

### Time Based Coding

Time is the most appropriate way to bill if you spend 50% or more of the visit educating, counseling or coordinating care for a patient.

If you can answer YES to these 3 questions, then time can be used as the basis for coding:

1. Does the documentation state the entire time of the visit – face to face time?
2. Does the documentation describe the content of the counseling/education/coordination of care?
3. Does the documentation state that 50% or more of the visit time was spent on counseling/education/coordination of care?

If time based coding is used – the other visit components (HX, Exam and MDM) are disregarded. This is often beneficial to STD/STI clinics. Patients often defer exams but the provider spends a significant amount of time counseling the patient. This allows the clinic to capture revenue for the provider time as long as the documentation meets the required criteria.

<b>Time Based Coding for Outpatient E&amp;M Services</b>				
Typical Codes with Related Times				
<b>New Outpatient E&amp;M Codes</b>				
99201	99202	99203	99204	99205
10 min.	20 min.	30 min.	45 min.	60 min.
<b>Established Outpatient E&amp;M Codes</b>				
99211	99212	99213	99214	99215
5 min.	10 min.	15 min.	25 min.	40 min.
<b>Outpatient – Consultation Codes</b>				
99241	99242	99243	99244	99245
15 min.	30 min.	40 min.	60 min.	80 min.