2021 E/M Coding

Go Inside the Numbers for a Look at Changing Guidelines

MDM is going to be much more important, and defined a bit differently, in 2021.

When 2021 rolls around, everyone is going to have to get used to a lot of new guidelines and procedures for coding office evaluation and management (E/M) services.

The basics: Examination and history won’t be part of the deciding criteria for overall E/M level when selecting a code next year; instead, you’ll use either time or medical decision making (MDM) to arrive at the best E/M code for your office encounter.

And in addition to putting MDM atop the E/M component list with time, CPT® has rewritten all of the MDM descriptors in Table 1: Complexity of Medical Decision Making. These changes aim to more closely match the mechanisms of MDM in an office visit. Check out all three of the MDM component verbiage changes, so they don’t throw you when coding E/Ms in 2021.

‘Dx/Management Options’ Becomes ‘Complexity/Problems Addressed’

The first change in MDM verbiage is “Number of Diagnoses of Management Options.” In 2021, this descriptor will read (emphasis added): “Number and Complexity of Problems Addressed at the Encounter.” This change should make ascertaining MDM more exact, explains Marcella Bucknam, CPC, CCS-P, COC, CCS, CPC-P, CPC-I, CCC, COBGC, revenue cycle analyst with Klickitat Valley Health in Goldendale, Washington.

“There was always a certain amount of confusion about whether and how to count ‘diagnoses’; if a diagnosis was listed but there was no documentation