

Provider: _____ DOS: _____

Coded: _____ Audited: _____

Chief Complaint:

1997 EXAM	HPI (history of present illness) <input type="checkbox"/> Location <input type="checkbox"/> Severity <input type="checkbox"/> Timing <input type="checkbox"/> Modifying factor <input type="checkbox"/> Quality <input type="checkbox"/> Duration <input type="checkbox"/> Context <input type="checkbox"/> Associated signs and symptoms		Brief	Brief	Extended	Extended	
			1-3 elements		≥ 4 elements or status of ≥ 3 chronic or inactive conditions		
	ROS (review of systems) <input type="checkbox"/> Constitutional (wt loss, etc.) <input type="checkbox"/> Ears, nose, mouth, throat <input type="checkbox"/> GI <input type="checkbox"/> Integumentary (Skin, breast) <input type="checkbox"/> Endo <input type="checkbox"/> Eyes <input type="checkbox"/> Card/Vasc <input type="checkbox"/> GU <input type="checkbox"/> Neuro <input type="checkbox"/> All/Immun <input type="checkbox"/> Resp <input type="checkbox"/> Musculo <input type="checkbox"/> Psych <input type="checkbox"/> "All others negative" must give neg w/systems		None	Pertinent to problem 1 system	Extended 2-9 systems	Complete ≥ 10 systems or some systems with statement "all others negative"	
	PFSH (past family and social history) <input type="checkbox"/> Past medical history <input type="checkbox"/> Family history <input type="checkbox"/> Social history 2 PFSH required: 99281-99285 No PFSH required: 99231-33, 99334-99335		Established subsequent	None	None	One history area	Two or three history areas
			New/Consult/Admit	None	None	One or two history area(s)	Three history areas
Circle the entry farthest to the right for each history area. To determine history level, draw a line down the column with a circle farthest to the left			PROBLEM FOCUSED	EXP. PROB FOCUSED	DETAILED	COMPREHENSIVE	
General Multi-System Exam 1-5 elements identified by • ≥ 6 elements identified by • ≥ 2 elements identified by • from 6 areas/systems OR ≥ 12 elements identified by • from at least 2 areas/system ≥ 2 elements identified by • from 9 areas/systems			Single Organ System Exam 1-5 elements identified by • ≥ 6 elements identified by • ≥ 12 elements identified by • EXCEPT ≥ 9 elements identified by • for eye and psychiatric exams Perform all elements identified by • document all elements in shaded boxes, document > 1 element in unshaded boxes.				
PROBLEM FOCUSED EXPANDED PROBLEM FOCUSED DETAILED COMPREHENSIVE							

COMPLEXITY	A Number of Diagnoses or Treatment Options <table border="1"> <tr> <th colspan="2">Problems to Exam Physician</th> <th colspan="3">Number x points = Results</th> </tr> <tr> <td>Self-limited or minor (stable, improved or worsening)</td> <td>Max = 2</td> <td>1</td> <td></td> <td></td> </tr> <tr> <td>Est. Problem (to examiner); stable improved</td> <td></td> <td>1</td> <td></td> <td></td> </tr> <tr> <td>Est. Problem (to examiner); worsening</td> <td></td> <td>2</td> <td></td> <td></td> </tr> <tr> <td>New problem (to examiner); no additional workup planned</td> <td>Max = 1</td> <td>3</td> <td></td> <td></td> </tr> <tr> <td>New problem (to examiner); add workup planned</td> <td></td> <td>4</td> <td></td> <td></td> </tr> <tr> <td colspan="5">TOTAL</td> </tr> <tr> <td colspan="5">Bring total to line A in Final Results for Complexity</td> </tr> </table>					Problems to Exam Physician		Number x points = Results			Self-limited or minor (stable, improved or worsening)	Max = 2	1			Est. Problem (to examiner); stable improved		1			Est. Problem (to examiner); worsening		2			New problem (to examiner); no additional workup planned	Max = 1	3			New problem (to examiner); add workup planned		4			TOTAL					Bring total to line A in Final Results for Complexity				
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Transfer the history, exam and medical decision making results to the appropriate chart below and follow the specific instructions for the chart.

Outpatient, consults (Outpatient & Inpatient) and ER

	New/Consult/ER					Established				
	If a column has 3 circles, draw a line down the column and circle the code OR find the column with the circle farthest to the left, draw a line down the column and circle the code.					If a column has 2 or 3 circles, draw a line down the column and circle the code OR draw a line down the column with a center circle and circle the code.				
History	PF	EPF	D ER:EPF	C ER:D	C	<i>Minimal problem that may not require presence of physician</i>	PF	EPF	D	C
Examination	PF	EPF	D ER:EPF	C ER:D	C		PF	EPF	D	C
Complexity of medical decision	SF	SF ER:L	L ER:M	M	H		SF	L	M	H
	99201 99241 99251 99281	99202 99242 99252 99282	99203 99243 99253 99283	99204 99244 99254 99284	99205 99245 99255 99285	99211	99212	99213	99214	99215

Inpatient

	Initial Hospital/Observation			Subsequent Inpatient/Observation		
	If a column has 3 circles, draw a line down the column and circle the code OR find the column with the circle farthest to the left, draw a line down the column and circle the code.			If a column has 2 or 3 circles, draw a line down the column and circle the code OR draw a line down the column with a center circle and circle the code.		
History	D or C		C	PF interval		EPF interval
Examination	D or C		C	PF		EPF
Complexity of medical decision	SF/L		M	SF/L		M
	99221 99218 99234		99222 99219 99235	99223 99220 99236		99232 99225

Nursing Facility *Annual Eval: Detailed Interval Hx, Comprehensive Exam, Decision Complexity Low/Moderate = 99318

	Initial Nursing Facility Care			Subsequent Nursing Facility Care			
	If a column has 3 circles, draw a line down the column and circle the code OR find the column with the circle farthest to the left, draw a line down the column and circle the code.			If a column has 2 or 3 circles, draw a line down the column and circle the code OR draw a line down the column with a center circle and circle the code.			
History	D or C		C	PF interval	EPF Interval	D interval	C interval
Examination	D or C		C	PF	EPF	D	C
Complexity of medical decision	SF/L		M	SF	L	M	H
	99304		99035	99307	99308	99309	99310

Domiciliary (Rest Home, Custodial Care)

	New Patient					Established Patient			
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History	PF	EPF	D	C	C	PF interval	EPF interval	D interval	C interval
Examination	PF	EPF	D	C	C	PF	EPF	D	C
Complexity of medical decision	SF	L	M	M	H	SF	L	M	M/H
	99324	99325	99326	99327	99328	99334	99335	99336	99337

PF = Problem focused EPF = Expanded problem focused D = Detailed C = Comprehensive SF = Straightforward L = Low M = Moderate H = High

If the physician documents total time and suggests that counseling or coordinating care dominates (more than 50%) of the encounter, time may determine level of service. Documentation may refer to: prognosis, differential diagnosis, risks, benefits of treatment, instructions, compliance, risk reduction of discussion with another health care provider.

Does documentation reveal total time? Time: face-to-face in outpatient setting – Unit/floor in inpatient setting ☐ Yes ☐ No

Does documentation describe the content of counseling or coordinating care? ☐ Yes ☐ No

Does documentation reveal that more than half of time was counseling or coordinating care? ☐ Yes ☐ No

Documentation should reflect e.g., spent 15 mins of this 20 min appt counseling (coordinating care) for ..."

If all the answers are "yes", may select level based on time.