Evaluation and Management (E/M) Follow-Up Codes for Psychiatry

Every note must have a **Chief Complaint (CC)** stating a reason for the visit, e.g. scheduled visit, or problem often in patient's words

CPT Code	Time-Based: >50% Counseling and Coordination of Care** (no ptx add-on)	Complexity-Based—need to meet 2 of 3:		
		History **Elements:** severity; timing (eg, intermittent, increasing); quality (sad, down, forgetful); duration; context; modifying factors; associated signs/symptoms; (Location) **ROS:** Psychiatric; Constitutional (weight); GU (sexual fn, urinary); GI (constip, n/v/d); Neuro (headaches, tremor); Msclskel (pain); CV (tachy); Resp (dysp, snoring); Endo (thyroid); Skin/Breast (rash); Eyes (blurry vision); ENMT (tinnitus); Heme/Lymph; All/Imm. (Document pertinent positives, "otherwise negative.")	**Exam** **Psychiatric:** • mood/affect • speech • thought process • associations • abnormal/psychotic thoughts • judgment/insight • language • attention/concentration • orientation • recent/remote memory • fund of knowledge **Musculoskeletal:** • muscle strength/tone • gait/station **Constitutional:** • appearance • VS (3 of BP, rate/regularity, resp, temp, height, weight)	**Medical Decision-Making** **Problem Points:** self-limiting/minor **1** (max 2); established prob., stable/improved **1**; established prob., worse **2**; new* prob., no w/u other than poss. referral **3** (max 1); new* prob., additional w/u planned **4** **Data Points:** review and/or order labs **1**; decision to obtain records or hx from others **1**; obtaining hx from others, discussing case w/other provider during session **2** (* = new to you)
99212	10 (5-12)"	**HPI:** 1-3 elements, or status of 1-2 chronic conditions	1+ bullets	Any recommendation, e.g. rest
99213	15 (13-20)"	**HPI:** 1-3 elements, or status of 1-2 chronic conditions **ROS:** problem-pertinent, psychiatric	6+ bullets	• OTC, prescription drug management, or SI/HI evaluation, **and** • 2 problem points **or** 2 data points
99214	25 (21+)"	**HPI:** 4+ elements, or status of 3+ chronic conditions **ROS:** psychiatric plus 2 other systems **Past Medical, Family Medical, Social History:** 1 element	9+ bullets	• Prescription drug management or SI/HI evaluation, **and** • 3 problem points **or** 3 data points

**Documentation for CCC: (a) amount of face-to-face time (floor time for inpatient), (b) "Greater than 50% of time spent on counseling and coordination of care," (c) content of discussion, e.g. diagnosis/prognosis, test results, treatment options, risk reduction, education, adherence, etc.

Psychotherapy Codes

Time	30 (16-37)"	45 (38-52)"	60 (53+)"	Documentation: (a) name the covered problem you are treating, (b) what therapy you did, (c) plan [for pt before next session, for therapy next session]
Therapy alone	90832	90834	90837	
E/M add-on	+90833	+90836	+90838	Time spent on E/M does not count toward psychotherapy minutes

Diagnostic Evaluation Codes

Without Medical	90791	Documentation for psychotherapy: (a) target symptoms, (b) goal in behavioral terms, (c) how progress will be measured, (d) expectation: acute symptom improvement or chronic maintenance; (e) rationale for psychotherapy
With Medical	90792	