

2021 Auditor's Worksheet for Outpatient/Office E/M Services

Provider Name & ID: _____

Pt. Name: _____

D.O.S. _____ **Code Billed:** _____ **Auditor's Code:** _____

Chief Complaint: _____

(Nature and severity of presenting problem)

Medically appropriate history and exam documented? **Yes** **No**

Time (Time may include any of the following (when not reported separately)):

• Preparing to see the patient such as reviewing the pt.'s record, review of tests, etc.	• Obtaining and/or reviewing separately obtained history
• Performing a medically appropriate history and examination	• Counseling and educating the patient, family, and/or caregiver
• Ordering prescription medications, tests, or procedures	• Referring and communicating with other health care providers when not separately reported during the visit
• Documenting clinical information in the electronic or other health record	• Independently interpreting results when not separately reported
• Communicating results to the patient/family/caregiver	• Coordinating the care of the patient when not separately reported

Yes **No** **Face-to-face visit**

Yes **No** **Time was documented for this encounter**

_____ **minutes** **Total amount of time documented**

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Circle the Level of Service Based on Total Time Per Documentation

New Patient CPT Code	Total Time Spent on this DOS	Prolonged Provider Time
99202	15-29 Minutes	Max out time to 99205 before adding Prolonged Time
99203	30-44 Minutes	
99204	45-59 Minutes	
99205	60-74 Minutes	99XXX per 15 minutes beyond 75 minutes

Established Patient CPT Code	Total Time Spent on this DOS	Prolonged Provider Time
99212	10-19 Minutes	Max out time to 99215 before adding Prolonged Time
99213	20-29 Minutes	
99214	30-39 Minutes	
99215	40-54 Minutes	99XXX per 15 minutes beyond 55 minutes

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To qualify for a particular level of MDM, two of the three elements for that level of MDM must be met or exceeded

Code	Level of MDM (Based on 2 of 3 Elements of MDM)	Number and Complexity of Problems Addressed	Elements of Medical Decision Making Amount and/or Complexity of Data to be Reviewed and Analyzed <i>*Each unique test, order, or document contributes to the combination of 2 or combination of 3 in Category 1 below</i>	Risk of Complications and/or Morbidity or Mortality of Patient Management
99211	N/A	N/A	N/A	N/A
99202 99212	Straightforward	Minimal <ul style="list-style-type: none"> • 1 self-limited or minor problem 	Minimal or none	Minimal risk of morbidity from additional diagnostic testing or treatment <i>Examples only:</i> <ul style="list-style-type: none"> • Rest • Superficial dressings
99203 99213	Low	Low <ul style="list-style-type: none"> • 2 or more self-limited or minor problems; or • 1 stable chronic illness; or • 1 acute, uncomplicated illness or injury 	Limited <i>(Must meet the requirements of at least 1 of 2 categories)</i> Category 1: Tests and documents Any combination of 2 of the following: <ul style="list-style-type: none"> • Review of prior external notes(s) from each unique source*; • review of the result(s) of each unique test*; • ordering of each unique test* or Category 2: Assessment requiring an independent historian(s) <i>(For the categories of independent interpretation of tests and discussion of management or test interpretation, see moderate or high)</i>	Low risk of morbidity from additional diagnostic testing or treatment <i>Examples only:</i> <ul style="list-style-type: none"> • Over the counter drugs • Physical Therapy • Minor surgery with no identified risk factors • IV fluids without additives
99204 99214	Moderate	Moderate <ul style="list-style-type: none"> • 1 or more chronic illnesses with exacerbation, progression, or side effects of treatment; or • 2 or more stable chronic illnesses; or • 1 undiagnosed new problem with uncertain prognosis; or • 1 acute illness with systemic symptoms; or • 1 acute complicated injury 	Moderate <i>(Must meet the requirements of at least 1 out of 3 categories)</i> Category 1: Tests, documents, or independent historian(s) <ul style="list-style-type: none"> • Any combination of 3 from the following: • Review of prior external note(s) from each unique source*; • Review of the result(s) of each unique test*; • Ordering of each unique test*; • Assessment requiring an independent historian(s) or Category 2: Independent interpretation of tests <ul style="list-style-type: none"> • Independent interpretation of a test performed by another physician/other qualified health care professional (not separately reported); or Category 3: Discussion of management or test interpretation <ul style="list-style-type: none"> • Discussion of management or test interpretation with external physician/other qualified health care professional/appropriate 	Moderate risk of morbidity from additional diagnostic testing or treatment <i>Examples only:</i> <ul style="list-style-type: none"> • Prescription drug management • Decision regarding minor surgery with identified patient or procedure risk factors • Decision regarding elective major surgery without identified patient or procedure risk factors • Diagnosis or treatment significantly limited by social determinants of health
99205 99215	High	High <ul style="list-style-type: none"> • 1 or more chronic illnesses with severe exacerbation, progression, or side effects of treatment; or • 1 acute or chronic illness or injury that poses a threat to life or bodily function 	Extensive <i>(Must meet the requirements of at least 2 out of 3 categories)</i> Category 1: Tests, documents, or independent historian(s) <ul style="list-style-type: none"> • Any combination of 3 from the following: • Review of prior external note(s) from each unique source*; • Review of the result(s) of each unique test*; • Ordering of each unique test*; • Assessment requiring an independent historian(s) or Category 2: Independent interpretation of tests <ul style="list-style-type: none"> • Independent interpretation of a test performed by another physician/other qualified health care professional (not separately reported); or Category 3: Discussion of management or test interpretation <ul style="list-style-type: none"> • Discussion of management or test interpretation with external physician/other qualified health care professional/appropriate source (not separately reported) 	High risk of morbidity from additional diagnostic testing or treatment <i>Examples only:</i> <ul style="list-style-type: none"> • Drug therapy requiring intensive monitoring for toxicity • Decision regarding elective major surgery with identified patient or procedure risk factors • Decision regarding emergency major surgery • Decision regarding hospitalization • Decision not to resuscitate or to de-escalate care because of poor prognosis