

Neuroversion's 10 Most Commonly Performed Evaluation and Management Codes:

99204 NEW PATIENT office visit or outpatient visit, typically 45 minutes of face-to-face time with the patient/family. This time may also include time spent counseling the patient or time spent coordinating care with other physicians or other healthcare providers.

\$465.00 Unadjusted cost–NOT INCLUDING IN-NETWORK/NEGOTIATED DISCOUNTS.

99205 NEW PATIENT office visit or outpatient visit, typically 60 minutes of face-to-face time with the patient/family. This time may also include time spent counseling the patient or time spent coordinating care with other physicians or other healthcare providers

\$652.00 Unadjusted cost– NOT INCLUDING IN-NETWORK OR NEGOTIATED DISCOUNTS.

99212 ESTABLISHED PATIENT office or other outpatient visit, typically 10 minutes of face-to-face time with patient/family. Time may also include time spent counseling the patient or time spent coordinating care with other physicians or other healthcare professionals.

\$164.00 Unadjusted cost - NOT INCLUDING IN-NETWORK/NEGOTIATED DISCOUNTS.

99213 ESTABLISHED PATIENT office or other outpatient visit, typically 15 minutes of face-to-face time with patient/family. Time may also include time spent counseling the patient or time spent coordinating care with other physicians or other healthcare professionals.

\$223.00 Unadjusted cost - NOT INCLUDING IN-NETWORK/NEGOTIATED DISCOUNTS.

99214 ESTABLISHED PATIENT office or other outpatient visit, typically 25 minutes of face-to-face time with patient/family. Time may also include time spent counseling the patient or time spent coordinating care with other physicians or other healthcare professionals.

\$350.00 Unadjusted cost - NOT INCLUDING IN-NETWORK/NEGOTIATED DISCOUNTS.

99215 ESTABLISHED PATIENT office or other outpatient visit, typically 15 minutes of face-to-face time with patient/family. Time may also include time spent counseling the patient or time spent coordinating care with other physicians or other healthcare professionals.

\$490.00 Unadjusted cost - NOT INCLUDING IN-NETWORK/NEGOTIATED DISCOUNTS.

99231 HOSPITAL CARE-SUBSEQUENT DAY (any day after the 1st day), for exam and care of patient. Typically 15 minutes of face-to-face time with patient/family at the patient's bedside AND on the patient's hospital floor/unit. Time may include time spent counseling patient or time spent coordinating care with other physicians or healthcare professionals.

\$252.00 Unadjusted cost - NOT INCLUDING IN-NETWORK/NEGOTIATED DISCOUNTS.

99233 HOSPITAL CARE- SUBSEQUENT DAY (any day after the 1st day), for patient exam and care. Typically this is a visit spent making medical decisions of MODERATE complexity.

\$476.00 Unadjusted cost - NOT INCLUDING IN-NETWORK/NEGOTIATED DISCOUNTS.

99406 Smoking and tobacco use cessation counseling visit; intermediate, greater than 3 minutes up to 10 minutes.

\$65.00 Unadjusted cost - NOT INCLUDING IN-NETWORK/NEGOTIATED DISCOUNTS.

99442 Telephone evaluation and management (E&M) service provided by a physician or other qualified health care professional who may report E&M services for established patients with time spent between 11-20 minutes.

\$223.00 Unadjusted cost - NOT INCLUDING IN-NETWORK/NEGOTIATED DISCOUNTS.
