

ENOS Medical Coding

Facility Reference Sheet

		CPT Guidelines		CMS Guidelines	
Hospital Initial		MDM	Time		
99221	Hospital Initial Visit	SF/ Low	40	Time on date of visit only 105 min to add G0316	
99222	Hospital Initial Visit	Moderate	55		
99223	Hospital Initial Visit	High	75		
Hospital Subsequent		MDM	Time		
99231	Hospital Subsequent Visit	SF/Low	25	80 min to add G0316	
99232	Hospital Subsequent Visit	Moderate	35		
99233	Hospital Subsequent Visit	High	50		
Hospital Discharge		MDM	Time		
99238	Discharge under 30 minutes		> 30	Do not add G0316	
99239	Discharge over 30 minutes		< 30		
Prolonged Inpatient (initial and subsequent)					
99418	Prolonged Services (non Medicare)		15	G0316	
**Do not report 99418 on the same date as 99358, 99359, 99415, 99416.					
	Prolonged Services- Medicare. Do not report for less than 15 minutes		15	start 95 min. Initial, 85 min. subsequent	1 day before/date of visit/+ 3 days after
Hospital Admission/Discharge		MDM	Time	CMS	
99234	Admit/Discharge same day	SF/Low	45	125 min date of visit to 3 days after add G0316	
99235	Admit/Discharge same day	Moderate	70		
99236	Admit/Discharge same day	High	85		
Critical Care		Less than 30 minutes do not report			
Document 1) critical status 2) time "in" and "out" 3) Physician's personal attendance					
99291	First 30-74 minutes		30-74	104 minutes	
99292	each additional 30 minutes		30		
Inpatient Consultation		MDM	Time	CMS	
99252	Initial inpt consult	Straightforward	35	Not covered, report with appropriate level of service and site code range	
99253	Initial inpt consult	Low	45		
99254	Initial inpt consult	Moderate	60		
99255	Initial inpt consult	High	80		
CPT Prolonged Services (with patient direct patient contact)				CMS	Time
99418	Inpt and Observation	add on to base code			15
99417	Outpt Prolonged Service	add on to base code			15
Prolonged Services Inpatient (without patient contact)- Document time (diffent date)					
99358	Inpt. Prolonged Phys. Svc. 1st hr	add on to base code			60
99359	Each Additional 30 minutes	1 unit each 30 min			30
Modifier 25	Significant, separately identifiable service same provider/ same day with hospital admission				
Qualifying Activities for Time					
<ul style="list-style-type: none"> •Preparing to see the patient (e.g., 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 •Care coordination (not separately reported) 					
Time Statement: Each time-based encounter must be supported by a time statement specifying the amount of time spent on the date of the encounter, on qualifying activities					

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		CPT Guidelines		CMS Guidelines
Nursing Facility Initial		MDM	Time	
99304	SNF Initial Visit	SF/ Low	25	Time on date of visit only
99305	SNF Initial Visit	Moderate	35	
99306	SNF Initial Visit	High	45	
99418	Prolonged Service		60	
Nursing Facility Subsequent		MDM	Time	95 minutes to add G0317
99307	SNF Subsequent Visit	SF	10	85 minutes to add G0317
99308	SNF Subsequent Visit	Low	15	
99309	SNF Subsequent Visit	Moderate	30	
99310	SNF Subsequent Visit	High	45	
99418	Prolonged Service		60	
Nursing Facility Discharge		MDM	Time	
99315	Discharge under 30 minutes		> 30	Do not add G0317
99316	Discharge over 30 minutes		< 30	
		CPT Guidelines		CMS Guidelines
Home Visit New		MDM	Time	CMS
99341	Home Visit New	Straightforward	15	3 days before visit + date of visit + 7 days after
99342	Home Visit New	Low	30	
99344	Home Visit New	Moderate	60	
99345	Home Visit New	High	75	
99417	Prolonged Service		90	
Home Visit Established		MDM	Time	CMS
99347	Home Visit Established	Straightforward	20	3 days before visit + date of visit + 7 days after
99348	Home Visit Established	Low	30	
99349	Home Visit Established	Moderate	40	
99350	Home Visit Established	High	60	
99417	Prolonged Service		75	110 minutes to add G0318
Qualifying Activities for Time				
<ul style="list-style-type: none"> •Preparing to see the patient (e.g., 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 •Care coordination (not separately reported) 				
Time Statement: Each time-based encounter must be supported by a time statement specifying the amount of time spent on the date of the encounter, on qualifying activities				

CPT / HCPCS	2023 Long Description
99418	Prolonged inpatient or observation evaluation and management service(s) time with or without direct patient contact beyond the required time of the primary service when the primary service level has been selected using total time, each 15 minutes of total time (List separately in addition to the code of the inpatient and observation Evaluation and Management service)
G0316	Prolonged hospital inpatient or observation care evaluation and management service(s) beyond the total time for the primary service (when the primary service has been selected using time on the date of the primary service); each additional 15 minutes by the physician or qualified healthcare professional, with or without direct patient contact (list separately in addition to cpt codes 99223, 99233, and 99236 for hospital inpatient or observation care evaluation and management services). (do not report g0316 on the same date of service as other prolonged services for evaluation and management 99358, 99359, 99418, 99415, 99416). (do not report g0316 for any time unit less than 15 minutes)
G0317	Prolonged nursing facility evaluation and management service(s) beyond the total time for the primary service (when the primary service has been selected using time on the date of the primary service); each additional 15 minutes by the physician or qualified healthcare professional, with or without direct patient contact (list separately in addition to cpt codes 99306, 99310 for nursing facility evaluation and management services). (do not report g0317 on the same date of service as other prolonged services for evaluation and management 99358, 99359, 99418). (do not report g0317 for any time unit less than 15 minutes)
G0318	Prolonged home or residence evaluation and management service(s) beyond the total time for the primary service (when the primary service has been selected using time on the date of the primary service); each additional 15 minutes by the physician or qualified healthcare professional, with or without direct patient contact (list separately in addition to cpt codes 99345, 99350 for home or residence evaluation and management services). (do not report g0318 on the same date of service as other prolonged services for evaluation and management 99358, 99359, 99417). (do not report g0318 for any time unit less than 15 minutes)