

## Questions and Answers from Open Door Forum: Physicians- March 03, 2021

1. I have a question about the 2021 changes to the new and established E&M outpatient codes. If billing by medical decision-making and the provider is reviewing the results of say a basic metabolic panel that he had ordered and the patient had say two weeks prior to coming in for their visit so he's reviewing that BMP and at the conclusion of the visit he plans for the patient to come back in six months and he puts in a new order for another BMP would that be counted as both a review and order? I know they're the same CPT code but they are separate occurrences.
  - a. Yes I think that these questions about medical decision-making at this point are for the AMA. They have drafted the guidelines and we adopted those through rulemaking. And I don't think we can expound on them without further rulemaking and we would want to know what their intent was if that makes sense.
2. A question about the potential change for documentation guidelines as it relates to emergency physicians. The ED docs were not impacted by the changes developed by the AMA CPT and they're adopted by CMS. Is there an interest? Can you comment on where the agency is thinking about going as it relates to potential changes similar to what you've done with the office and outpatient codes for the emergency physicians? Thank you.
  - a. We know that the AMA has an E&M workgroup that is in the process of revising guidelines and re-surveying the other code sets. So I think at this point we are awaiting to see what the results of that process are.
3. Is there any date on when CMS plans to publish new transmittals?
  - a. New transmittals on any specific topic or just in general?
    - i. In general. The last ones were posted it appears January the 20th.
      1. It is my understanding that we are still under a moratorium. It is being reviewed but at this time we don't have a further update of the date when those will be provided.
4. This is more of a comment. It was extremely challenging to educate all of our providers on the new changes for those new and established outpatient E&M codes. We had to create training materials before the final rule was actually out, kept our fingers crossed that nothing was going to change in there. And it's not really a very effective way to do business and use our resources. I've been told that by the Nicoletta double AMC that the AMA is working on the inpatient codes, homecare codes and also nursing home codes. I would hope that this time, providers would get more time to plan to revise their training materials for providers other than the way it was carried out for the changes which are good changes and we're appreciative of them. We just wish it hadn't been such a harrowing experience and at the last minute requiring over 3000 docs to take this training.
  - a. That's helpful. The AMA does have a large volume of additional work on code sets coming through. And the way it works is that when the AMA sets an effective date for the CPT codes, we either adopt a code by those dates or the only alternative is to create G codes and to create sort of our own parallel coding system which carries its own burden as you probably know within itself. So we will certainly be cognizant of that as we move along and see what comes next from the AMA's workgroup but thank you and we hear you on that.