition expected to last at least 3 months, and that places the patient at significant risk of hospitalization, acute exacerbation/decompensation, functional decline, or death, the condition requires development, monitoring, or revision of disease-specific care plan, the condition requires frequent adjustments in the medication regimen and/or the management of the condition is unusually complex due to comorbidities, ongoing communication and care coordination between relevant practitioners furnishing care; first 30 minutes of <u>clinical staff time directed by physician or other qualified health care professional</u> , per calendar month.
99427	each additional 30 minutes



Chronic Care Management

CPT Code	Description
99439 (code added 1/1/21)	Chronic care management services with the following required elements: multiple (two or more) chronic conditions expected to last at least 12 months, or until the death of the patient, chronic conditions that place the patient at significant risk of death, acute exacerbation/decompensation, or functional decline, comprehensive care plan established, implemented, revised, or monitored; each additional 20 minutes of <u>clinical staff time directed by a physician or other qualified health care professional</u> , per calendar month (List separately in addition to code for primary procedure)
99437 New Code	Chronic care management services with the following required elements: multiple (two or more) chronic conditions expected to last at least 12 months, or until the death of the patient, chronic conditions that place the patient at significant risk of death, acute exacerbation/decompensation, or functional decline, comprehensive care plan established, implemented, revised, or monitored; each additional 30 minutes by a <u>physician or other qualified health care professional</u> , per calendar month (List separately in addition to code for primary procedure)



New Collaborative Care Codes

- 99492 CoCM, is used to bill the first 70 minutes in the first initial month of collaborative care.
- 99493 CoCM, is used to bill the first 60 minutes in any subsequent months of collaborative care.
- 99494 CoCM is used to bill each additional 30 minutes in any month. It can be used in conjunction with 99492 or 99493.
- G2214 CoCM, is used to bill for the first 30 minutes in the first month of care or any subsequent month.



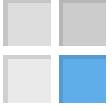
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About the Speaker

Nancy M Enos, FACMPE, CPMA, CPC-I, CEMC is an independent consultant with the MGMA Health Care Consulting Group and a principal of Enos Medical Coding. Mrs. Enos has 40 years of experience in the practice management field. Nancy was a practice manager for 18 years before she joined LighthouseMD in 1995 as the Director of Physician Services and Compliance Officer. In July 2008 Nancy established an independent consulting practice, Nancy Enos Medical Coding (www.nancyenoscoding.com)

As an Approved PMCC and ICD-10 Instructor by the American Academy of Professional Coders, Nancy provides coding certification courses, outsourced coding services, chart auditing, coding training and consultative services and seminars in CPT and ICD-10 Coding, Evaluation and Management coding and documentation, and Compliance Planning. Nancy frequently speaks on coding, compliance and reimbursement issues to audiences including National, State and Sectional MGMA conferences, and at hospitals in the provider community specializing in primary care and surgical specialties.

Nancy is a Fellow of the American College of Medical Practice Executives. She served as a College Forum Representative for the American College of Medical Practice Executives.



Disclosures

Enos Medical Coding does not provide legal advice. The information in this presentation is based on the coding guidelines in the Current Procedural Terminology (CPT) Manual published by the American Medical Association (AMA) and Evaluation and Management Coding Guidelines from the Centers for Medicare and Medicaid (CMS)

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