

## 2013 CPT Codes – Evaluation & Management Services

Category	Code Range	New	Deleted	Revised	Total
EVALUATION & MANAGEMENT	99201 - 99499	7	0	82	40

\*Underlined words are new for 2013

\*Words with a ~~Strikethrough~~ are deleted for 2013

### New Codes

There are 7 new codes that are designed to better account for the work involved to manage patients with complex chronic conditions in newer models of care, such as ACOs, patient-centered homes, etc.

**99485** – Supervision by a control physician of interfacility transport care of the critically ill or critically injured pediatric patient, 24 months of age or younger, includes two-way communication with transport team before transport, at the referring facility and during the transport, including data interpretation and report; first 30 minutes.

**99486** - ; each additional 30 minutes (List separately in addition to code for primary procedure)

**99487** – Complex chronic care coordination services; first hour of clinical staff time directed by a physician or other qualified health care professional with no face-to-face visit, per calendar month.

**99488** – Complex chronic care coordination services; first hour of clinical staff time directed by a physician or other qualified health care professional with face-to-face visit, per calendar month.

**99489** – Complex chronic care coordination services; each additional 30 minutes of clinical staff time directed by a physician or other qualified health care professional, per calendar month (List separately in addition to code for primary procedure)

**99495** – Transitional Care Management Services with the following required elements: Communication (direct contact, telephone, electronic) with the patient and/or caregiver within 2 business days of discharge Medical decision making of at least moderate complexity during the services period Face-to-face visit, within 14 calendar days of discharge

**99496** – Transitional Care Management Services with the following required elements: Communication (direct contact, telephone, electronic) with the patient and/or caregiver within 2 business days of discharge Medical decision making of high complexity during the services period Face-to-face visit, within 7 calendar days of discharge

### Revised Codes

All revised E & M Codes removed the word “providers” and replaced with “other physicians” and “other qualified health care professionals”

- Example: Counseling and/or coordination of care with other physicians, other ~~providers~~ qualified health care professional, or agencies are provided consistent with the nature of the problem(s) and the patient’s and/or family’s needs.

- Usually, the presenting problem(s) are self-limited or minor. ~~Physicians typically spend~~ Typically, \_\_\_ minutes are spent face-to-face with the patient and/or family.

Codes 99234 – 99236 (Observation or Inpatient Hospital Care) - In addition to the above language, these codes added typical time spent at bedside and on the patient’s hospital floor or unit.

