November 2013

(Revised January 2014)

Eight new E&M CPT codes have been added to the CYS MD ED. Effective immediately.

Established Patient Custodial Care E/M Codes (99334-99337)

- ➤ Use only for E/M services provided to patients residing in nursing homes or other locations not considered the client's private residence.
- There is no need to use the **prolonged visit codes** with these E & M codes
- Document the medical necessity for this intervention
- > Include the illness or injury that makes them homebound or if placed in group home by the court.
- **Established** patient means any clinician seeing the patient in last 3 years
- Special Note: For Custodial Care E/M Codes, the Home Location will likely be "Children or Youth Group Home." If the location happened to be at the youth's private residence, then you would select from the Home Visit E/M Codes. Notice that both Home Visit and Custodial Care E/M Codes are not used for any inpatient facility or hospital.

Suggested time frames

- o **99334-Typical time** for face to face is approximately (1 20 minutes.)
- o **99335 Typical time** for face to face is approximately **(21-32 minutes).**
- o 99336 Typical time for face to face is approximately (33 to 50 minutes).
- o 99337 Typical time for face to face is approximately (over 51 minutes).

Established Patient Home Visit E/M Codes (99347-99350)

- > Use only for E/M services provided to patients residing **in their own private residence**; not for other types of facilities
- Document the medical necessity for this intervention
- > Include the illness or injury that **makes them homebound**
- **Established** patient means any clinician seeing the patient in last 3 years

Suggested time frames

- o 99347-Typical time for face to face is approximately (1 to 20 minutes.)
- o **99348 Typical time** for face to face is approximately **(21 to 32 minutes).**
- o **99349 Typical time** for face to face is approximately **(33 to 50 minutes)**.
- o **99350 Typical time** for face to face is approximately (over 51 minutes).

Reminders regarding Home Visit E/M Codes

- E/M Codes (99347-99350) **APPLY ONLY** to E/M services furnished to a patient residing in **his or her own private residence** and not any type of facility, according to the Medicare Internet Only Manual (IOM, Publication 100-4, Chapter 12, Section 30.6.14). **Remember, a nursing home, rest home or domiciliary do not count as a patients private residence.**
- > To be considered homebound, the patient **does not have to be bedridden** but must have an illness or injury that makes it difficult to leave the home **without supportive devices or another person's help**. The condition of these patients should be such that there exists a normal inability to leave home and, consequently, leaving his or her home **would require a taxing effort.** If the patient does in fact leave the home, the patient may nevertheless be considered homebound if the absences from home are infrequent or for periods of relatively short duration.
- > The home visits should be for established patient. Place of Service (POS) is not a factor when determining new vs. established. If the provider or anyone in his clinic in the same specialty saw the patient anywhere in the last 3 years, then it is considered established.