

Facility level 5 record review (CPT 99285)

Summary of change

Effective March 30, 2021, Wellpoint will review the intensity of CPT® code 99285 evaluation and management (E&M) services provided to assess whether the level billed matches the services performed. E&M code levels submitted must be supported by the medical record and *Emergency Medical Treatment and Labor Act (EMTALA)* guidelines to determine appropriate level of care.

What is the impact of this change?

Wellpoint will deny the revenue code 452 on the claim unless there is appropriate supporting documentation in the medical record to support CPT code 99285. Claims will need to be resubmitted at the appropriate level of care or documentation submitted supporting the level that was billed.

Procedure coding information reported on the claim by the facility provider will be evaluated using the medical record, *EMTALA* guidelines, and the guidelines developed by the American College of Emergency Physicians to determine the appropriate visit level. The level of visit reimbursed will be based on resource consumption by the facility, as represented by the intensity of the procedures rendered during the ER visit. Facilities should be using the most appropriate revenue and CPT/HCPCS codes for all services rendered during the ER visit.

What if I need assistance?

If you have questions about this communication or need assistance with any other item, contact your local Provider Experience representative or call Provider Services at **833-707-0868** Monday through Friday, 8 a.m. to 6 p.m. ET.