Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Service:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DOB:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Follow Up Visit: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Referral: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Height:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Weight: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **E&M/Office Visit Level:** | |  |  |
| **Office/Other Outpatient Visit** | | **New Pt** | **Established Pt** |
|  | Level 1: Problem Focused | 99201 (retiring in 2021) | 99211 |
|  | Level 2: Expanded problem focused | 99202 | 99212 |
|  | Level 3: Detailed | 99203 | 99213 |
|  | Level 4: Comprehensive, moderate | 99204 | 99214 |
|  | Level 5: Comprehensive, high | 99205 | 99215 |

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| **Blood pressure:** | | | |
| Systolic: | | Diastolic: | |
|  | 3074F: <130 |  | 3078F: <80 |
|  | 3075F: 130-139 |  | 3079F: 80-89 |
|  | 3077F: >140 |  | 3080F: >90 |

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| **BMI (3008F):** | | | | | | | | | | | |
|  | Z68.1: 19.9 or less |  | Z68.24: 24.0-24.9 |  | Z68.29: 29.0-29.9 |  | Z68.34: 34.0-34.9 |  | Z68.39: 39.0-39.9 |  | Z68.45: 70 or greater |
|  | Z68.20: 20.0-20.9 |  | Z68.25: 25.0-25.9 |  | Z68.30: 30.0-30.9 |  | Z68.35: 35.0-35.9 |  | Z68.41: 40.0-44.9 |
|  | Z68.21: 21.0-21.9 |  | Z68.26: 26.0-26.9 |  | Z68.31: 31.0-31.9 |  | Z68.36: 36.0-36.9 |  | Z68.42: 45.0-49.9 |
|  | Z68.22: 22.0-22.9 |  | Z68.27: 27.0-27.9 |  | Z68.32: 32.0-32.9 |  | Z68.37: 37.0-37.9 |  | Z68.43: 50.0-59.9 |
|  | Z68.23: 23.0-23.9 |  | Z68.28: 28.0-28.9 |  | Z68.33: 33.0-33.9 |  | Z68.38: 38.0-38.9 |  | Z68.44: 60.0-69.9 |

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| **Diabetic Care:** | | | | | | | |
| **HbA1c:** | | | | | | | |
|  | 3044F: <7.0% |  | 3051F:  >7.0%-<8.0% |  | 3052F:  >8.0%-<9.0% |  | 3046F: >9.0% |

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| **Nephropathy:** | | | |
|  | 3060F: positive microalbumin test result (30-300) |  | 3062F: positive microalbumin test result documented/reviewed (>30) |
|  | 3061F: negative microalbumin tests documented/reviewed |  | 3066F: receiving dialysis, ESRD treatment, CRF, ARF, renal insufficiency |
|  | 4010F: ACE inhibitor/ARB therapy | | |

**\*review diabetic eye exam need, name of provider/practice:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (obtain signed release of information)**

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| **Preventive Screenings/Exclusions:** | | | | | | | | | | | |
| Colorectal Cancer: | | Breast Cancer: | | | **Osteoporosis:** | | | | | | |
|  | Z85.038: Cancer, personal history, other malignant neoplasm of large intestine |  | Z90.13: History of bilateral mastectomy | |  | | G0130: Bone mineral density test | | | | |
|  | Z90.12: Absence of left breast | |  | | | | | |  |
|  | Z85.048: Cancer, personal history, other malignant neoplasm of rectum, rectosigmoid junction, anus |  | Z90.11: Absence of right breast | |  | | | | | |  |
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| **Vaccinations:** | | | | | | |
|  | G8482: Flu vaccine ordered & administered | |  | 4040F: Pneumonia vaccine administered or previously given | | |
|  | G8483: Flu vaccine not given for documented reason | |  | 4040F-1P: Pneumonia vaccine not administered for medical reasons | | |
| **Medication Reconciliation Post-Discharge:** | | | | | | |
|  | 1111F: Discharge medications reconciled w/ current medication in the outpatient record |  | | 99495: Transition of care |  | 99496: Transition of care |

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| **Annual Wellness/Initial Preventive Physical Exam:** | | | | | | | | |
|  | G0438: Initial annual wellness |  | G0439: Subsequent annual wellness | | | |  | G0402: Initial Preventive Physical Exam – IPPE (Welcome); once in a patient’s lifetime; billed in first 12 months of joining Medicare |
| **\*If you’re a federally-qualified health center (FQHC) you must bill G0468 along with one of the 3 codes listed above (G0438, G0439, G0402)** | | | | | | | | |
| Fall Risks: | | | | | | | | |
|  | 1100F: screening, 2 or more falls in past year or any fall with injury in the past year | | |  | | 1101F: screening, no falls in the past year or only 1 fall without injury in the past year | | |
|  | 1100F-1P: patient not screened, medical reasons | | |  | | 1101F-1P: patient not screened, medical reasons | | |
| Advanced Directive: | | | | | | | | |
|  | 1157F: Advance care planning or similar legal document in record | | | |  | 1158F: Advance care planning discussion notated in record | | |
|  | S0257: Counseling/discussion regarding advanced directive/end of life care with patient and/or surrogate | | | | | | | |
| Medication List & Review (need to bill both): | | | | | | | | |
|  | 1159F: Medication list documented in record | | | | | | | |
|  | 1160F: Review of all medications by provider & documented in record | | | | | | | |
| Functional Status: | | | | **Pain Assessment:** | | | | |
|  | 1170F: Functional status assessed | | |  | | 1125F: Pain severity quantified, present | | |
|  | | 1126F: Pain severity quantified, no pain present | | |
| **Tobacco Cessation:** | | | | | | | | |
|  | 1034F: Current tobacco smoker | | | |  | 1035F: Current smokeless tobacco user | | |
|  | 1036F: Current non-smoker | | | | | | | |
| **Depression Screening:** G0444 (annual depression screening) | | | | | | | | |
|  | **G8431: Screening for depression documented as positive and follow up plan is documented** | | | |  | **96160: Pre-natal/Post-partum health risk assessment with scoring and documentation** | | |
|  | **G850: Screening for depression documented as negative, follow up plan is not required** | | | |  | **96127: Brief emotional/behavioral assessment (ADD/ADHD) with scoring and documentation** | | |
| **Improving Bladder Control:** | | | | | | | | |
|  | 1090F: Presence or absence of urinary incontinence | | | |  | 0509F: Urinary incontinence plan of care documented | | |
| **Monitoring Physical Activity:** | | | | | | | | |
|  | Z71.82: Exercise counseling | | | |  | 1003F: Level of activity assessed | | |

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| **Frequent LAB Studies** | | | | | |
|  | CBC |  | Lipid |  | Microalbumin (protein) |
|  | BMP |  | HbA1c |  | UA C/S |
|  | CMP |  | TSH |  | Urinalysis |
|  | PT/INR |  | PSA |  | eGFR |
|  | 36415: Venipuncture |  | Hepatic/LFTs |  | UACR (urine-creatinine ration) |

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| Frequently Ordered Tests | | | |
|  | Mammogram |  | Other: |
|  | Colonoscopy |  | Other: |

1.28.2021