Changes to 2021 E & M Codes

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After nearly 30 years, CMS is making significant changes to E/M (Evaluation & Management) codes beginning January 1, 2021. The goal is to reduce the burden of documenting/charting as extensively on providers (*Yahoo!*).

According to AMA, some of the benefits include:

- Administrative You will no longer need to re-document the patient's chief complaint or history. Only items that have occurred since the last visit need to be documented.
- **Simplify Code Selection** You can select MDM (Medical Decision Making) or Time spent as the basis for your code selection.
- Payment Collapse There will be 2 payment levels for each of the 5 E/M codes.
- Additional Code An additional code will be available for "higher complexity" specialties.

More info will be coming as we get closer, but listed below are the major revisions that will be coming effective January 1, 2021 according to AMA.

- Extensive E/M guideline additions, revisions and restructuring
- Deletion of code 99201 and revision of codes 99202-99215
 - Codes 99201 and 99202 currently both require straightforward MDM
- Addition of a shorter 15-min prolonged service code
- Components for code selection:
 - Medically appropriate history and/or exam
 - Choose your reporting pathway
 - MDM or
 - Total time on the date of the encounter

Table 1: 2021 Requirements for E/M Codes 99202-99205				
Code	History/Exam	MDM	Total Minutes	
99202	Medically appropriate history and/or examination	Straightforward	15-29	
99203		Low	30-44	
99204		Moderate	45-59	
99205		High	60-74	

Table 2: 2021 Requirements for E/M Codes 99212-99215					
Code	History/Exam	МДМ	Total Minutes		
99212	Medically appropriate history and/or examination	Straightforward	10-19		
99213		Low	20-29		
99214		Moderate	30-39		
99215		High	40-54		

(source: https://www.aapc.com/evaluation-management/em-codes-changes-2021.aspx)