

# NEXTGEN E&M CODING DEMONSTRATION

This demonstration reviews usage of the E&M Coding template. Details of the workflow will likely vary somewhat among departments, though this should give you a good idea of NextGen functionality.

This has been prepared with EHR 5.6.4.15 and KBM 7.9. Subsequent updates may display cosmetic and functional changes.

Use the keyboard or mouse to pause, review, and resume as necessary.



# Overview

- E&M coding can be pretty confusing under the best of circumstances.
- NextGen gives you some help if you document history and physical components properly within the templates.
- The ultimate decision on the billing code, however, remains that of the provider.



# E&M Review

- Codes are first divided into new vs established patients
- If >50% of the direct contact time consists of counseling, the billing code is based on the time spent.

Code	New Office Visit [3/3]	History	Exam	Decision Making	Time
99201	Level 1	Problem Focused	1	Straightforward	10 min
99202	Level 2	Expanded Problem Focused	2-4	Straightforward	20 min
99203	Level 3	Detailed	5-7	Low	30 min
99204	Level 4	Comprehensive	8+	Moderate	45 min
99205	Level 5	Comprehensive	8+	High	60 min
Code	Established Office Visit [2/3]	History	Exam	Decision Making	Time
99211	Level 1 (No physical required)	N/A	N/A	Minimal	5 min
99212	Level 2	Problem Focused	1	Straightforward	10 min
99213	Level 3	Expanded Problem Focused	2-4	Low	15 min
99214	Level 4	Detailed	5-7	Moderate	25 min
99215	Level 5	Comprehensive	8	High	40 min



# E&M Review

- Most visits, however, will be based on the amount of detail or difficulty of 3 factors: History, Physical Exam, and Decision Making.

Code	New Office Visit [3/3]	History	Exam	Decision Making
99201	Level 1	Problem Focused	1	Straightforward
99202	Level 2	Expanded Problem Focused	2-4	Straightforward
99203	Level 3	Detailed	5-7	Low
99204	Level 4	Comprehensive	8+	Moderate
99205	Level 5	Comprehensive	8+	High
Code	Established Office Visit [2/3]	History	Exam	Decision Making
99211	Level 1 (No physical required)	N/A	N/A	Minimal
99212	Level 2	Problem Focused	1	Straightforward
99213	Level 3	Expanded Problem Focused	2-4	Low
99214	Level 4	Detailed	5-7	Moderate
99215	Level 5	Comprehensive	8	High



# E&M Review

- For new patients, the highest level meeting all 3 criteria determines the code.

Code	New Office Visit [3/3]	History	Exam	Decision Making
99201	Level 1	Problem Focused	1	Straightforward
99202	Level 2	Expanded Problem Focused	2-4	Straightforward
99203	Level 3	Detailed	5-7	Low
99204	Level 4	Comprehensive	8+	Moderate
99205	Level 5	Comprehensive	8+	High



# E&M Review

- For established patients, the highest level meeting 2 of the 3 criteria determines the code.

Code	Established Office Visit [2/3]	History	Exam	Decision Making
99211	Level 1 (No physical required)	N/A	N/A	Minimal
99212	Level 2	Problem Focused	1	Straightforward
99213	Level 3	Expanded Problem Focused	2-4	Low
99214	Level 4	Detailed	5-7	Moderate
99215	Level 5	Comprehensive	8	High



# E&M Review

- NextGen records whether the patient is new or established.
- NextGen counts the number of history and exam elements documented.
  - This is why it is important to use the HPI, ROS, and exam templates' check boxes as much as possible.
  - If NextGen calculates a code that is much lower than you expected, the most common reason is that you have overlooked documenting one of these components.

Code	New Office Visit [3/3]	History	Exam	Decision Making
Code	Established Office Visit [2/3]	History	Exam	Decision Making



# E&M Review

- The provider must choose the level of Decision Making.
- Unfortunately, level of Decision Making is the most subjective aspect, and often the most confusing for providers.

Code	New Office Visit [3/3]	History	Exam	Decision Making
Code	Established Office Visit [2/3]	History	Exam	Decision Making



# Decision Making

- Level of Decision Making is made of 3 components: Number of diagnoses/management options, Amount/complexity of data to review, and Risk.
- The highest level meeting 2 of the 3 criteria determines the Level of Decision Making.

TYPE OF DECISION MAKING	NUMBER OF DIAGNOSES OR MANAGEMENT OPTIONS	AMOUNT AND/OR COMPLEXITY OF DATA TO BE REVIEWED	RISK OF SIGNIFICANT COMPLICATIONS, MORBIDITY, AND/OR MORTALITY
Straightforward	Minimal	Minimal or None	Minimal
Low Complexity	Limited	Limited	Low
Moderate Complexity	Multiple	Moderate	Moderate
High Complexity	Extensive	Extensive	High



# Decision Making

- A complete discussion of these gradations is beyond the scope of this lesson, and the guidance provided by the Centers for Medicare and Medicaid Services is more by example than by clear rules.
- However, most people find the first two criteria to be relatively intuitive.

TYPE OF DECISION MAKING	NUMBER OF DIAGNOSES OR MANAGEMENT OPTIONS	AMOUNT AND/OR COMPLEXITY OF DATA TO BE REVIEWED	RISK OF SIGNIFICANT COMPLICATIONS, MORBIDITY, AND/OR MORTALITY
<b>Straightforward</b>	Minimal	Minimal or None	Minimal
<b>Low Complexity</b>	Limited	Limited	Low
<b>Moderate Complexity</b>	Multiple	Moderate	Moderate
<b>High Complexity</b>	Extensive	Extensive	High



# Decision Making

- The Risk category is less clear:
  - For many, it is less intuitive.
  - It is guided by yet another table.
  - Confusingly, the criteria in that table are somewhat redundant with the other two criteria here.

TYPE OF DECISION MAKING	NUMBER OF DIAGNOSES OR MANAGEMENT OPTIONS	AMOUNT AND/OR COMPLEXITY OF DATA TO BE REVIEWED	RISK OF SIGNIFICANT COMPLICATIONS, MORBIDITY, AND/OR MORTALITY
Straightforward	Minimal	Minimal or None	Minimal
Low Complexity	Limited	Limited	Low
Moderate Complexity	Multiple	Moderate	Moderate
High Complexity	Extensive	Extensive	High



# Level of Risk Table

- Here, the *one highest* column determines the risk.

Level of Risk	Presenting Problem(s)	Diagnostic Procedure(s)	Management
<b>Minimal</b>	1 self-limited/minor problem—EG cold, insect bite, rash	Blood work Basic X-rays; EKG/EEG; U/S; echo U/A; wet prep	Rest Gargles Elastic bandages Superficial dressings
<b>Low</b>	$\geq 2$ self-limited/minor problems 1 stable chronic illness—EG well controlled HTN, NIDDM, BPH Acute uncomplicated illness or injury—EG cystitis, allergic rhinitis, simple sprain	Physiologic tests not under stress—EG PFT Non-cardiovascular imaging studies with contrast—EG BE Superficial needle or skin biopsies Lab tests requiring arterial puncture	OTC drugs Minor surgery with no identified risk factors Physical/occupational therapy IV fluids without additives
<b>Moderate</b>	1 or more chronic illnesses with mild exacerbation, progression, or side effects of treatment $\geq 2$ stable chronic illnesses Undiagnosed new problem with uncertain prognosis—EG lump in breast Acute illness with systemic Sx—EG pyelonephritis, pneumonitis, colitis Acute complicated injury—EG head injury with brief LOC	Physiologic tests under stress—EG GXT, fetal contraction stress test Diagnostic endoscopies with no identified risk factors Deep needle or incisional biopsy Cardiovascular imaging studies with contrast and no identified risk factors—EG arteriogram, cardiac cath Obtain fluid from body cavity	Minor surgery with identified risk factors Elective major surgery with no identified risk factors Prescription drug management Therapeutic nuclear medicine IV fluids with additives Closed treatment of fracture or dislocation without manipulation
<b>High</b>	1 or more chronic illnesses with severe exacerbation, progression, or side effects of treatment Acute or chronic illnesses or injuries that pose a threat to life or bodily function An abrupt change in neurologic status—EG seizure, TIA, motor/sensory loss	Cardiovascular imaging studies with contrast with identified risk factors Cardiac electrophysiological tests Diagnostic endoscopies with identified risk factors Discography	Elective major surgery with identified risk factors Emergency major surgery Parenteral controlled substances Drug therapy requiring intensive monitoring for toxicity DNR decision



# Level of Risk Table

- Some helpful primary care/outpatient criteria are highlighted.

Level of Risk	Presenting Problem(s)	Diagnostic Procedure(s)	Management
<i>Minimal</i>	1 self-limited/minor problem—EG cold, insect bite, rash	Blood work Basic X-rays; EKG/EEG; U/S; echo U/A; wet prep	Rest Gargles Elastic bandages Superficial dressings
<i>Low</i>	$\geq 2$ self-limited/minor problems <b>1 stable chronic illness</b> —EG well controlled HTN, NIDDM, BPH <b>Acute uncomplicated illness or injury</b> —EG cystitis, allergic rhinitis, simple sprain	Physiologic tests not under stress—EG PFT Non-cardiovascular imaging studies with contrast—EG BE Superficial needle or skin biopsies Lab tests requiring arterial puncture	<b>OTC drugs</b> Minor surgery with no identified risk factors Physical/occupational therapy IV fluids without additives
<i>Moderate</i>	<b>1 or more chronic illnesses with mild exacerbation</b> , progression, or side effects of treatment $\geq 2$ <b>stable chronic illnesses</b> <b>Undiagnosed new problem with uncertain prognosis</b> —EG lump in breast <b>Acute illness with systemic Sx</b> —EG pyelonephritis, pneumonitis, colitis <b>Acute complicated injury</b> —EG head injury with brief LOC	Physiologic tests under stress—EG GXT, fetal contraction stress test Diagnostic endoscopies with no identified risk factors Deep needle or incisional biopsy Cardiovascular imaging studies with contrast and no identified risk factors—EG arteriogram, cardiac cath Obtain fluid from body cavity	Minor surgery with identified risk factors Elective major surgery with no identified risk factors <b>Prescription drug management</b> Therapeutic nuclear medicine IV fluids with additives Closed treatment of fracture or dislocation without manipulation
<i>High</i>	<b>1 or more chronic illnesses with severe exacerbation</b> , progression, or side effects of treatment Acute or chronic illnesses or injuries that pose a threat to life or bodily function An abrupt change in neurologic status—EG seizure, TIA, motor/sensory loss	Cardiovascular imaging studies with contrast with identified risk factors Cardiac electrophysiological tests Diagnostic endoscopies with identified risk factors Discography	Elective major surgery with identified risk factors Emergency major surgery Parenteral controlled substances Drug therapy requiring intensive monitoring for toxicity DNR decision



File Edit Default View Tools Admin Utilities Window Help

Logout Save Clear Delete USA FAMILY MEDICINE DUFFY, ROBERT LAMAR MD Patient History Inbox PAQ Medications Templates Documents Images Procedures Apps

10/10/2010 02:50 PM: "E&M History" x

Alert NEXTGEN Intake Histories Summary SOAP Finalize OV Checkout Protocols

Visit type: ☐ New patient ☒ Established patient Encounter insurance:

Office Visit [Add or Update Assessment](#)

**Medical decision making** **PE calculation type**

☐ Straight forward ☒ Multi system  
☐ Low complexity ☐ Single system:   
☐ Moderate complexity  
☐ High complexity

**Counseling**

☐ Counseled greater than 50% of time and documented content [Counseling Details](#)

Total visit time (minutes):  Total counsel time (minutes):

**Submit code** E&M Guidelines: 1997: [Web](#)

Visit code:  Modifier(s):

[Calculate Code](#)  
[Additional E&M Code](#)

**E&M codes** [View Other Codes](#)

New patient:	Consultation:	Preventive new:	Preventive established:
<input type="radio"/> 99201	<input type="radio"/> 99241	<input type="radio"/> 99381	<input type="radio"/> 99391
<input type="radio"/> 99202	<input type="radio"/> 99242	<input type="radio"/> 99382	<input type="radio"/> 99392
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<input type="radio"/> 99205	<input type="radio"/> 99245	<input type="radio"/> 99385	<input type="radio"/> 99395
<input type="radio"/> Established: 99211	<input type="radio"/> Preventive counseling: 99386	<input type="radio"/> 99387	<input type="radio"/> 99396
<input type="radio"/> 99212	<input type="radio"/> 99401		<input type="radio"/> 99397
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<input type="radio"/> 99214	<input type="radio"/> 99403		
<input type="radio"/> 99215	<input type="radio"/> 99404		

Prenatal: Visit 4-6: ☐ 59425

Behavioral health continued: Individual therapy: ☐ 90804 (20 - 30 mins)  
☐ 90806 (45 - 50 mins)  
☐ 90808 (75 - 80 mins)  
☐ 90805 (10 - 30 mins)  
☐ 90807 (45 - 50 mins)  
☐ 90809 (75 - 80 mins)  
☐ 90812 (Individual therapy)  
☐ 90813 (Family couple therapy)  
☐ 90853 (Group therapy)  
☐ 90857 (Medication group)  
[View Detailed E&M History](#)

**Documents**

[Chart Note](#) [Patient Plan](#) [Consult Request](#) [Referral Request](#)  
[Summary Note](#) [Consult Thank You](#) [Referral Thank You](#)  
[CC: Providers](#)

[Previous](#) [Next](#)

Ready NGProd USA Health Services Foundation rlduffy CAP NUM SCRL 10/19/2010

On NextGen's E&M Coding template, you select your Decision Making Level here. You can also click **View Risk Table** to see the risk table we just reviewed.

## des

Level of Risk	Presenting Problem(s)	Diagnostic Procedure(s) Ordered	Management Options Solutions
Minimal	<ul style="list-style-type: none"> <li>One self limited or minor problem, eg, cold, insect bite, tinea corporis</li> </ul>	<ul style="list-style-type: none"> <li>Laboratory tests requiring venipuncture</li> <li>Chest X-rays</li> <li>EKG/EEG</li> <li>Urinalysis</li> <li>Ultrasound, eg, echocardiography</li> <li>KOH prep</li> </ul>	<ul style="list-style-type: none"> <li>Rest</li> <li>Gargles</li> <li>Elastic bandages</li> <li>Superficial dressings</li> </ul>
Low	<ul style="list-style-type: none"> <li>Two or more self-limited or minor problems</li> <li>One stable chronic illness, eg, well controlled hypertension, non-insulin dependent diabetes, cataract, BPH</li> <li>Acute uncomplicated illness or injury, eg, cystitis, allergic rhinitis, simple sprain</li> </ul>	<ul style="list-style-type: none"> <li>Physiologic tests not under stress, eg, pulmonary function tests</li> <li>Superficial needle biopsies</li> <li>Clinical laboratory tests requiring arterial puncture</li> <li>Skin biopsies</li> </ul>	<ul style="list-style-type: none"> <li>Over-the-counter drugs</li> <li>Minor surgery with no identified risk factors</li> <li>Physical therapy</li> <li>Occupational therapy</li> <li>IV fluids without additives</li> </ul>
Moderate	<ul style="list-style-type: none"> <li>One or more chronic illnesses with mild exacerbation, progression, or side effects of treatment</li> <li>Two or more stable chronic illnesses</li> <li>Undiagnosed new problem with uncertain prognosis, eg, lump in breast</li> <li>Acute illness with systemic symptoms, eg, pyelonephritis, pneumonitis, colitis</li> <li>Acute complicated injury, eg, head injury with brief loss of consciousness</li> </ul>	<ul style="list-style-type: none"> <li>Physiologic tests under stress, eg, cardiac stress test, fetal contraction stress test</li> <li>Diagnostic endoscopies with no identified risk factors</li> <li>Deep needle or incisional biopsy</li> <li>Cardiovascular imaging studies with contrast and no identified risk factors, eg, arteriogram, cardiac catheterization</li> <li>Obtain fluid from body cavity, eg, lumbar puncture, thoracentesis, culdocentesis</li> </ul>	<ul style="list-style-type: none"> <li>Minor surgery with identified risk factors</li> <li>Elective major surgery (open, percutaneous or endoscopic) with no identified risk factors</li> <li>Prescription drug management</li> <li>Therapeutic nuclear medicine</li> <li>IV fluids with additives</li> <li>Closed treatment of fracture or dislocation without manipulation</li> </ul>
High	<ul style="list-style-type: none"> <li>One or more chronic illnesses with severe exacerbation, progression, or side effects of treatment</li> <li>One or more chronic illnesses or injuries that pose a significant risk to the patient, eg, severe asthma, severe pulmonary embolus, severe esophageal distress, severe severe illness requiring hospitalization, severe illness with potential threat to self or others</li> <li>peritonitis, acute renal failure</li> <li>An abrupt change in neurologic status, eg, seizure, TIA, weakness, sensory loss</li> </ul>	<ul style="list-style-type: none"> <li>Cardiovascular imaging studies with contrast with identified risk factors</li> <li>Cardiac electrophysiological tests</li> <li>Diagnostic Endoscopies with identified risk factors</li> <li>Discography</li> </ul>	<ul style="list-style-type: none"> <li>Elective major surgery (open, percutaneous or endoscopic) with identified risk factors</li> <li>Emergency surgery (open, percutaneous or endoscopic)</li> <li>Parenteral controlled substances</li> <li>Drug therapy requiring intensive monitoring for toxicity</li> <li>Resuscitate or to de-escalate care because of poor prognosis</li> </ul>

Risk table is displayed.  
Click **OK** or **Cancel** to close the popup.



OK

Cancel

File Edit Default View Tools Admin Utilities Window Help

Logout Save Clear Delete USA FAMILY MEDICINE DUFFY, ROBERT LAMAR MD Patient History Inbox PAQ Medications Templates Documents Images Procedures Apps

10/10/2010 02:50 PM : "E&M History" x

Alert NEXTGEN Intake Histories Summary SOAP Finalize OV Checkout Protocols

Visit type: ☐ New patient ☒ Established patient Encounter insurance:

Office Visit

Medical decision making PE calculation type

☐ Straight forward ☒ Low complexity ☐ Moderate complexity ☐ High complexity

☒ Multi system ☐ Single system:

Counseling

☐ Counseled greater than 50% of time and documented content ☒ Counseling Details

Total visit time (minutes):  Total counsel time (minutes):

E&M codes

New patient:	Consultation:	Preventive new:	Preventive established:
<input type="radio"/> 99201	<input type="radio"/> 99241	<input type="radio"/> 99381	<input type="radio"/> 99391
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<input type="radio"/> 99375	<input type="radio"/> 99564		
<input type="radio"/> 99376	<input type="radio"/> 99565		
<input type="radio"/> 99377	<input type="radio"/> 99566		
<input type="radio"/> 99378	<input type="radio"/> 99567		
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<input type="radio"/> 99380	<input type="radio"/> 99569		
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<input type="radio"/> 99393	<input type="radio"/> 99582		
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<input type="radio"/> 99395	<input type="radio"/> 99584		
<input type="radio"/> 99396	<input type="radio"/> 99585		
<input type="radio"/> 99397	<input type="radio"/> 99586		
<input type="radio"/> 99398	<input type="radio"/> 99587		
<input type="radio"/> 99399	<input type="radio"/> 99588		
<input type="radio"/> 99400	<input type="radio"/> 99589		
<input type="radio"/> 99401	<input type="radio"/> 99590		
<input type="radio"/> 99402	<input type="radio"/> 99591		
<input type="radio"/> 99403	<input type="radio"/> 99592		
<input type="radio"/> 99404	<input type="radio"/> 99593		
<input type="radio"/> 99405	<input type="radio"/> 99594		
<input type="radio"/> 99406	<input type="radio"/> 99595		
<input type="radio"/> 99407	<input type="radio"/> 99596		
<input type="radio"/> 99408	<input type="radio"/> 99597		
<input type="radio"/> 99409	<input type="radio"/> 99598		
<input type="radio"/> 99410	<input type="radio"/> 99599		
<input type="radio"/> 99411	<input type="radio"/> 99600		
<input type="radio"/> 99412	<input type="radio"/> 99601		
<input type="radio"/> 99413	<input type="radio"/> 99602		
<input type="radio"/> 99414	<input type="radio"/> 99603		
<input type="radio"/> 99415	<input type="radio"/> 99604		
<input type="radio"/> 99416	<input type="radio"/> 99605		
<input type="radio"/> 99417	<input type="radio"/> 99606		
<input type="radio"/> 99418	<input type="radio"/> 99607		
<input type="radio"/> 99419	<input type="radio"/> 99608		
<input type="radio"/> 99420	<input type="radio"/> 99609		
<input type="radio"/> 99421	<input type="radio"/> 99610		
<input type="radio"/> 99422	<input type="radio"/> 99611		
<input type="radio"/> 99423	<input type="radio"/> 99612		
<input type="radio"/> 99424	<input type="radio"/> 99613		
<input type="radio"/> 99425	<input type="radio"/> 99614		
<input type="radio"/> 99426	<input type="radio"/> 99615		
<input type="radio"/> 99427	<input type="radio"/> 99616		
<input type="radio"/> 99428	<input type="radio"/> 99617		
<input type="radio"/> 99429	<input type="radio"/> 99618		
<input type="radio"/> 99430	<input type="radio"/> 99619		
<input type="radio"/> 99431	<input type="radio"/> 99620		
<input type="radio"/> 99432	<input type="radio"/> 99621		
<input type="radio"/> 99433	<input type="radio"/> 99622		
<input type="radio"/> 99434	<input type="radio"/> 99623		

Make your selection here.

Then click the **Calculate Code** button.

The suggested code displays.

Next click the **Submit Code(s)** button.  
(Clicking this button after checking the code is something new users frequently overlook.)

☐ High complexity

**Counseling**

☐ Counseled greater than 30% of time and documented content Counseling Details

Total visit time (minutes):  Total counsel time (minutes):

**Submit code** E&M Guidelines: 1997: [Web](#)

Visit code:  Modifier(s):

	Calculated	Submitted
Visit Code:	99214	99214
eRx:		

**Provider sign off**

Physician sign off request:

☐ Submit to supervising physician

Supervising physician sign off:

☐ I have reviewed and agree with this plan of care

Medicare patient incident sign off:

☐ I have met with the patient

☐ I was available at the time of service and agree with the plan of care

The code appears in the Submitted box, confirming the submission.

**Established:**

☐ 99211 ☐ 99212 ☐ 99213 ☐ 99214 ☐ 99215

**Preventive counseling:**

☐ 99401 ☐ 99402 ☐ 99403 ☐ 99404

**Prenatal:**

Visit 4-6: ☐ 59425

Visits greater than 6: ☐ 59426

**Post Op:**

☐ 99024

**Behavioral health:**

☐ 90882 (Case consultation) ☐ 90847 (Family/couple therapy) ☐ 90853 (Group therapy)

**Behavioral health continued:**

**Individual therapy:**

☐ 90804 (20 - 30 mins) ☐ 90806 (45 - 50 mins) ☐ 90808 (75 - 80 mins)

**Individual therapy with med mgmt:**

☐ 90805 (10 - 30 mins) ☐ 90807 (45 - 50 mins) ☐ 90809 (75 - 80 mins)

☐ 90801 (Initial psych eval/intake) ☐ 90862 (Med management)

If you have a preventive services visit type selected for the encounter, you don't have to select Decision Making Level. Simply clicking **Code Check** will select the age-appropriate preventive services code.

Visit type:  [Add or Update Assessment](#)

**Medical decision making** [View Risk Table](#)

☐ Straight forward  
☐ Low complexity  
☐ Moderate complexity  
☐ High complexity

**PE calculation type**

☒ Multi system  
☐ Single system:

**Counseling**

☐ Counseled greater than 50% of time and documented content [Counseling Details](#)

Total visit time (minutes):  Total counsel time (minutes):

**Submit code** E&M Guidelines: 1997: [Web](#)

Visit code:  Modifier(s):

[Calculate Code](#)  
[Additional E&M Code](#)

[Submit Code\(s\)](#)

	Calculated	Submitted
Visit Code:	99394	
eRx:		

**Provider sign off**

Physician sign off request:  
☐ Submitting supervising physician for review  
Supervising physician:  
☐ I have reviewed and agree with the diagnosis and treatment plan

**Documents**

[Chart Note](#) [Patient Plan](#) [Consult Request](#) [Referral Request](#)  
[Summary Note](#) [Consult Thank You](#) [Referral Thank You](#)  
[CC: Providers](#) [Next](#)

A common example of this is a Well Child Visit.

We usually check Prenatal Visit 4-6 for prenatal visits; most of our prenatal care is paid globally, and this is handled later by HSF billing.

Navigation

OB Prenatal Add or Update Assessment # Pregnancy visits: 1

**Medical decision making**

☐ Straight forward  
☐ Low complexity  
☐ Moderate complexity  
☐ High complexity

**PE calculation type**

☒ Multi system  
☐ Single system:

[View Risk Table](#)

**Counseling**

☐ Counseled greater than 50% of time and documented content [Counseling Details](#)

Total visit time (minutes):  Total counsel time (minutes):

**Submit code** E&M Guidelines: 1997: [Web](#)

Visit code:  Modifier(s):

[Calculate Code](#)  
[Additional E&M Code](#)

[Submit Code\(s\)](#)

**Provider sign off**

Physician sign off request:  
☐ Submit to supervising physician for review

Supervising physician sign off:  
☐ I have reviewed and agree with the diagnosis and treatment plan

Medicare patient incident sign off:  
☐ I have met with the patient and participated with the plan of care  
☐ I was available at the time of service and agree with the plan of care

[Previous](#)

E&M codes [View Other Codes](#)

New patient: ☐ 99201 ☐ 99202 ☐ 99203 ☐ 99204 ☐ 99205

Established: ☐ 99211 ☐ 99212 ☐ 99213 ☐ 99214 ☐ 99215

Consultation: ☐ 99241 ☐ 99242 ☐ 99243 ☐ 99244 ☐ 99245

Preventive new: ☐ 99381 ☐ 99382 ☐ 99383 ☐ 99384 ☐ 99385 ☐ 99386 ☐ 99387

Preventive established: ☐ 99391 ☐ 99392 ☐ 99393 ☐ 99394 ☐ 99395 ☐ 99396 ☐ 99397

Preventive counseling: ☐ 99401 ☐ 99402 ☐ 99403 ☐ 99404

**Prenatal:**

Visit 4-6: ☒ 59425

Visits greater than 6: ☐ 59426

**Post Op:**

☐ 99024

**Behavioral health:**

☐ 90882 (Case consultation)  
☐ 90847 (Family/couple therapy)  
☐ 90853 (Group therapy)

**Behavioral health continued:**

Individual therapy:  
☐ 90804 (20 - 30 mins)  
☐ 90806 (45 - 50 mins)  
☐ 90808 (75 - 80 mins)

Individual therapy with med mgmt:  
☐ 90805 (10 - 30 mins)  
☐ 90807 (45 - 50 mins)  
☐ 90809 (75 - 80 mins)

☐ 90801 (Initial psych eval/intake)  
☐ 90862 (Med management)  
☐ 90857 (Medication group)

[View Detailed E&M History](#)

[Next](#)

**Navigation**

**Alert** **NEXTGEN** **Intake** **Histories** **Summary** **SOAP** **Finalize OV** **Checkout** **Protocols**

☐ New patient ☒ Established patient Encounter insurance:

Visit type:  [Add or Update Assessment](#)

**Medical decision making** **PE calculation type**

☐ Straight forward ☒ Low complexity ☐ Moderate complexity ☐ High complexity [View Risk Table](#)

☒ Multi system ☐ Single system:

**Counseling**

☐ Counseled greater than 50% of time and documented content [Counseling Details](#)

Total visit time (minutes):  Total counsel time (minutes):

**Submit code** **E&M Guidelines: 1997:** [Web](#)

Visit code:  Modifier(s):

**E&M codes** [View Other Codes](#)

New patient:	Consultation:	Preventive new:	Preventive established:
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<input type="radio"/> 99202	<input type="radio"/> 99242	<input type="radio"/> 99382	<input type="radio"/> 99392
<input type="radio"/> 99203	<input type="radio"/> 99243	<input type="radio"/> 99383	<input type="radio"/> 99393
<input type="radio"/> 99204	<input type="radio"/> 99244	<input type="radio"/> 99384	<input type="radio"/> 99394
<input type="radio"/> 99205	<input type="radio"/> 99245	<input type="radio"/> 99385	<input type="radio"/> 99395
<input type="radio"/> Established: 99211	<input type="radio"/> Preventive counseling: 99401	<input type="radio"/> 99386	<input type="radio"/> 99396
<input type="radio"/> 99212	<input type="radio"/> 99402	<input type="radio"/> 99387	<input type="radio"/> 99397
<input type="radio"/> 99213	<input type="radio"/> 99403		
<input type="radio"/> 99214	<input type="radio"/> 99404		
<input type="radio"/> 99215			
<input type="radio"/> Prenatal: 99425			
<input type="radio"/> 99426			
<input type="radio"/> Post Op: 99024			
<input type="radio"/> 99025			
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<input type="radio"/> 99197			
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<input type="radio"/> 99200			

You can manually select a code, or override the suggested code, by picking one here.

Be cautious about upgrading from the suggested code, however. As mentioned above, if NextGen suggests a code that is significantly lower than you were expecting, you have probably overlooked properly documenting the HPI, ROS, or physical exam.

Logout Save Clear Delete USA FAMILY MEDICINE DUFFY, ROBERT LAMAR MD Patient History Inbox PAQ Medications Templates Documents Images Procedures Apps

10/10/2010 02:50 PM : "E&M History"

### A note about procedures

If you have performed a procedure, and you wish to also bill an E&M code at the same visit, you need to document the procedure and submit it to the superbill *before* you submit your E&M code. If you do this, the proper modifier will be added to your E&M code; if you don't, you may receive error messages, or one of your charges just may not get submitted.

(Charges for nursing services, such as injections and office labs, may be submitted at any time during the visit, without regard to the order of other services.)

Medicare patient incident sign off:  
☐ I have met with the patient and participated with the plan of care  
☐ I was available at the time of service and agree with the plan of care

Previous Next

Documents  
Chart Note Patient Plan Consult Request Referral Request  
Summary Note Consult Thank You Referral Thank You  
CC: Providers

Ready NGProd USA Health Services Foundation rlduffy CAP NUM SCRL 10/19/2010

Alert

Intake

Histories

Summary

SOAP

Finalize OV

Checkout

Protocols

NextGen

Visit type:

Office Visit

Medical decision making

Straight forward

Low complexity

Moderate complexity

High complexity

Counseling

Counseled greater than 50% of time and documented content

Total visit time (minutes):

Submit code

Visit code: 99214

Modifier(s):

Calculate Code

Additional E&M Code

Submit Code(s)

Provider sign off

Physician sign off request

Submit to supervising physician for review

Supervising physician sign off

I have reviewed and agree with the diagnosis and treatment plan

Medicare patient incident sign off

I have met with the patient and participated with the plan of care

I was available at the time of service and agree with the plan of care

Previous

Established patient

Add or Update Assessment

View Risk Table

PE

Calculation type

Simple systems

Complex systems

Guidelines: 1997

Calculated

Submitted

Visit Code: 99214 99214

eRx:

Prenatal:

Visit 4-6:

59425

Visits greater than 6:

59426

Post Op:

99024

Behavioral health:

90882 (Case consultation)

90847 (Family/couple therapy)

90853 (Group therapy)

Behavioral health continued:

Individual therapy:

90804 (20 - 30 mins)

90806 (45 - 50 mins)

90808 (75 - 80 mins)

Individual therapy with med mngrt:

90805 (10 - 30 mins)

90807 (45 - 50 mins)

90809 (75 - 80 mins)

90801 (Initial psych eval/intake)

90862 (Med management)

90857 (Medication group)

View Detailed E&M History

Documents

Chart Note

Patient Plan

Consult Request

Referral Request

Summary Note

Consult Thank You

Referral Thank You

CC: Providers

Next

After you have submitted your E&M code, you *cannot* come back to the E&M template to change it, though there *is* another way to do it. It is helpful to have your desired alternate CPT code in mind.



File

Edit

Default

View

Admin

Utilities

Window

Help

New

Select Patient... Alt + P

Modify Patient...

Close Patient

Save

Close

Print

Custom Print \ Fax

Export Patient Documents

Graph

Reports

ChartMail

Family Unit

NextMD

Patient Education

Patient Group

Summary

Superbill

System \ Practice Template

Work Flow... Alt + F3

User Workgroups... Alt + F5

Provider Approval Queue... F8

Change Enterprise/Practice...

Logout Alt + L

Exit Alt + X

CINE

DUFFY, ROBERT LAMAR MD

Patient

History

Inbox

PAQ

Medications

Templates

Documents

Images

Procedures

Apps

Historical

Summary

SOAP

Finalize DV

Checkout

Protocols

Encounter insurance:

Established patient

Update Assessment

Calculate Code

Additional E&M Code

Single system:

Counseling Details

Total counsel time (minutes):

E&M Guidelines: 1997: Web

Calculated

Submitted

Visit Code:

99214

99214

eRx:

Physician for review

with the diagnosis and treatment plan

Medicare patient incident sign off:

I have met with the patient and participated with the plan of care

I was available at the time of service and agree with the plan of care

E&M codes

New patient:

99201

99202

99203

99204

99205

99211

99212

99213

99214

99215

Consultation:

99241

99242

99243

99244

99245

99246

99401

99402

99403

99404

Preventive new:

99381

99382

99383

99384

99385

99386

99387

Preventive established:

99391

99392

99393

99394

99395

99396

99397

Prenatal:

Visit 4-6:

59425

Visits greater than 6:

59426

Post Op:

99024

Behavioral health:

90882 (Case consultation)

90847 (Family/couple therapy)

90853 (Group therapy)

Behavioral health continued:

Individual therapy:

90804 (20 - 30 mins)

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90805 (10 - 30 mins)

90807 (45 - 50 mins)

90809 (75 - 80 mins)

90801 (Initial psych eval/intake)

90862 (Med management)

90857 (Medication group)

View Detailed E&M History

Documents

Chart Note

Patient Plan

Consult Request

Referral Request

Summary Note

Consult Thank You

Referral Thank You

CC: Providers

Next

In this example, we'll change the 99214 code to 99213.

Click File, then Superbill.

Superbill NGProd USA Health Services Foundation rlduffy CAP NUM SCRL 10/19/2010

File Edit View Tools Admin Utilities Window Help

Logout Save Clear Delete USA FAMILY MEDICINE DUFFY, ROBERT LAMAR MD Patient History Inbox PAQ Templates Documents Medications ICS Apps Close

08/26/2010 02:49 PM : "Em History" Superbill x

Assigned Procedures:

Today's Services	Code	A/A	Units	Dx1	Dx2	Dx3	Dx4	Ref.Prov.
Office/outpatient visit, est.	99214		1	110.9				

Available Procedures:

Procedures Proc Srch Modifier Mod Srch

Category: Active Wound Care

- 97597 ACTIVE WOUND CARE, 15-20 CM
- 97598 ACTIVE WOUND CARE, 21-25 CM
- 97602 Rmv devitalized tiss from wo

Available Problems:

Problems

- Dx Routine infant or child health check (V20.2) 08/26/2010 02:49 PM Status (Routine)
- Dx Dermatitis, unspecified (686.9) 06/21/2010 11:38 PM
- Dx Dermatitis, unspecified (686.9) 03/24/2010 11:48 PM
- Dx Dermatitis, unspecified (686.9) 06/21/2010 11:38 PM Status (Stable)
- Dx Dermatitis, unspecified (686.9) 04/01/2010 12:00 PM Status (Chronic)
- Dx Apnea (786.03) 03/24/2010 11:48 PM
- Dx Epilepsy, unspecified (345.9) 03/24/2010 11:48 PM
- Dx Short stature (783.43) 03/24/2010 11:48 PM
- Dx Pharyngitis, Acute (462) 03/23/2010 09:23 AM
- Dx Pharyngitis, Acute (462) 02/08/2010 11:25 AM
- Dx Pharyngitis, Acute (462) 03/20/2010 10:53 AM

08/26/2010 02:49 PM Status (Routine)

06/21/2010 11:38 PM

03/24/2010 11:48 PM

06/21/2010 11:38 PM Status (Stable)

04/01/2010 12:00 PM Status (Chronic)

03/24/2010 11:48 PM

03/24/2010 11:48 PM

03/24/2010 11:48 PM

03/23/2010 09:23 AM

02/08/2010 11:25 AM

03/20/2010 10:53 AM

Delete Save

Select the undesired code, then click Delete.

Patient History

New Lock

- 08/26/2010 02:49 PM
- Peds Ho
- PEDS O
- Em Histo
- 07/01/2010 02:49 PM
- 06/21/2010 11:38 PM
- 04/01/2010 12:00 PM
- 03/31/2010 11:48 PM
- 03/30/2010 05:00 PM
- 03/29/2010 07:00 PM
- 03/28/2010 07:00 PM
- 03/27/2010 06:00 PM
- 03/26/2010 05:00 PM
- 03/25/2010 04:00 PM
- 03/24/2010 11:48 PM
- 03/23/2010 02:00 PM
- 03/23/2010 09:00 PM
- 03/20/2010 10:53 AM

Custom

USA Health Services Foundation rlduffy CAP NUM SCRL 09/12/2010

File Edit View Tools Admin Utilities Window Help

Logout Save Clear Delete

History Inbox PAQ Templates Documents Medications ICS Apps Close

08/26/2010 02:49 PM: Em History Superbill

Patient History

New Lock

Assigned Procedures:

Today's Services	Code	A/A	Units	Dx1	Dx2	Dx3	Dx4	Ref.Prov.
------------------	------	-----	-------	-----	-----	-----	-----	-----------

Type your desired code 99213. (You can also search by Description, but you will find it quicker to search for a specific code, if you know it.)

Available Procedures:

Procedures Proc Srch Modifier Mod Srch

Description

Code: 99213

Search

Available Problems:

Problems

Then click Search.

03/31/2010 11:02:00  
03/30/2010 05:00:00  
03/29/2010 07:00:00  
03/28/2010 07:00:00  
03/27/2010 06:00:00  
03/26/2010 05:00:00  
03/25/2010 04:00:00  
03/24/2010 11:00:00  
03/23/2010 02:00:00  
03/23/2010 09:00:00  
03/22/2010 10:00:00

Custom

USA Health Services Foundation rlduffy

Ready

09/12/2010

File Edit View Tools Admin Utilities Window Help

Logout Save Clear Delete USA FAMILY MEDICINE DUFFY, ROBERT LAMAR MD Patient History Inbox PAQ Templates Documents Medications ICS Apps Close

08/26/2010 02:49 PM : "Em History" Superbill x

Assigned Procedures:

Payer:  Change

Today's Services	Code	A/A	Units	Dx1	Dx2	Dx3	Dx4	Ref.Prov.

Available Procedures:

Procedures Proc Srch Modifier Mod Srch

Description  Search

Code:

☒ 99213: Office/outpatient visit, est, exp prob

Available Problems:

Problems

- ☒ Routine infant or child health check (V20.2) 08/26/2010 02:49 PM Status (Routine)
- Others
  - ☒ Upper Respiratory Infection, Acute (465.9)
    - 06/21/2010 11:38 PM
    - 03/24/2010 11:48 PM
  - ☒ Dermatophytosis of unspecified site (110.9)
    - 06/21/2010 11:38 PM Status (Stable)
    - 04/01/2010 12:00 PM Status (Chronic)
  - ☒ Apnea (786.03)
    - 03/24/2010 11:48 PM
  - ☒ Epilepsy, unspecified (345.9)
    - 03/24/2010 11:48 PM
  - ☒ Short stature (783.43)
    - 03/24/2010 11:48 PM
  - ☒ Pharyngitis, Acute (462)
    - 03/23/2010 09:23 AM
    - 02/08/2010 11:25 AM
    - 03/20/2010 10:53 AM

Dx 1 Dx 2 Dx 3 Dx 4

Patient History

New Lock

- 08/26/2010 02:49 PM
- 06/21/2010 11:38 PM
- 04/01/2010 12:00 PM
- 03/31/2010 11:48 PM
- 03/30/2010 05:00 PM
- 03/29/2010 07:00 PM
- 03/28/2010 07:00 PM
- 03/27/2010 06:00 PM
- 03/26/2010 05:00 PM
- 03/25/2010 04:00 PM
- 03/24/2010 11:48 PM
- 03/23/2010 02:00 PM
- 03/23/2010 09:23 AM
- 03/20/2010 10:53 AM

Custom

Ready USA Health Services Foundation rlduffy CAP NUM SCRL 09/12/2010

Your code will appear. Click the **Check Box** to select it.

The code is added to today's services.

Assigned Procedures

Payer:  Change

Today's Services	Code	A/A	Units	Dx1	Dx2	Dx3	Dx4	Ref.Prov.
Office/outpatient visit, est.	99213							

Available Procedures:

Procedures Proc Srch Modifier Mod Srch

Description  Search

Code:

☒ 99213: Office/outpatient visit, est, exp prob

Available Problems:

Problems

- ☒ Routine infant or child health check (V20.2) 08/26/2010 02:49 PM Status (Routine)
- ☐ Others
  - ☒ Upper Respiratory Infection, Acute (465.9)
    - 06/21/2010 11:38 PM
    - 03/24/2010 11:48 PM
  - ☒ Dermatophytosis of unspecified site (110.9)
    - 06/21/2010 11:38 PM Status (Stable)
    - 04/01/2010 12:00 PM Status (Chronic)
  - ☒ Apnea (786.03)
    - 03/24/2010 11:48 PM
  - ☒ Epilepsy, unspecified (345.9)
    - 03/24/2010 11:48 PM
  - ☒ Short stature (783.43)
    - 03/24/2010 11:48 PM
  - ☒ Pharyngitis, Acute (462)
    - 03/23/2010 09:23 AM
    - 02/08/2010 11:25 AM
    - 03/20/2010 10:53 AM

Dx 1 Dx 2 Dx 3 Dx 4

Patient History

New Lock

- 08/26/2010 02:49 PM
  - Peds Ho
  - PEDS O
  - Em Histo
- 07/01/2010 02:49 PM
- 06/21/2010 11:38 PM
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- 03/30/2010 05:00 PM
- 03/29/2010 07:00 PM
- 03/28/2010 07:00 PM
- 03/27/2010 06:00 PM
- 03/26/2010 05:00 PM
- 03/25/2010 04:00 PM
- 03/24/2010 11:48 PM
- 03/23/2010 02:00 PM
- 03/23/2010 09:23 AM
- 03/20/2010 10:53 AM

Custom

Ready

USA Health Services Foundation rlduffy CAP NUM SCRL 09/12/2010

File Edit View Tools Admin Utilities Window Help

Logout Save Clear Delete USA FAMILY MEDICINE DUFFY, ROBERT LAMAR MD Patient History Inbox PAQ Templates Documents Medications ICS Apps Close

08/26/2010 02:49 PM : "Em History" Superbill x

Patient History

Assigned Procedures:

Today's Services	Code	A/A	Units	Dx1	Dx2	Dx3	Dx4	Ref.Prov.
Office/outpatient visit, est.	99213							

At least one diagnosis needs to be associated with this charge. A list of diagnoses made today, and at other recent visits, displays here.

Available Procedures:

Procedures Proc Srch Modifier Mod Srch

Description Code Search

99213: Office/outpatient visit, est, exp prob

Available Problems:

Problems

Routine infant or child health check (V20.2) 08/26/2010 02:49 PM Status (Routine) Dx 1

Others

Upper Respiratory Infection, Acute (465.9) 06/21/2010 11:38 PM 03/24/2010 11:48 PM Dx 2

Dermatophytosis of unspecified site (110.9) 06/21/2010 11:38 PM Status (Stable) 04/01/2010 12:00 PM Status (Chronic) Dx 3

Apnea (786.03) 03/24/2010 11:48 PM Dx 4

Epilepsy, unspecified (345.9) 03/24/2010 11:48 PM

Short stature (783.43) 03/24/2010 11:48 PM

Pharyngitis, Acute (462) 03/23/2010 09:23 AM 02/08/2010 11:25 AM 03/20/2010 10:53 AM

Select a diagnosis, then click the Dx 1 button.

Ready USA Health Services Foundation rlduffy CAP NUM CRL 09/12/2010

File Edit View Tools Admin Utilities Window Help

Logout Save Clear Delete USA FAMILY MEDICINE DUFFY, ROBERT LAMAR MD Patient History Inbox PAQ Templates Documents Medications ICS Apps Close

08/26/2010 02:49 PM : "Em History" Superbill

Assigned Procedures:

Today's Services	Code	A/A	Units	Dx1	Dx2	Dx3	Dx4	Ref.Prov.
Office/outpatient visit, est.	99213		1	465.9				

The diagnosis code appears here.

Available Procedures:

Procedures Proc Srch Modifier Mod Srch

Description Code Search

99213

Available Problems:

Problems

Dx Routine infant or child health check (V20.2) 08/26/2010 02:49 PM Status (Routine)

Dx Others

Dx Upper Respiratory Infection, Acute (465.9) 06/23/2010 11:38 PM

Dx Dermal phytosis of unspecified site (110.9) 03/24/2010 11:48 PM

Dx Epilepsy, unspecified (345.9) 03/24/2010 11:48 PM

Dx Short stature (783.43) 03/24/2010 11:48 PM

Dx Pharyngitis, Acute (462) 03/23/2010 09:23 AM

02/08/2010 11:25 AM

03/20/2010 10:53 AM

Click Save, then close the Superbill tab. (If asked to confirm your changes, answer Yes.)

Patient History

New Lock

08/26/2010 02:49 PM

Peds Ho

PEDS O

Em Histo

07/01/2010 02:49 PM

06/21/2010 11:38 PM

04/01/2010 12:00 PM

03/31/2010 11:38 PM

03/30/2010 05:00 PM

03/29/2010 07:00 PM

03/28/2010 07:00 PM

03/27/2010 06:00 PM

03/26/2010 05:00 PM

03/25/2010 04:00 PM

03/24/2010 11:38 PM

03/23/2010 02:49 PM

03/23/2010 09:23 AM

03/20/2010 10:53 AM

Custom

USA Health Services Foundation rlduffy CAP NUM 09/12/2010

Visit type: ☐ New patient ☒ Established patient Encounter insurance:   
 Office Visit [Add or Update Assessment](#) [View Other Codes](#)

## Medical decision making

- ☐ Straight forward  
☐ Low complexity  
☐ Moderate complexity  
☐ High complexity

[View Risk Table](#)

## PE calculation type

- ☐ Multi system  
☐ Single system:

## Counseling

- ☐ Counseled greater than 50% of time and documented content

[Counseling Details](#)Total visit time (minutes): Total counsel time (minutes): 

## Submit code

E&M Guidelines: 1997: [Web](#)

## E&amp;M codes

## New patient:

- ☐ 99201  
☐ 99202  
☐ 99203  
☐ 99204  
☐ 99205

## Established:

- ☐ 99211  
☐ 99212  
☐ 99213  
☐ 99214  
☐ 99215

## Consultation:

- ☐ 99241  
☐ 99242  
☐ 99243  
☐ 99244  
☐ 99245

## Preventive counseling:

- ☐ 99401  
☐ 99402  
☐ 99403  
☐ 99404

## Preventive new:

- ☐ 99381  
☐ 99382  
☐ 99383  
☐ 99384  
☐ 99385

## Preventive established:

- ☐ 99386  
☐ 99387

## Preventive established:

- ☐ 99391  
☐ 99392  
☐ 99393  
☐ 99394  
☐ 99395

## Preventive established:

- ☐ 99396  
☐ 99397

If you ever make a billing error that you are unable to remedy, contact your clinic superuser to help you correct it.

## Provider sign off

Physician sign off request:

- ☐ Submit to supervising physician for review

Supervising physician sign off:

- ☐ I have reviewed and agree with the diagnosis and treatment plan

Medicare patient incident sign off:

- ☐ I have met with the patient and participated with the plan of care  
☐ I was available at the time of service and agree with the plan of care

## Prenatal:

- ☐ 99442

## Visits greater than:

- ☐ 99442

## Post Op:

- ☐ 99024

## Behavioral health:

- ☐ 90882 (Case consultation)

- ☐ 90847 (Family/couple therapy)

- ☐ 90853 (Group therapy)

## Individual therapy:

- ☐ 90806 (45 - 50 mins)

- ☐ 90807 (45 - 50 mins)

- ☐ 90805 (10 - 30 mins)

- ☐ 90806 (45 - 50 mins)

- ☐ 90807 (45 - 50 mins)

- ☐ 90805 (10 - 30 mins)

- ☐ 90806 (45 - 50 mins)

- ☐ 90807 (45 - 50 mins)

- ☐ 90805 (10 - 30 mins)

- ☐ 90806 (45 - 50 mins)

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- ☐ 90807 (45 - 50 mins)

- ☐ 90805 (10 - 30 mins)

- ☐ 90806 (45 - 50 mins)

- ☐ 90807 (45 - 50 mins)

- ☐ 90805 (10 - 30 mins)

- ☐ 90806 (45 - 50 mins)

- ☐ 90807 (45 - 50 mins)

## Documents

[Chart Note](#)[Patient Plan](#)[Consult Request](#)[Referral Request](#)[Summary Note](#)[Consult Thank You](#)[Referral Thank You](#)

CC: Providers

[View Detailed E&M History](#)[Previous](#)[Next](#)

This concludes the  
NextGen E&M Coding demonstration.

If a mime is arrested do they tell him he has the right to talk?

Do they tell him he has the right to remain silent?