

As Time Goes By

(Or, how we tell time in physician practices)

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Recorded September 7, 2022

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CPT: how do we tell time?

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CPT time rule

- *“A unit of time is attained when the mid-point is passed. For example, an hour is attained when 31 minutes have elapsed (more than midway between zero and sixty minutes). A second hour is attained when a total of 91 minutes has elapsed.”* CPT Professional Edition, 2022, p xviii



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Time flies for these services

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Psychotherapy

30 minutes of psychotherapy:
range is 16–38 minutes

Physical therapy

Services with 15 minute increments, time
must be > 7.5 minutes (8 minutes)



Critical care (per CPT*)

First hour is >30 minutes until 74 minutes
Additional add-on 30 minutes is 75 minutes–104 minutes

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What other codes follow this rule?

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- Advance care planning, non-face-to-face prolonged care
- Some neuropsych testing codes
 - 96116 Neurobehavioral status exam, first hour

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But, not all codes

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- Moderate sedation: a law unto itself
 - 99151 Moderate sedation, initial 15 minutes
 - CPT says use for 10-22 minutes
 - Doesn't follow the CPT unit of time rule, doesn't require the full 15 minutes

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Can't beat the clock here: E/M services

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- If using time for office visits, hospital services, home and nursing facility services, use the typical time listed in the code descriptor
 - The entire typical time must be met
- 99213** When using time for code selection, 20-29 minutes of total time is spent on the date of the encounter
- In 2022: 99232** Typically, 25 minutes are spent at the bedside and on the patient's hospital floor or unit
- In 2023: 99232** When using total time on the date of the encounter for code selection, 35 minutes must be met or exceeded

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Can't beat the clock here: full time in descriptor

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- Certain CPT codes have editorial comments after the the code
- Indicates that the full time is required (doesn't use the CPT time rule)
- Includes care management, remote monitoring

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Can't beat the clock here: full time in descriptor

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- *(Do not report 99457 for services of less than 20 minutes)*
- *(Do not report 99458 for services of less than an additional increment of 20 minutes)*
- *(Principal care management services of less than 30 minutes duration in a calendar month are not reported separately)*
- *(Do not report 99489 for care management services of less than 30 minutes)*
- *(Do not report 99453 for monitoring of less than 16 days)*
- *(Do not report 99474 more than once in a calendar month)*

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And....time and CPT® codes

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- **Some codes have time ranges:**
 - 99441 Telephone E/M....*5-10 minutes*
 - 99446 Interprofessional internet consult....*5-10 minutes*
- **Some codes measure time in a calendar month, some in a 30 day period:**
 - Code 99091: “once in a 30-day period”
 - CCM codes “time in a calendar month”

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Critical care per CPT

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Total Duration of Critical Care	Code(s)
Less than 30 minutes	99232 or 99233
30-74 minutes	99291 x 1
75-104 minutes	99291 x 1 and 99292 x 1
105-134 minutes	99291 x 1 and 99292 x 2
135-164 minutes	99291 x 1 and 99292 x 3
165-194 minutes	99291 x 1 and 99292 x 4

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Critical care: CMS “clarification”

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“We intended to state that CPT® code 99292 could be billed after 104, not 75, or more cumulative total minutes were spent providing critical care. As correctly stated elsewhere in the CY 2022 PFS final rule (regarding critical care furnished by single physicians at 86 FR 65160, and regarding concurrent care furnished by multiple practitioners in the same group and the same specialty to the same patient at 86 FR 65162), our policy is that CPT® code 99291 is reportable for the first 30-74 minutes of critical care services furnished to a patient on a given date. CPT® code 99292 is reportable for additional, complete 30-minute time increments furnished to the same patient (74 + 30 = 104 minutes).” 2023 Proposed Rule page 351

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Critical care: only time will tell

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Will CMS go through with this in the 2023 Final Rule to be released Nov 2022?

- CMS is not using the chart in the CPT® book for critical care
- CMS using unit of time rule for the first hour of critical care
- CMS **proposing** not to use the unit of time rule for add-on code 99292 (full 30 minutes must be met)

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Prolonged services

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- Starting in 2021, CPT® and CMS took different paths
- CMS developed a HCPCS code and assigned a status indicator of Invalid to the CPT® code



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Prolonged services

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- # ★ + ● **99417** Prolonged office or other outpatient evaluation and management service(s) (beyond the total time of the primary procedure which has been selected using total time), requiring total time with or without direct patient contact beyond the usual service, on the date of the primary service; each 15 minutes (List separately in addition to codes 99205, 99215 for office or other outpatient **Evaluation and Management** services)

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Comments from CPT®

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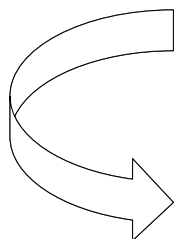
- Use 99417 in conjunction with 99205, 99215
- Do not report 99417 in conjunction with 99354, 99355, 99358, 99359, 99415, 99416
- **Do not report 99417 for any time less than 15 minutes**

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Prolonged services

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CMS developed a new HCPCS code, and assigned a status indicator of invalid to 99417

G2212 *“Prolonged office or other outpatient evaluation and management service(s) beyond the maximum required time of the primary procedure which has been selected using total 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”*

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Prolonged services

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G2212

(List separately in addition to CPT codes 99205, 99215 for office or other outpatient evaluation and management services)

(Do not report G2212 on the same date of service as 99354, 99355, 99358, 99359, 99415, 99416).

(Do not report G2212 for any time unit less than 15 minutes)."

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CPT/CMS and prolonged care

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Codes	Time ranges	Per CPT, use add on code 99417 for these visit lengths	Per CMS, use add on code G2212 for these visit lengths
99205	60 – 74 minutes	75-89 minutes	89-103 minutes
99215	40-54 minutes	55-69 minutes	69-83 minutes

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The saga continues, but I'm out of time

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- 2023: CPT develops one new prolonged services code
- July 2022: CMS proposed rule describes three new HCPCS prolonged services code, not recognizing the new CPT code



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WHY, Oh Why, Oh Why?



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