

# Time-Based Coding: A Healthicity Cheatsheet



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## Guidance and Definitions

### AMA 2020 E/M DEFINITION FOR TOTAL VISIT TIME:

- Total time on the date of the encounter (office or other outpatient services [99202-99205, 99212- 99215]): For coding purposes, time for these services is the total time on the date of the encounter. It includes both the face-to-face and non-face-to-face time personally spent by the physician and/or other qualified health care professional(s) on the day of the encounter (includes time in activities that require the physician or other qualified health care professional and does not include time in activities normally performed by clinical staff).
- Physician/other qualified health care professional time includes the following activities, when performed:
  - preparing to see the patient (eg, review of tests)
  - obtaining and/or reviewing separately obtained history
  - performing a medically appropriate examination and/or evaluation
  - counseling and educating the patient/ family/caregiver
  - ordering medications, tests, or procedures
- referring and communicating with other health care professionals (when not separately reported)
- documenting clinical information in the electronic or other health record
- independently interpreting results (not separately reported) and communicating results to the patient/ family/caregiver
- care coordination (not separately reported)

2021 OFFICE OR OTHER OUTPATIENT SERVICES			
NEW	TIME	ESTABLISHED	TIME
		99211	0 mins
99202	15-29 mins	99212	10-19 mins
99203	30-44 mins	99213	20-29 mins
99204	45-59 mins	99214	30-39 mins
99205	60-74 mins	99215	40-54 mins



## CPT® MID-POINT RULE\*:

- A unit of time is attained when the midpoint is passed
- Additional terms for the midpoint rule: Rounding Up, Halves, and 51% Rule.
- Applicable to: Codes without specific time guidelines or directions in the code descriptors.
- Not applicable to descriptors such as: Greater than 30 minutes, 5-10 minutes, each additional 30 minutes, etc.

Common codes that allow for the Mid-point include the following:

PREVENTIVE MEDICINE, INDIVIDUAL	
TIME	
99401	Approx. 15 min
99402	Approx. 30 min
99403	Approx. 45 min
99404	Approx. 60 min
PREVENTIVE MEDICINE COUNSELING, GROUP	
TIME	
99411	Approx. 30 min
99412	Approx. 60 min
ADVANCED CARE PLANNING	
TIME	
99497	First 30 mins
99498	Each add 30 mins

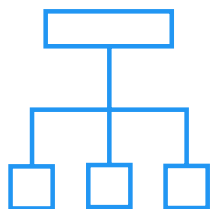
HEALTH AND BEHAVIOR ASSESSMENT/ INTERVENTION	
TIME	
96158	Initial 30 mins
96159	Each add. 15 mins
96164	Initial 30 mins
96165	Each add. 15 mins
96167	Initial 30 mins
96168	Each add. 15 mins
96170	Initial 30 mins
96171	Each add. 15 mins
PROLONGED SERVICES	
TIME	
99354	First hour
99355	Each add. 30 mins
99356	First hour
99357	Each add. 30 mins
PROLONGED SERVICE WITHOUT DIRECT PATIENT CONTACT	
TIME	
99358	First hour
99359	Each add. 30 mins

\*May not be recognized by Medicare and some other payers

PROLONGED CLINICAL STAFF SERVICES WITH PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL SUPERVISION	
TIME	
99415	First hour
99416	Each add. 30 mins
99417	Each 15 mins of total time
STANDBY SERVICES	
TIME	
99360	Each add. 30 mins
PSYCHIATRY	
PSYCHOTHERAPY	TIME
90832	30 mins
90833	30 mins with E/M
90834	45 mins
90836	45 mins with E/M
90837	60 mins
90838	60 mins with E/M
PSYCHOTHERAPY FOR CRISIS	
TIME	
90839	First 60 mins
90840	Each add. 30 mins
MEDICARE PREVENTIVE SERVICES	
TIME	
G0442	Alcohol screening, 15 min
G0443	Alcohol miss use, 15 min
G0444	Depression screening, 15 min
G0445	BH counseling, 30 min

**CMS GUIDANCE ON TIME FOR COUNSELING AND/OR COORDINATION OF CARE:**

- Effective, January 1, 2021, selection of level of Evaluation and Management Service using counseling and/or coordination of care excludes Office and Other Outpatient services.
- The duration of the visit is an ancillary factor and does not control the level of the service to be billed unless more than 50 percent of the face-to-face time (for noninpatient services) or more than 50 percent of the floor time (for inpatient services) is spent providing counseling or coordination of care as described in subsection C.



**Code categories which utilize the >50% rule**

OBSERVATION SERVICES				OBSERVATION OR INPATIENT HOSPITAL CARE	
INITIAL	TIME	SUBSEQUENT	TIME	TIME	
99218	30 mins	99224	15 mins	99234	40 mins
99219	50 mins	99225	25 mins	99235	50 mins
99220	70 mins	99226	35 mins	99236	55 mins
HOSPITAL INPATIENT SERVICES					
INITIAL	TIME	SUBSEQUENT	TIME		
99221	30 mins	99231	15 mins		
99222	50 mins	99232	25 mins		
99223	70 mins	99233	35 mins		
CONSULTATIONS					
OFFICE CONSULT	TIME	INSULT CONSULTATION	TIME		
99241	15 mins	99251	20 mins		
99242	30 mins	99252	40 mins		
99243	40 mins	99253	55 mins		
99244	60 mins	99254	80 mins		
99245	80 mins	99255	110 mins		



Code categories which utilize the >50% rule

NURSING FACILITY SERVICES					
INITIAL	TIME	SUBSEQUENT	TIME		
99304	25 mins	99307	10 mins		
99305	35 mins	99308	15 mins		
99306	45 mins	99309	25 mins		
		99310	60 mins		
HOME SERVICES					
NEW	TIME	ESTABLISHED	TIME		
99341	20 mins	99347	15 mins		
99342	30 mins	99348	25 mins		
99343	45 mins	99349	40 mins		
99344	60 mins	99350	60 mins		
99345	75 mins				
DOMICILIARY, REST HOME, OR CUSTODIAL CARE SERVICES					
NEW	TIME	ESTABLISHED	TIME	OTHER NURSING FACILITY SERVICES	TIME
99324	20 mins	99334	15 mins	99318	30 mins
99325	30 mins	99335	25 mins		
99326	45 mins	99336	40 mins		
99327	60 mins	99337	60 mins		
99328	75 mins				

 Did You Know?

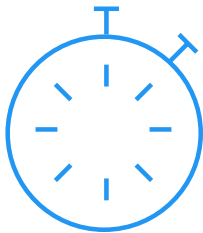
CMS Guidance on Rounding:

When an evaluation and management service is dominated by counseling and/or coordination of care (the counseling and/or coordination of care represents more than 50% of the total time with the patient) in a face-to-face encounter between the physician or qualified NPP and the patient in the office/ clinic or the floor time (in the scenario of an inpatient service), then the evaluation and management code is selected based on the typical/average time associated with the code levels. The time approximation must meet or exceed the specific CPT® code billed (determined by the typical/ average time associated with the evaluation and management code) and **should not be “rounded” to the next higher level.** In those evaluation and management services in which the code level is selected based on time, prolonged services may only be reported with the highest code level in that family of codes as the companion code.



**OTHER TIME-BASED E/M SERVICES\*:**

There are many other evaluation and management services in which the coding is based specific time parameters. The code description will include instructions such as "first x minutes", "up to" "x minutes or less", "more than x minutes", or "a time range". The documented time just fall within these parameters to bill for the service.



**HOSPITAL DISCHARGE DAY MANAGEMENT**

TIME	
99238	30 min or less
99239	More than 30 mins

**CRITICAL CARE SERVICES**

TIME	
99291	30-75 mins
99292	Each add. 30 mins

**NURSING FACILITY DISCHARGE SERVICES**

TIME	
99315	30 min or less
99316	More than 30 mins

**DOMICILIARY, REST HOME, OR HOME CARE PLAN OVERSIGHT**

TIME	
99339	15-29 mins
99340	30 mins or more

**CARE PLAN OVERSIGHT SERVICES**

TIME	
99374	15-29 mins
99375	30 mins or more
99377	15-29 mins
99378	30 mins or more
99379	15-29 mins
99380	30 mins or more

**TELEPHONE SERVICES**

TIME	
99441	5-10 mins
99442	11-20 mins
99443	21-30 mins

**NON-FACE-TO-FACE ON-LINE DIGITAL E/M SERVICE**

ESTABLISHED	TIME
99421	5-10 mins
99422	11-20 mins
99423	21 mins or more



**OTHER TIME-BASED E/M SERVICES\*:**

<b>MEDICAL TEAM CONFERENCE, DIRECT CONTACT WITH PATIENT AND/OR FAMILY</b>	
<b>TIME</b>	
99366	30 mins or more
99367	30 mins or more (physician)
99368	30 mins or more (non-physician qualified professional)
<b>INTERPROFESSIONAL TELEPHONE/ INTERNET/EHR CONSULTS</b>	
<b>TIME</b>	
99446	5-10 mins
99447	11-20 mins
99448	21-30 mins
99449	31 mins or more
99451	5 mins or more
99452	30 mins

<b>DIGITALLY STORED DATA SERVICES/ REMOTE PHYSIOLOGIC MONITORING</b>	
<b>TIME</b>	
99091	Minimum 30 mins
<b>PEDIATRIC CRITICAL CARE PATIENT TRANSPORT</b>	
<b>TIME</b>	
99466	First 30-74 mins
99467	Each add 30 mins
99485	First 30-74 mins
99486	Each add 30 mins
<b>CHRONIC CARE MANAGEMENT SERVICES</b>	
<b>TIME</b>	
99439	Each add. 20 mins
99490	First 20 mins
99491	At least 30 mins
<b>COMPLEX CHRONIC CARE MANAGEMENT</b>	
<b>TIME</b>	
99487	60 mins
99489	Each add. 30 mins

<b>REMOTE PHYSIOLOGIC MONITORING TREATMENT MANAGEMENT SERVICES</b>	
<b>TIME</b>	
99457	First 20 mins
99457	Each add. 20 mins
<b>PSYCHIATRIC COLLABORATIVE CARE MANAGEMENT SERVICES</b>	
<b>TIME</b>	
99492	First 70 mins (1st calendar month)
99493	First 60 mins (subsequent month)
99494	Each add 30 mins
<b>ADVANCED CARE PLANNING</b>	
<b>TIME</b>	
99497	First 30 mins
99498	Each add 30 mins
<b>GENERAL BEHAVIORAL HEALTH INTEGRATION CARE MANAGEMENT</b>	
<b>TIME</b>	
99484	At least 20 mins



**OTHER TIME-BASED E/M SERVICES\*:**

COUNSELING RISK FACTOR REDUCTION AND BEHAVIOR CHANGE INTERVENTION					
PREVENTIVE MEDICINE, INDIVIDUAL	TIME	BEHAVIOR CHANGE INTERVENTIONS, INDIVIDUAL	TIME	PREVENTIVE MEDICINE COUNSELING, GROUP	TIME
99401	Approx. 15 min	99406	3-10 mins	99411	Approx. 30 min
99402	Approx. 30 min	99407	More than 10 mins	99412	Approx. 30 min
99403	Approx. 30 min	99408	15-30 mins		
99404	Approx. 30 min	99409	More than 30 mins		
		99310	60 mins		

OTHER PSYCHOTHERAPY	
	TIME
90846	50 mins
90847	50 mins

BIOFEEDBACK SERVICES AND PROCEDURES	
	TIME
90912	Initial 15 mins
90913	Each add. 15 mins

OTHER PSYCHOTHERAPY SERVICES OR PROCEDURES	
	TIME
90875	30 mins
90876	45 mins

MEDICAL GENETICS AND COUNSELING	
	TIME
96040	Each 30 mins
ADAPTIVE BEHAVIOR ASSESSMENTS	
	TIME
97151	Each 15 mins
97152	Each 15 mins
ADAPTIVE BEHAVIOR TREATMENT	
	TIME
97153	Each 15 mins
97154	Each 15 mins
97155	Each 15 mins
97156	Each 15 mins
97157	Each 15 mins
97158	Each 15 mins
ASSESSMENT OFF APHASIA AND COGNITIVE PERFORMANCE TESTING	
	TIME
96105	Per hour
96125	Per hour





**OTHER TIME-BASED E/M SERVICES\*:**

DEVELOPMENTAL/BEHAVIORAL SCREENING AND TESTING	
TIME	
96112	First hour
96113	Each add. 30 mins
NEUROBEHAVIORAL STATUS EXAMINATION	
TIME	
96116	First hour
96121	Each add. hour
TESTING EVALUATION SERVICES	
TIME	
96130	First hour
96131	Each add. hour
96132	First hour
96133	Each add. hour

TEST ADMINISTRATION AND SCORING	
TIME	
96136	First 30 mins
96137	Each add. 30 mins
96138	First 30 mins
96139	Each add. 30 mins
HEALTH AND BEHAVIOR ASSESSMENT/ INTERVENTION	
TIME	
96158	Initial 30 mins
96159	Each add. 15 mins
96164	Initial 30 mins
96165	Each add. 15 mins
96167	Initial 30 mins
96168	Each add. 15 mins
96170	Initial 30 mins
96171	Each add. 15 mins

\*Specific payer guidelines may vary

**SERVICES NOT CODED BASED ON TIME:**

- Observation Care Discharge Services
- Emergency Department Services
- Preventive Medicine Services New/ Established
- On-Line Medical Evaluation
- Digitally Stored Data Services/Remote Physiologic Monitoring
- Basic life and/or Disability Evaluation Services
- Work related or medical disability Evaluation Services
- Newborn Care Services
- Delivery/Birthing Room Attendance and Resuscitation Services
- Inpatient Neonatal and Pediatric Critical Care Services
- Initial and Continuing Intensive Care Services
- Transitional Care Management Services

**REFERENCES:**

<https://www.ama-assn.org/system/files/2019-06/cpt-office-prolonged-svs-code-changes.pdf>

<https://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/downloads/r178cp.pdf>

<https://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/downloads/r178cp.pdf>



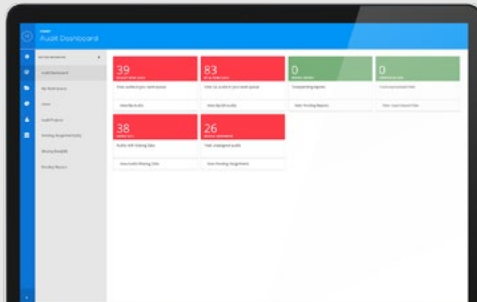
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Laura Brink, RHIT, CRC began her career as an outpatient medical coder and auditor. Following her work in outpatient services, she moved to specializing in HCC Risk Adjustment performing provider and coder auditing with experience working in multiple models such as HCC, RxHCC, ACO, and QHP. Additionally, she assisted in provider education and training to ensure accurate risk scores utilizing query processes.

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