E&M Coding Outline

Before attempting to setup conditions for E&M Coding in AMS, you MUST have prior knowledge of the following information:

1. Three key components for establishing E&M coding guidelines are:
   1. History
   2. Physical Exam
   3. Medical Decision-Making (MDM)

2. Four key components for documenting data elements are:
   1. HPI- History of Present Illness.
   2. ROS- Review of Systems.
   3. PFSH- Past, Family and/or Social History.
   4. EXAM

3. Four levels that will further define the History and Physical Exam to assist in determining the level of E&M Code to use are:
   1. Problem Focused
   2. Expanded Focus
   3. Detailed
   4. Comprehensive

4. Four key components of Medical Decision-Making that are based on the problem, data reviewed and risks are:
   1. Straight Forward Decision
   2. Low Complexity
   3. Moderate Complexity
   4. High Complexity

The following tables outline each level and should be taken into consideration when defining E&M Coding Conditions:

<table>
<thead>
<tr>
<th>History</th>
<th>HPI</th>
<th>ROS</th>
<th>PFSH</th>
<th>Physical Exam</th>
<th>Bullets</th>
</tr>
</thead>
<tbody>
<tr>
<td>Problem Focused</td>
<td>Brief</td>
<td>None</td>
<td>None</td>
<td>Problem Focused</td>
<td>1-5</td>
</tr>
<tr>
<td>Expanded Problem Focused</td>
<td>Brief</td>
<td>1</td>
<td>None</td>
<td>Expanded Problem Focused</td>
<td>6-11</td>
</tr>
<tr>
<td>Detailed</td>
<td>Extended</td>
<td>2-9</td>
<td>1 out of 3</td>
<td>Detailed</td>
<td>12</td>
</tr>
<tr>
<td>Comprehensive</td>
<td>Extended</td>
<td>10</td>
<td>3 out of 3</td>
<td>Comprehensive</td>
<td>18</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>MDM</th>
<th>Problems</th>
<th>Data</th>
<th>Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>Straight Forward</td>
<td>1</td>
<td>1</td>
<td>Minimal</td>
</tr>
<tr>
<td>Low</td>
<td>2</td>
<td>2</td>
<td>Low</td>
</tr>
<tr>
<td>Moderate</td>
<td>3</td>
<td>3</td>
<td>Moderate</td>
</tr>
<tr>
<td>High</td>
<td>4</td>
<td>4</td>
<td>High</td>
</tr>
</tbody>
</table>
Once you completely and thoroughly understand the conditions to establish E&M Coding Guidelines, you can use this information in conjunction with AMS Macros/Templates to suggest the appropriate code to be used.

NOTE: American Medical Software is in no way liable for the suggested E&M Codes based on the conditions that have been defined as further described below.

Establishing E&M Coding Conditions

1. From the Main Menu of Electronic Patient Charts, choose Update Macro File.
2. Pull up an existing or create a new Macro/Template.
3. Choose Related ICD/CPT Codes at the bottom left of your screen and add your first procedure that will apply to this Template.
   NOTE: Diagnosis Codes are not necessary to establishing E&M Coding Guidelines and are not taken into consideration when suggesting what E&M code to use during documentation of the encounter.
4. Check mark “Use E&M Coding Conditions.”
5. E&M Coding Information will be defined based on the following fields:
   • **Group Code**: Used to identify what group each code is in when more than one procedure code is assigned to one Template. For example, you have a macro that you share for a New Patient Office Visit (99203) and an Established Patient Office Visit (99213). You can assign a Group Code of **EOV** for Established Office Visit to the 99213, and **NOV** for New Patient Office Visit to the 99203. If you have more than one code attached for the same group, higher level codes are suggested.
   • **E & M level**: Enter the Level of the visit that associates to this procedure code. For example, a 99213 is considered a Level 3 Office Visit.
   • **History Required**: Used to define the level of History you intend on documenting for this type of encounter so that this procedure code is suggested. See History Table previously noted for further clarification.
   • **Exam Required**: Used to define the elements of the Exam you intend on documenting for this type of encounter so that this procedure code is suggested. See the Physical Exam Table previously noted for further clarification.
   • **MDM Required**: Indicator that further defines the problem, data reviewed, and risks. Since this will be determined on a per patient basis when documenting the encounter, you should enter the most common MDM level when using this Template. See MDM Table previously noted for further clarification.
- **Amount of Conditions Required** - Indicates how many conditions must be met in order to suggest this procedure code. In most instances, only 2 out of 3 conditions must be met to suggest a particular code.

**How E&M Coding is used during Progress Note Entry**

1. From the Daily Data Entry or Patient Chart menu, choose Progress Note Entry.
2. If a Macro/Template is not attached to a specific Progress Note Title, choose Paste Macro to add one to the Progress Note.
3. After a Template(s) that includes E&M Coding Conditions has been added to the Progress Note, the suggested code(s) is displayed in the top, right hand corner of the Progress Note screen.
4. Define the Medical Decision-Making (MDM) Risk level for this encounter by choosing it from the drop down displayed in the top, right hand corner of the Progress Note screen. **NOTE:** If one or more Templates that have E&M Coding Conditions were added to this encounter, changing the MDM Risk level will further assist in suggesting the appropriate Procedure Code to use.
5. Click the browse button (…) to see the E&M Coding detail for the Template(s) that is added. It will show you the data elements that were previously defined as met for this template. As you add additional templates as needed, it will count the data elements and suggest a higher level code if applicable.
   - **Remove Line** - Remove a line from the E&M Coding Detail so that it will not take into consideration the data elements of a Template(s) added to the Progress Note to suggest a Procedure Code to use. Removing a Line will not affect the contents of your Progress Note and is only used to further assist in suggesting the appropriate Procedure Code(s) to use based on the MDM required.
6. Electronically code your encounter once documentation is complete by choosing Encounters/Referrals tab at the bottom of the Progress Note Entry Screen. Choose the appropriate Diagnosis and select your suggested Procedure Code as it applies by clicking Select From Procedure Code List.
7. Save the Progress Note which includes the E&M Coding Conditions that applied during the encounter.

(Show elements needed to suggest a specific code will be a later enhancement to the E&M Coding Detail screen. Currently, you will have to pull up the Template in Update Macro File to view the data elements defined for each procedure code if you need to know what number of elements are needed to suggest a particular procedure code.)