

Nine Essential Tips to Prepare Your Practice for the 2021 Evaluation and Management Coding Changes

On **January 1, 2021**, **significant changes** to office and outpatient Evaluation and Management (E&M) codes (CPT® codes 99202-99215) go into effect for new and established patients. Practices must become familiar with the changes and prepare for them in advance to avoid reimbursement disruptions.



1. Know what's changing. An essential part of preparing for the transition is to become familiar with what will change. The **American Society of Clinical Oncology** (ASCO) has an **overview** on ASCO Practice Central that can help.

The American Medical Association also offers a **free educational module** that provides an overview of the changes and shows how the update differs from current coding requirements and terminology.



2. Identify project leaders. Identify a leader from the administrative side of your practice and a leader from your clinical staff to work together to prepare your practice for this transition.



3. Form a practice E&M transition workgroup. To support the project leaders, create an internal workgroup representing all functions of the practice such as: physicians, coders, advanced practice providers, administrators, etc.



4. Evaluate administrative systems. Determine which internal systems need to be updated. This may include forms, communications, documents, or compliance plans. If there are changes to Relative Value Units (RVUs) and payment rates, physician contracts may need to be restructured as well.



5. Contact your Electronic Health Record vendor. Confirm the schedule for implementing changes with your Electronic Health Record vendor. Then, request training for staff and conduct system testing prior to January 1.



6. Create a practice education and transition plan. Identify who needs to be educated about which changes, at what level of detail, and when. Then perform an initial overview of the changes with staff.

Follow up with in-depth training sessions tailored to each audience and schedule time for relevant staff to meet and review the new methods of selecting the appropriate levels of an E&M to ensure all understand the new guidelines.



7. Contact private payers . Ask the private payers your practice contracts with if and when they will be implementing these changes. Private payer policies may differ from Medicare.



8. Assess financial impact. Once final reimbursement rates are available in the 2021 Medicare Physician Fee Schedule (MPFS) final rule, conduct an overall financial analysis to determine the impact on your practice.



9. Reach out with questions. ASCO is here to answer your questions about the transition. Email billingandcoding@asco.org and a staff member will assist you.

For more information, please visit:
practice.asco.org/billing-coding-reporting/medicare-program.