

**Pocket
Coding
Adviser**

Reimbursement for Telephone Care

Traditionally, medical care consisted of face-to-face encounters between physicians and patients. But today, physicians are finding themselves spending more and more time providing advice, treatment, and prescriptions over the telephone. Many physicians have implemented a policy to collect a fee for telephone care – and many health insurance plans have revised their policies and designated telephone care as a reimbursable service.

CPT Codes 99371-99373 were developed to report direct patient care by telephone or telephone management of a patient's care with other healthcare professionals. These codes should be used only for reporting physician services. Do not use them for calls a nurse can handle.

The CPT descriptors for telephone care include typical situations that may be addressed during the course of a call:

99371 (Simple or Brief): Used to report lab/test results, clarify or alter instructions, adjust therapy, or integrate new information into a plan of care

99372 (Intermediate): Used for detailed discussion of test results, advice and/or treatment of a new problem, discussion and evaluation of new information or a new plan of care

99373 (Lengthy or Complex): Used for counseling an anxious patient, a detailed discussion with family members regarding a seriously ill patient, or coordination of complex care delivered by multiple professionals working on different aspects of a patient's care

Documentation Guidelines

Telephone care should meet the requirements of a typical E/M visit. Document the reason for the call, the complexity of the problem, pertinent history and evaluation, assessment, treatment, and plan. Remember that the work components of telephone care are identical to those of a face-to-face visit, except for the actual hands-on exam. If appropriate, document time spent.

TIP

Telephone care that precipitates a face-to-face encounter within 24 hours may not be separately billable, but the work components of the telephone care, if documented, can be included when selecting the level of service for the E/M code at the office visit.

For detailed information on billing, coding, and reimbursement for telephone care or online encounters, visit www.doctorsdigest.net.

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Medical Memo & Coding Management

Date _____ [] F/U appt.
Patient's Name _____ [] Coding
Caller's Name _____ Time _____ [] Chart
Phone Number _____ [] AM [] PM
Chief Complaint _____
Assessment _____
Action [] Called into Pharmacy
[] Other _____

Type of Service

Telephone Call From:
[] Patient [] Hospital [] Other
[] NP/PA [] Doctor

99371-Simple
[] Report Results [] _____
99372

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