

Payment Integrity and Recovery Program
Concept Number: 003
Concept Name: 003 New Patient Visits Incorrect Coding
Date: 01/01/2022
Claim Type: Professional
Line(s) of Business: Medicaid, MMP/Duals
<p>Description:</p> <p>The New Patient Visits Incorrect Coding Payment Integrity and Recovery Audit Program addresses the reimbursement of Current Procedural Terminology (CPT[®]) and Healthcare Common Procedure Coding System (HCPCS) codes for new versus established patients.</p> <p>For purposes of billing for Evaluation & Management (E/M) services, patients are identified as either new or established, depending on previous encounters with the provider. Providers should ensure that they are coding appropriately for new patient visits or established patient visits.</p> <p>New Patient: An individual who did not receive any professional services from the physician/non-physician practitioner (NPP) or another physician of the same specialty who belongs to the same group practice within the previous three years.</p> <p>Established Patient: An individual who received professional services from the physician/NPP or another physician of the same specialty who belongs to the same group practice within the previous three years.</p> <p>Molina will recover reimbursement for any claims previously reimbursed with new patient E/M codes billed within three years of other E/M codes from same group NPI. Molina is currently working to improve claims systems logic to deny reimbursement for current and future claims.</p>
<p>Example Scenarios:</p> <p>CPT codes 99202-99205 billed by same group NPI that previously billed 99202-99215 within the past three years are not reimbursable.</p>
<p>References:</p> <p>https://www.cms.gov/outreach-and-education/medicare-learning-network-mln/mlnproducts/downloads/eval-mgmt-serv-guide-icn006764.pdf</p>