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2021 Medical Decision Making for Outpatient E/M Codes

MEMBER TOOL - NOVEMBER 10, 2020

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Veronica Bradley CPC,
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Getting paid for some of the most routine outpatient office visits becomes a new challenge on Jan. 1, 2021, when guideline and code descriptor changes for E/M services — previously announced by the American Medical Association (AMA) and the Centers for Medicare & Medicaid Services (CMS) — take effect.

Specifically, office or other outpatient E/M codes 99202 through 99215 are being updated along with the elimination of code 99201 (due to low utilization).

Article: 2021 E/M changes explained [3. Preparing Your Practice for 2021 E/M Changes](#)

Most importantly, the methods of selecting code levels via medical decision making (MDM) will change along with the codes. To help make sense of this significant update for these codes, MGMA has assembled a downloadable tool to outline:

- The level(s) of each E/M code
- The time elements for each code
- Details on the number and complexity of problems addressed to help establish MDM
- The three categories addressing amount and/or complexity of data to review and analyze

- Risk levels for complications and/or morbidity or mortality of patient management.

Download: 2021 Medical Decision Making for Outpatient E/M Codes (PDF)

4. Medical Decision Making for Outpatient E/M Codes

Additional resources

- "Preparing your practice for 2021 E/M changes" (*MGMA Connection*)
- "ICD-10-CM updates for 2021, effective Oct. 1, 2020" (MGMA Insights)
- 2021 Physician E/M Fee Schedule Analyzer Tool (Non-facility) [MGMA member tool]
- AMA code and guideline changes for outpatient E/M visits (PDF)

LEARN MORE

- MGMA Consulting — Get an organizational tune-up with the help of our MGMA Consultants.
- MGMA Chart Audit Services — Our team of coders employs more than 35 years of institutional knowledge of coding to create personalized experiences that not only teach but lead your team through practices of establishing accurate coding.



FREE REPORT

OPTIMIZING ADVANCED PRACTICE PROVIDERS

Optimizing Advanced Practice Providers in Healthcare, an MGMA Research & Analysis report, focuses on the projected physician shortage and the vital role of APPs, including: Guidelines and regulations for using APPs; expert advice for compensation; specialty-specific insights and tips; and details on state-by-state rules.

19 pages. PDF. Free to all.

ABOUT THE AUTHOR



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Veronica Bradley, CPC, CPMA, is a Senior Industry Advisor with MGMA and is CPC and CPMA certified. She has over 20 years' experience in medical coding and auditing in various specialties. She is also well-versed hierarchical condition category and risk adjustment coding. Other areas of expertise include evaluation and management, procedural coding, Medicare reimbursement, and other critical factors in coding and auditing. Veronica has worked in private practice, group practices, academic school of medicine and hospitals. She focuses on educating based coding guidelines and code capture accuracy for all medical practice staff and believes coders must build rapport with healthcare providers to ensure healthy communication as necessary in the charge capture process.

Veronica received a bachelor's degree from Regis University in Denver, Colorado in Health Information Management with a minor in Healthcare Administration. In her free time, Veronica appreciates spending time with her family enjoying the beautiful Colorado scenery.
