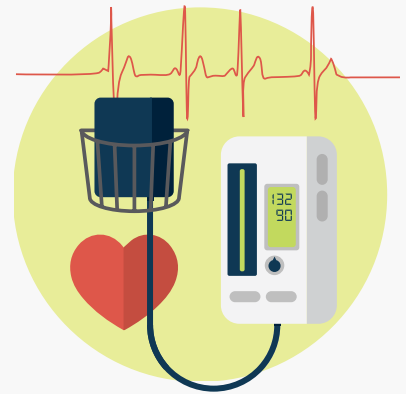


Impact of Vital Signs on Level of Service Billed



THE MYTH

The number of vital signs recorded during an outpatient visit impacts the level of service which may be billed.

DEBUNKING THE MYTH

In light of the 2021 changes to the outpatient evaluation and management (E/M) coding requirements, the number of vital signs recorded during a patient visit no longer impacts the level of service which may be billed.

BACKGROUND

In 2021, significant changes to the Current Procedural Terminology (CPT®) Evaluation and Management (E/M) codes went into effect. With the previous standards from 1995 and 1997, there were three main components that contributed to determining the appropriate level of service (LOS): history, examination, and medical decision-making (MDM). For vital signs to count as part of the examination component, three out of seven vital signs had to be recorded.

The 2021 E/M services guidelines were designed to streamline documentation and reduce clinically irrelevant documentation burdens for physicians. This upgrade affects all outpatient visit E/M LOS billing standards. The guidelines provide that documentation for coding and billing purposes be based on either the level of MDM alone or the total amount of time spent providing care for the patient on the day of the visit (including before and after the visit, not just face-to-face time). In other words, determination of the appropriate level of service no longer depends on the breadth of documented history and examination. Only the medically appropriate history and examination should be included, thus reducing documentation burden.¹

Resources

- [Interactive AMA Resources Providing Guidance on how to Implement 2021 E/M Coding Changes](#). Accessed June 2023.
- [AMA Guidance on E/M Office or Other Outpatient & Prolonged Services Code Changes](#). Accessed June 2023.
- [Simplified Outpatient Documentation and Coding STEPS Forward Toolkit](#). Accessed June 2023.
- [CPT Evaluation and Management AMA Microsite](#). Accessed July 2023.
- [Debunking Regulatory Myths Fact Sheet: Documenting Time for Each Task During Outpatient Visits](#). Accessed July 2023.
- [Physician Fee Schedule Payment for Office/Outpatient Evaluation and Management Visits January 2021 Fact Sheet](#). Accessed August 2023.

References

1. AMA STEPS Forward®. Simplified Outpatient Documentation and Coding Toolkit. Published online August 2022. Accessed July 6, 2023. <https://www.ama-assn.org/practice-management/ama-steps-forward/simplified-outpatient-documentation-and-coding-toolkit>.