

In the April 7, 2000 final rule (65 FR 18434), we stated that in order to ensure proper payment to hospitals, it was important that emergency and clinic visits be coded properly. To facilitate proper coding, we required each hospital to create an internal set of guidelines to determine what level of visit to report for each patient. In the August 24, 2001 proposed rule (66 FR 44672), we asked for public comments regarding national guidelines for hospital coding of emergency and clinic visits. Commenters recommended that we keep the current E/M coding system until facility-specific E/M codes for emergency department and clinic visits, along with national coding guidelines, were established. Commenters also recommended that we convene a panel of experts to develop codes and guidelines that are simple to understand, implement, and that are compliant with the Health Insurance Portability and Accountability Act (HIPAA) requirements.

*Outcome of January 2002 APC Panel Meeting*

During its January 2002 meeting, the APC Panel made several recommendations regarding coding for evaluation and management services. After careful review and consideration of written comments, oral testimony, and the APC Panel's recommendations, we proposed the following in the August 9, 2002 proposed rule (for implementation no earlier than January 2004):

1. To develop five G codes to describe emergency department services:  
GXXX1—Level 1 Facility Emergency Services;

GXXX2—Level 2 Facility Emergency Services;

GXXX3—Level 3 Facility Emergency Services;

GXXX4—Level 4 Facility Emergency Services; and

GXXX5—Level 5 Facility Emergency Services.

2. To develop five G codes to describe clinic services:

GXXX6—Level 1 Facility Clinic Services;

GXXX7—Level 2 Facility Clinic Services;

GXXX8—Level 3 Facility Clinic Services;

GXXX9—Level 4 Facility Clinic Services; and

GXXX10—Level 5 Facility Clinic Services.

3. To replace CPT Visit Codes with the 10 new G codes for OPPS payment purposes.

4. To establish separate documentation guidelines for emergency visits and clinic visits.

In our November 1, 2002 final rule (67 FR 66792), we stated that the most appropriate forum for development of new code definitions and guidelines would be an independent expert panel that would make recommendations to us. In light of the expertise of organizations such as the American Hospital Association (AHA) and the American Health Information Management Association (AHIMA), we felt that these organizations were

particularly well equipped to make recommendations to us and to provide ongoing education to providers.

On their own initiative, the AHA and the AHIMA convened an independent expert panel of individuals from various organizations to develop code descriptions and guidelines for hospital emergency department and clinic visits and to make recommendations to us.

The panel recommended the following to us.

1. We should make payment for emergency and clinic visits based on four levels of care.

2. We should create HCPCS codes to describe these levels of care as follows:

GXXX1—Level 1 Emergency Visit.

GXXX2—Level 2 Emergency Visit.

GXXX3—Level 3 Emergency Visit.

GXXX4—Critical Care provided in the emergency department.

GXXX5—Level 1 Clinic Visit.

GXXX6—Level 2 Clinic Visit.

GXXX7—Level 3 Clinic Visit.

GXXX8—Critical Care provided in the clinic.

3. We should replace all the HCPCS currently in APCs 600, 601, 602, 610, 611, 612, and 620 with GXXX1 through GXXX8.

4. Based on the above recommendations, we would crosswalk payments as follows: GXXX1 to APC 610, GXXX2 to APC 611, GXXX3 to APC 612, GXXX4 to APC 620, GXXX5 to APC 600, GXXX6 to APC 601, GXXX7 to APC 602, and GXXX8 to APC 620.

These crosswalks and code descriptions are listed in Table 14 below.

TABLE 14.—CROSSWALKS OF 2003 HCPCS CODES TO THE PROPOSED G CODES

2003 HCPCS description	2004 G code description	2003 HCPCS	2004 Proposed G codes	APC	Payment amount
Emergency department visit .....	Level 1 Emergency Visit .....	99281	GXXX1	0610	\$74.70
		99282			
Emergency department visit .....	Level 2 Emergency Visit .....	99283	GXXX2	0611	130.77
Emergency department visit .....	Level 3 Emergency Visit .....	99284	GXXX3	0612	226.30
		99285			
Critical care .....	Level 4 Critical Care provided in the emergency department.	99291	GXXX4	0620	491.01
		99292			
Office/outpatient visit, new .....	Level 1 Clinic Visit .....	99201	GXXX5	0600	50.62
		99202			
Office/outpatient visit, new .....	Level 2 Clinic Visit .....	99203	GXXX6	0601	53.56
Office/outpatient visit, new .....	Level 3 Clinic Visit .....	99204	GXXX7	0602	82.07
		99205			
Office/outpatient visit, established .....	Level 1 Clinic Visit .....	99211	GXXX5	0600	50.62
		99212			
Office/outpatient visit, established .....	Level 2 Clinic Visit .....	99213	GXXX6	0601	53.56
Office/outpatient visit, established .....	Level 3 Clinic Visit .....	99214	GXXX7	0602	82.07
		99215			
Office consultation .....	Level 1 Clinic Visit .....	99241	GXXX5	0600	50.62
		99242			
Office consultation .....	Level 2 Clinic Visit .....	99243	GXXX6	0601	53.56
Office consultation .....	Level 3 Clinic Visit .....	99244	GXXX7	0602	82.07
		99245			