

Billing updates for 2024

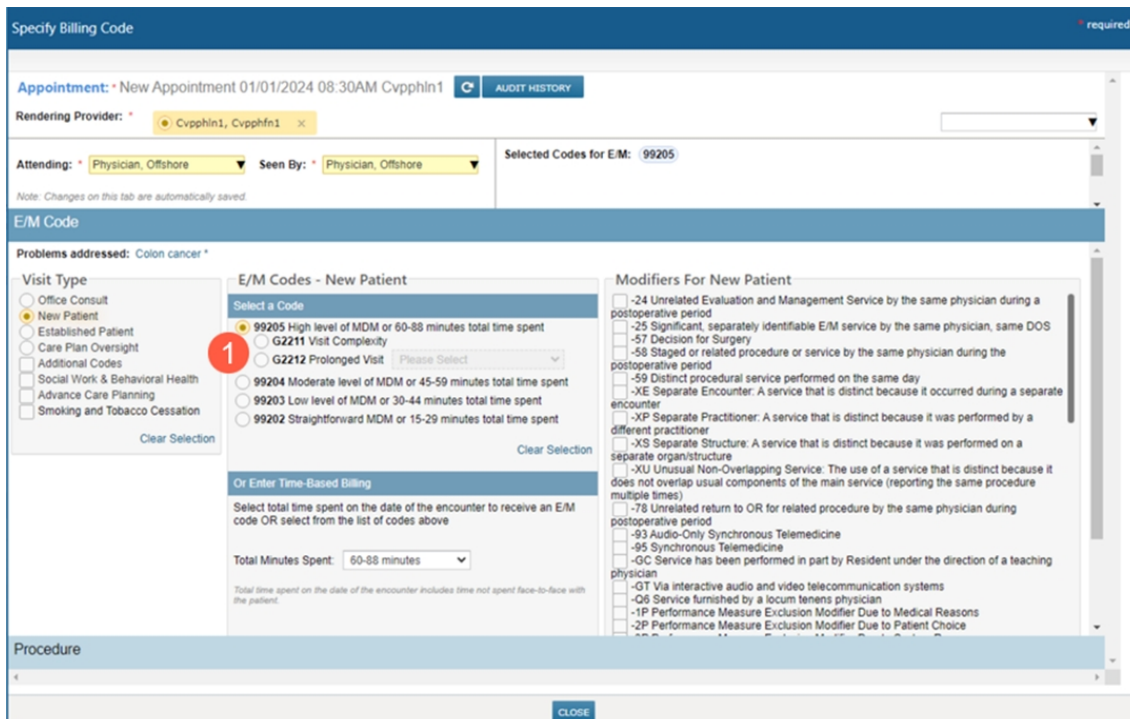
To support the updates to the CPT 2024 and the Medicare Final Rule, we have made several changes to the Billing Screen and Charge Capture in this release, which will be effective for appointments on or after January 1, 2024.

New Visit Complexity Code for Medicare

The new Visit Complexity code G2211 will be available for quick selection on New Patient and Established Patient E/M codes 99202-99205 and 99211-99215.

Once an E/M code has been selected, G2211 will appear as a sub-item below the selected code. When billing level 5 visits (99205 and 99205), G2211 will appear with the Prolonged Visit code (callout 1). For all other levels, the code will appear directly below (callout 2).

The Visit Complexity code can be used to bill Medicare for additional complexity on visits that do not use time-based billing.



Specify Billing Code
required

Appointment: • New Appointment 01/01/2024 01:30AM LS AUDIT HISTORY

Rendering Provider: • LS, Provider ▼

Attending: • Zzbowhall, Karin **Seen By:** • Zzbowhall, Karin **Selected Codes for E/M:** 99202 G2211

Note: Changes on this tab are automatically saved.

E/M Code

Problems addressed: Breast cancer, female * (C50.212);Breast cancer, female * (C50.412);Diabetes mellitus type 2 (disorder) * (C43.0);Melanoma * (C43.4)

Visit Type

Office Consult

New Patient

Established Patient

Care Plan Oversight

Additional Codes

Social Work & Behavioral Health

Advance Care Planning

Smoking and Tobacco Cessation

Clear Selection

E/M Codes - New Patient

Select a Code

99205 High level of MDM or 60 minutes total time spent

99204 Moderate level of MDM or 45 minutes total time spent

99203 Low level of MDM or 30 minutes total time spent

99202 Straightforward MDM or 15 minutes total time spent

2 G2211 Visit Complexity Clear Selection

Or Enter Time-Based Billing

Select total time spent on the date of the encounter to receive an E/M code OR select from the list of codes above

Total Minutes Spent: 15-29 minutes ▼

Total time spent on the date of the encounter includes time not spent face-to-face with the patient.

Modifiers For New Patient

-24 Unrelated Evaluation and Management Service by the same physician during a postoperative period

-25 Significant, separately identifiable E/M service by the same physician, same DOS

-57 Decision for Surgery

-58 Staged or related procedure or service by the same physician during the postoperative period

-59 Distinct procedural service performed on the same day

-XE Separate Encounter: A service that is distinct because it occurred during a separate encounter

-XP Separate Practitioner: A service that is distinct because it was performed by a different practitioner

-XS Separate Structure: A service that is distinct because it was performed on a separate organ/structure

-XU Unusual Non-Overlapping Service: The use of a service that is distinct because it does not overlap usual components of the main service (reporting the same procedure multiple times)

-78 Unrelated return to OR for related procedure by the same physician during postoperative period

-93 Audio-Only Synchronous Telemedicine

-95 Synchronous Telemedicine

-GC Service has been performed in part by Resident under the direction of a teaching physician

-GT Via interactive audio and video telecommunication systems

-Q6 Service furnished by a locum tenens physician

Procedure

CLOSE

New and Established Patient E/M Codes

To reflect the changes to New and Established Patient E/M codes in CPT 2024, the time ranges will no longer show in the code descriptions when the Practice Preference for AMA Time is on (callout 3).

Time-based billing has not changed, and the codes still represent the same time spent with the patient, but the descriptions have been updated on the screen to reflect the description changes in the code set.

Specify Billing Code * required

Appointment: * New Appointment 01/01/2024 10:30PM Cvpphln1 AUDIT HISTORY

Rendering Provider: * Cvpphln1, Cvpphfn1

Attending: * Physician, Offshore Seen By: * Physician, Offshore Selected Codes for EIM:

Note: Changes on this tab are automatically saved.

E/M Code

Problems addressed: Colon cancer *

Visit Type

- Office Consult
- New Patient
- Established Patient
- Care Plan Oversight
- Additional Codes
- Social Work & Behavioral Health
- Advance Care Planning
- Smoking and Tobacco Cessation

Clear Selection

E/M Codes - New Patient

Select a Code

- 99205 High level of MDM or 60 minutes total time spent
- 99204 Moderate level of MDM or 45 minutes total time spent
- 99203 Low level of MDM or 30 minutes total time spent
- 99202 Straightforward MDM or 15 minutes total time spent

Or Enter Time-Based Billing

Select total time spent on the date of the encounter to receive an E/M code OR select from the list of codes above

Total Minutes Spent: Please Select

Total time spent on the date of the encounter includes time not spent face-to-face with the patient.

Modifiers For New Patient

- 24 Unrelated Evaluation and Management Service by the same physician during a postoperative period
- 25 Significant, separately identifiable E/M service by the same physician, same DOS
- 57 Decision for Surgery
- 59 Staged or related procedure or service by the same physician during the postoperative period
- 59 Distinct procedural service performed on the same day
- XE Separate Encounter: A service that is distinct because it occurred during a separate encounter
- XP Separate Practitioner: A service that is distinct because it was performed by a different practitioner
- XS Separate Structure: A service that is distinct because it was performed on a separate organ/structure
- XU Unusual Non-Overlapping Service: The use of a service that is distinct because it does not overlap usual components of the main service (reporting the same procedure multiple times)
- 78 Unrelated return to OR for related procedure by the same physician during postoperative period
- 93 Audio-Only Synchronous Telemedicine
- 95 Synchronous Telemedicine
- GC Service has been performed in part by Resident under the direction of a teaching physician
- GT Via interactive audio and video telecommunication systems
- O6 Service furnished by a locum tenens physician
- 1P Performance Measure Exclusion Modifier Due to Medical Reasons
- 2P Performance Measure Exclusion Modifier Due to Patient Choice

Procedure

CLOSE