

## **Coding and Billing**

CPT® codes for Office and Other Outpatient Consultations (99241-99245) and Inpatient Consultations (99251-99255)

► Effective for Date of Service on or after January 1, 2010

In accordance with the new Medicare policy, outlined in the *Federal Register*, November 25, 2009, Final Rule for the Physician Fee Schedule, **ND Medicaid will no longer allow/reimburse physicians (MD/DO) or other qualified non-physician practitioners (NPPs) for consultation codes.**

Following Medicare's billing changes, providers are expected to bill the appropriate level *new or established* office and other outpatient E/M (99201-99215) in place of office and other outpatient consultations (99241-99245). Note: The new and established patient rules will continue to apply as per CPT® guidelines.

In the same respect, the first time a physician sees a patient for an initial evaluation in the inpatient hospital or the nursing facility he/she is expected to bill the appropriate level initial hospital care (99221-99223) or initial nursing facility care (99304-99306) in place of inpatient consultations (99251-99255).

The principal (admitting/attending) physician must append modifier **AI** (Principal Physician of Record) to the initial hospital care or initial nursing facility care code. There should only be one initial hospital or nursing facility care code appended with modifier **AI** per patient admission to either place of service.

Physicians who bill consultations (99241-99245 or 99251-99255) after January 1, 2010 will receive a denial indicating the ND Medicaid will not allow/reimburse this code. The provider may resubmit a claim with an appropriate code and may not bill the patient for a "consultation" service billed with 99241-99245 or 99251-99255.

In all cases, the physician must bill the level of service that describes the level of service provided and documented. All physicians are to follow CMS Evaluation and Management documentation guidelines available at:

[http://www.cms.hhs.gov/MLNEdWebGuide/25\\_EMDOC.asp](http://www.cms.hhs.gov/MLNEdWebGuide/25_EMDOC.asp)

Effective for dates of service July 1, 2010 and after, Medicaid services will receive a 6% inflationary increase, as appropriated by the 2009 Legislative Assembly.