2021 wRVU's

	Patient Office/Outpatient Visits	<u>wRVU</u>
-	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
Estab	lished 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 wi	th primary
	medical care services for qualified severe or chronic conditions	
	(Add on code, listed separately in addition to an E/M visit)	0.33
Prolo	nged Services (applies when billing when based on total time only)	
	+99417 New or Established patient services per each addt'l 15 minutes	0.61
(ir	ncludes provider time with or without direct patient contact on the same date as	the primary
se	rvice; list separately in addition to codes 99205, 99215)	
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	1.50 2.27
•	Initial Inpatient Consult Level 3 (99253) 55 min Initial Inpatient Consult Level 4 (99254) 80 min	1.50 2.27 3.29
:	Initial Inpatient Consult Level 3 (99253) 55 min	1.50 2.27
:	Initial Inpatient Consult Level 3 (99253) 55 min Initial Inpatient Consult Level 4 (99254) 80 min	1.50 2.27 3.29
:	Initial Inpatient Consult Level 3 (99253) 55 min Initial Inpatient Consult Level 4 (99254) 80 min Initial Inpatient Consult Level 5 (99255) 110 min	1.50 2.27 3.29
:	Initial Inpatient Consult Level 3 (99253) 55 min Initial Inpatient Consult Level 4 (99254) 80 min Initial Inpatient Consult Level 5 (99255) 110 min equent Hospital Care	1.50 2.27 3.29 4.00

Critical Care	
 Critical Care; First Hour Document Time (99291) 	4.50
 Critical Care; Additional 30 Mins Document Time (99292) 	2.25
• Code Blue (92950)	4.00
code Dide (32330)	1.00
Observation Charges	<u>wRVU</u>
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
subsequent observation care zevers (33220)	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 <u>Inpatient</u> (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 Tro 	ocar	1.37
■ G0364 Bone Marrow Asp w/BM Bx		.16
Coso i Boile Mariow 765 11, Bit Bx		.10
Initial Skilled Nursing Home Services		<u>wRVU</u>
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 mir 	nutes (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 Pati	ent	
 New patient visit Level 1 (99334) 	Cit	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
New patient visit Level 4 (55557)		3.30
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
Duovantiva Madiaira Malta		
Preventive Medicine Visits	(00403)	2.42
IPPE (Welcome to Medicare AAAA(Asiisis (Aasas alaMallasas (Citi)))	(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)

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