

Sept. 11, 2024

Subject: Revised Emergency Department Outpatient Facility Evaluation and Management Coding Policies

Purpose

As part of our continued efforts to reinforce accurate coding practices, Presbyterian Health Plan, Inc. (Presbyterian) revised the current emergency department (ED) outpatient facility evaluation and management (E/M) coding reimbursement policy and procedure. This revision addresses the methodology used to determine the appropriate and fair level of facility reimbursement for services rendered. This revision applies to all product lines effective June 1, 2024.

Policy Overview

These policies focus on outpatient facility ED claims that are submitted with level 4 (99284, G0383) or level 5 (99285, G0384) E/M codes. These policies were developed using our national experience to address inconsistencies in coding accuracy and were based on the E/M coding principles created by the Centers for Medicare and Medicaid Services (CMS). These principles require hospital ED facility E/M coding guidelines to follow the intent of Current Procedural Terminology (CPT) code descriptions and reasonably relate to hospital resource use.

These policies apply to all A and B ED facilities, including freestanding facilities, that submit ED claims with level 4 and 5 E/M codes for members of the affected plans, regardless of whether they're under contract to participate in our network.

As part of the implementation of these policies and procedures, we utilize the Optum Emergency Department Claim (EDC) Analyzer tool, which determines appropriate E/M coding levels based on data from the patient's claim including the following:

- Patient's presenting problem
- Diagnostic services performed during the visit
- Any complicating conditions for the patient

The EDC Analyzer applies an algorithm which accounts for diagnoses submitted as well as facility services ordered and performed to determine the likely appropriate level of the facility E/M reimbursement. Given the inherent variability and complexity relating to higher-level E/M codes, the algorithm verifies whether the higher-level codes accurately reflect the complexity of the visit.

Facilities submitting claims for ED E/M codes may experience adjustments to level 4 and 5 E/M codes to reflect an appropriate level code or may receive a denial based on the reimbursement structure within their contracts with Presbyterian. Facilities will have the opportunity to submit reconsideration or appeal requests if they believe a higher-level E/M code is justified, in accordance with the terms of their contract.

To learn more about the EDC Analyzer, please view this [guide prepared by Optum](#).

Criteria that may exclude outpatient facility claims from these policies include but are not limited to:

- Claims for patients who were admitted from the ED or transferred to another health care setting (skilled nursing facility, long-term care hospital, etc.)
- Claims for patients who received critical care services (99291, 99292)
- Claims for patients who are under 2 years of age
- Claims with certain diagnosis codes that when treated in the ED most often necessitate greater than average resource usage such as significant nursing time
- Claims for patients who expired in the ED

The mutual goal of facility coding is to accurately capture ED resource utilization and align with the E/M CPT code description for a patient visit per CMS guidance. The intent of this policy is to ensure provider reimbursement is correct and fair. This policy should not be used to drive decisions relating to patient care. Presbyterian reserves the right to deny, review, audit and take back any claims based on medical necessity as described in the policy above.

Should providers have any questions regarding the following updates, then they should contact the Presbyterian Provider Line at (505) 923-5757.

As always, thank you for partnering with us to improve the health of the patients, members and communities we serve.

Presbyterian Claims Department



Hours: Monday through Friday, 8 a.m. to 5 p.m.



Phone: (505) 923-5757 or 1-888-923-5757 (toll-free)

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