

2021 wRVU's

New Patient Office/Outpatient Visits

wRVU

♣ New patient Level 2 (99202)	15-29 min	0.93
♣ New patient Level 3 (99203)	30-44 min	1.60
♣ New patient Level 4 (99204)	45-59 min	2.60
♣ New patient Level 5 (99205)	60-74 min	3.50

Established Patient Office/Outpatient Visits

♣ Established patient Level 1 (99211)	nursing level	0.18
♣ Established patient Level 2 (99212)	10-19 min	0.70
♣ Established patient Level 3 (99213)	20-29 min	1.30
♣ Established patient Level 4 (99214)	30-39 min	1.92
♣ Established patient Level 5 (99215)	40-54 min	2.80

Visit Complexity Assoc w/specific Office/Outpatient E/M's

♣ GPC1X Visit complexity inherent to evaluation and management associated with primary medical care services for qualified severe or chronic conditions (Add on code, listed separately in addition to an E/M visit)	0.33
---	------

Prolonged Services (applies when billing when based on total time only)

♣ +99417 New or Established patient services per each addtl 15 minutes (includes provider time with or without direct patient contact on the same date as the primary service; list separately in addition to codes 99205, 99215)	0.61
--	------

Office/Outpt Consult Charges

♣ Initial Office/Outpt Consult Level 1 (99241)	15 min	0.64
♣ Initial Office/Outpt Consult Level 2 (99242)	30 min	1.34
♣ Initial Office/Outpt Consult Level 3 (99243)	40 min	1.88
♣ Initial Office/Outpt Consult Level 4 (99244)	60 min	3.02
♣ Initial Office/Outpt Consult Level 5 (99245)	80 min	3.77

Initial Hospital Admits (H&P)

♣ Initial Hospital Care Level 1 (99221)	30 min	1.92
♣ Initial Hospital Care Level 2 (99222)	50 min	2.61
♣ Initial Hospital Care Level 3 (99223)	70 min	3.86

Initial Inpatient Consult Charges

♣ Initial Inpatient Consult Level 1 (99251) 20 min	1.00
♣ Initial Inpatient Consult Level 2 (99252) 40 min	1.50
♣ Initial Inpatient Consult Level 3 (99253) 55 min	2.27
♣ Initial Inpatient Consult Level 4 (99254) 80 min	3.29
♣ Initial Inpatient Consult Level 5 (99255) 110 min	4.00

Subsequent Hospital Care

♣ Subsequent Hospital Care Level 1 (99231) 15 min 0.76	1.39
♣ Subsequent Hospital Care Level 2 (99232) 25 min	
♣ Subsequent Hospital Care Level 3 (99233) 35 min 2.00	

Critical Care

w/RVU

♣ Critical Care; First Hour Document Time (99291) 4.50	
♣ Critical Care; Additional 30 Mins Document Time (99292) 2.25	
♣ Code Blue (92950)	4.00

Newborn

♣ Initial hospital or birthing center care, normal newborn infant (per day) (99460)	1.92
♣ Subsequent hospital care, normal newborn (per day) (99462)	0.84

Neonatal/Pediatric Critical Care

♣ Initial inpatient neonatal critical care (per day) age 28 days or younger (99468) 18.46	
♣ Subsequent inpatient neonatal critical care (per day) age 28 days or younger (99469) 7.99	
♣ Initial inpatient pediatric critical care (per day) age 29 days to 24 mo (99471) 15.98	
♣ Subsequent inpatient pediatric critical care (per day) age 29 days to 24 mo (99472) 7.99	
♣ Initial inpatient pediatric critical care (per day) age 2 to 5 years (99475) 11.25	
♣ Subsequent inpatient pediatric critical care (per day) age 2 to 5 years (99476) 6.75	

Newborn Intensive Care (Initial & Follow up)

♣ Initial hospital care (per day) neonate age 28 days or younger, requiring intensive observation, frequent interventions, and other intensive care services (99477) 7.00	
♣ Subsequent intensive care (per day) recovering very-low-birth-weight infant (i.e. current body weight <1,500 g) (99478) 2.75	
♣ Subsequent intensive care (per day) recovering very-low-birth-weight infant	

(i.e. current body weight <1,500 g – 2,500g) (99479)
2.50

- ♣ Subsequent intensive care (per day) recovering infant
(i.e. current body weight <2,501 g – 5,000g) (99480) 2.40

Observation Charges

wRVU

- ♣ Initial Observation Visit Level 1 (99218) 1.92
- ♣ Initial Observation Visit Level 2 (99219) 2.60
- ♣ Initial Observation Visit Level 3 (99220) 3.56
- ♣ Observation Visit Low - Admit/DC Same Day (99234) 2.56
- ♣ Observation Visit Mod – Admit/DC Same Day (99235) 3.24
- ♣ Observation Visit High - Admit/DC Same Day (99236) 4.20
- ♣ Observation Care Discharge Day (99217) 1.28

Subsequent Observation Charges

- ♣ Subsequent observation care Level 1 (99224) 0.76
- ♣ Subsequent observation care Level 2 (99225) 1.39
- ♣ Subsequent observation care Level 3 (99226) 2.00

Discharge Charges (Document Time)

- ♣ Hospital Discharge < 30 Min (99238) 1.28
- ♣ Hospital Discharge > 30 Min (99239) 1.90
- ♣ Home Health Care Order (G0180) 0.67

Prolonged Services Inpatient (Face-To-Face) (Document Time)

- ♣ Prolonged physician inpt service; first hour (99356) 1.71
- ♣ Prolonged physician inpt service; each addt'l 30 min (99357) 1.71

Prolonged Services Office/Outpatient (Face-To-Face) (Document Time)

- ♣ Prolonged physician office/outpt service; first hour (99354) 1.77
- ♣ Prolonged physician office/outpt service; each addt'l 30 min (99355) 1.77

ED Visits

- ♣ Emergency Dept Visit Level 1 (99281) 0.45
- ♣ Emergency Dept Visit Level 2 (99282) 0.88
- ♣ Emergency Dept Visit Level 3 (99283) 1.34
- ♣ Emergency Dept Visit Level 4 (99284) 2.56
- ♣ Emergency Dept Visit Level 5 (99285) 3.80

Hospital Procedures

- ♣ PIC Line (36569) 1.82
- ♣ Central Venous Cath. (36556) 2.50
- ♣ Peripheral Inserted Access (36571) 5.34
- ♣ Ultrasound Guidance (76937) PC 0.30

♣ Vent Management Initial (94002)	1.99	
♣ Vent Mgmt; each sub day (94003)		1.37
Other		
♣ Order not listed elsewhere		
Arthrocentesis (20610)	0.79	
Continuous Glucose Monitoring Interp/Report (95251)	0.70	
Dexa Scan interpretation (77070.26 mod)		0.20
Bone Marrow Biopsy		
♣ 38220 Bone Marrow; Aspiration only	1.08	
♣ 38221 Bone Marrow Biopsy , Needle or Trocar	1.37	
♣ G0364 Bone Marrow Asp w/BM Bx		.16
Initial Skilled Nursing Home Services		wRVU
♣ Initial Admission Level 1 (99304)		1.64
♣ Initial Admission Level 2 (99305)		2.35
♣ Initial Admission Level 3 (99306)		3.06
♣ Annual nursing facility assessment (99318)		1.71
Subsequent Skilled Nursing Home Services		
♣ Subsequent visit Level 1 (99307)	0.76	
♣ Subsequent visit Level 2 (99308)	1.16	
♣ Subsequent visit Level 3 (99309)	1.55	
♣ Subsequent visit Level 4 (99310)	2.35	
Discharge skilled nursing home services		
♣ Discharge visit (99315)	1.28	
♣ Discharge visit (99316) greater than 30 minutes (must be documented)		1.90
Assisted Living Facility Services—New Patient		
♣ New patient visit Level 1 (99324)	1.01	
♣ New patient visit Level 2 (99325)	1.52	
♣ New patient visit Level 3 (99326)	2.63	
♣ New patient visit Level 4 (99327)	3.46	
♣ New patient visit Level 5 (99328)	4.09	
Assisted Living Facility Services—Established Patient		
♣ New patient visit Level 1 (99334)	1.07	
♣ New patient visit Level 2 (99335)	1.72	
♣ New patient visit Level 3 (99336)	2.46	
♣ New patient visit Level 4 (99337)	3.58	
Transitional Care Management Services (TCM)		
• TCM-face to face w/in 14 days (mod mdm) (99496)		2.11
• TCM-face to face w/in 7 days (high mdm) (99495)		3.05

Preventive Medicine Visits

• IPPE (Welcome to Medicare	(G0402)	2.43
• MAW Initial (Annual Wellness Visit)	(G0438)	2.43
• MAW Subsequent (Annual Wellness Visit)	(G0439)	1.50
• Preventive Med Physical-New (18-39 yrs)	(99385)	1.92
• Preventive Med Physical-New (40-64 yrs)	(99386)	2.33
• Preventive Med Physical-Est (18-39 yrs)	(99395)	1.75
• Preventive Med Physical-Est (40-64 yrs)	(99396)	1.90

eConsults

- **This service below has specific instructions (non-pandemic)**
 - **The consultant should not have seen the patient in the prior 14 days-face to face or has a face to face in the next 14 days—these services cannot be billed**
- Interprofessional tele/internet/HER assess/mgmt. services provided by a physician, including a written report to the requesting provider; 5 minutes or more for medical consult time
(99451) 0.50

Services below have specific instructions (non-pandemic)

- **If the patient was seen 24 hrs after or the next available appt—services cannot bill.**
- **Or if the service refers to another service provided 7 days prior—services cannot bill.**

Telephone Services (MD/APP) Non-Face to Face Services

• Telephone E/M services; 5-10 min	(99441)	0.48
• 11-20 minutes	(99442)	0.97
• 21-30 minutes	(99443)	1.50

Telephone Services (qualified health professionals only) Non-Face to Face Services

*Verify who qualifies

• Telephone E/M Services; 5-10 minutes	(98966)	0.25
• 11-20 minutes	(98967)	0.50
• 21-30 minutes	(98968)	0.75