

# E/M office-visit changes on track for 2021: What doctors must know

AUG 5, 2020

**Kevin B. O'Reilly**

News Editor

**What's the news:** The Centers for Medicare & Medicaid Services (CMS) signaled in this week's proposed Medicare physician payment schedule that it will implement finalized E/M office-visit guidelines and pay rates as planned for Jan. 1, 2021. That means big changes are ahead in the coding, documentation and payment of these evaluation-and-management services, but physicians have a raft of E/M resources from the AMA to help them prepare for these shifts.

"The AMA appreciates that CMS will implement significant increases to the payment for office visits, based on recommendations on resource costs from the AMA/Specialty Society RVS Update Committee [RUC]," said AMA President Susan R. Bailey, MD.

An 11% reduction in the Medicare conversion factor is necessitated by proposed additional spending of \$10.2 billion. The RUC recommendations for office-visit payment increases account for only half of this additional spending, and therefore, half of the reduction. The remaining spending increases and resulting conversion factor reduction is attributed various CMS proposals to increase valuation for specific services.

"Unfortunately, these office-visit payment increases, and a multitude of other new CMS-proposed payment increases, are required by statute to be offset by payment reductions to other services, through an unsustainable reduction of nearly 11% to the Medicare conversion factor. For this reason, the AMA strongly urges Congress to waive Medicare's budget neutrality requirement for the office visit and other payment increases. Physicians are already experiencing substantial economic hardships due to COVID-19, so these pay cuts could not come at a worse time."

Learn more about why cutting Medicare pay during COVID-19 pandemic doesn't make sense.

**Why it's important:** Between July 2018 and July 2019, the AMA worked with CMS and convened specialty societies and other health professionals to simplify and streamline the coding and

documentation for E/M office visits, making them clinically relevant, and reducing excessive administrative burden.

“Reducing documentation overload and providing physicians more time with patients, not paperwork, was the fundamental purpose of overhauling the E/M office visit guidelines,” said Dr. Bailey. “With less than five months until the transition from the old guidelines to the simpler, more flexible guidelines, the AMA is dedicated to helping physician practices get the full benefit of the burden relief the change is designed to bring.”

Key elements of the E/M office-visit overhaul include:

- Eliminating history and physical exam as elements for code selection. While significant to both visit time and medical decision-making, these elements alone should not determine a visit’s code level.
- Allowing physicians to choose whether their documentation is based on medical decision-making or total time. This builds on the movement to better recognize the work involved in non-face-to-face services like care coordination.
- Changing medical decision-making criteria to move away from simply adding up tasks to instead focus on tasks that affect the management of a patient’s condition.

Dig deeper on how 2021 E/M guidelines could ease physicians’ documentation burdens.

While CMS recognized the increases in the payment bundles for maternity care and a few other select services, the visits within the surgical global payment bundle remains unchanged. The AMA strongly supports CMS adoption of the office-visit changes and continues to urge CMS to incorporate the office-visit payment increases into the global surgery packages.

“There is a lot for physician practices to understand before the new E/M office visit guidelines take effect Jan. 1, 2021,” said Dr. Bailey. “The AMA is helping physician practices prepare now for the transition and offers authoritative resources to anticipate the operational, infrastructural and administrative workflow adjustments that will result from the planned transition.”

**Learn more:** The AMA has got you covered when it comes to helping your prepare for the 2021 changes to E/M coding and documentation guidelines.

The AMA’s extensive resource library includes:

- CPT® Evaluation and Management. A historical overview and summary of the E/M coding revision for office visits.
- 10 tips to prepare your practice for E/M office visit changes: A checklist with linked resources to guide physician practices for a smooth transition to the simpler and more flexible E/M

office visit documentation-and-coding guidelines.

- Office Evaluation and Management (E/M) CPT Code Revisions. An educational module providing an overview of the new E/M coding revisions for office visits that will help physicians and practice staff understand how these foundational changes will affect their work and reduce their documentation burden.
- Revisions to the CPT E/M Office Visits: New Ways to Report Using Time. This separate educational module provides detailed information on how the new E/M coding revisions for office visits have clarified and simplified the time component of code selection to reduce administrative burden.
- Revisions to the CPT E/M Office Visits: New Ways to Report Using Medical Decision Making (MDM). This module offers more detailed information on how the new E/M coding revisions for office visits have increased clarity around definitions and criteria for code-level selection based on good patient care.
- Implementing CPT Evaluation and Management Revisions. Video presentations with step-by-step guidance to help the health care community hit the ground running with the new E/M office-visit changes.

The AMA's work in this area is part of its continuing effort to cut administrative burdens and other obstacles to patient care.