## Dynamic Chiropractic

BILLING / FEES / INSURANCE

## What Code Can I Bill for a Report of Findings?

Samuel A. Collins

A report of findings is a component of an evaluation and management service (99201 through 99205 and 99211 through 99215) under counseling. Counseling is an integral part of the E&M service and is part of the criteria for choosing the appropriate evaluation and management code. Counseling, as defined in *CPT 2006*, is defined as a discussion with a patient and/or family concerning one or more of the following areas:

- diagnostic results, impressions, and/or recommended diagnostic studies;
- prognosis;
- risks and benefits of management (treatment) options;
- instructions for management (treatment) and/or follow-up;
- importance of compliance with chosen management (treatment) options;
- risk factor reduction;
- patient and family education.

Therefore a report of findings is included in the initial evaluation and management service; it is not a separate service requiring its own code. This counseling component of the E&M service is typically done in one patient encounter. If the counseling (report of findings) is conducted on a separate or subsequent visit, it could be appropriate to bill an additional E&M service; but you must justify the necessity of two E&M services performed on consecutive visits. The use of E&M services on subsequent visits is a scenario that should not be routine, as most cases would not have the complexity to require such services.

If a provider prefers doing the counseling (report of findings) on a separate, subsequent visit, then it would likely not be appropriate to bill any additional code for the counseling, as that component was already included in the prior service. There is nothing wrong with performing the service in this way, but this "style" does not increase the amount of billing or the codes utilized. The same services were done; they were simply divided into two visits. If you feel you deserve to bill an additional E&M code for the service, be sure to have adequate documentation and justification of such billing, as there is a greater chance that this type of claim will be audited.

APRIL 2006