

**Table 2 – CPT E/M Office Revisions  
Level of Medical Decision Making (MDM)**

**Revisions effective January 1, 2021:**

*Note: this content will not be included in the CPT 2021 code set release*



Code	Level of MDM (Maximum of 3 out of 3 elements of table)	Number and Complexity of Problems Addressed	Elements of Medical Decision Making	Risk of Complications and/or Mortality or Morbidity of Patient Management
			Amount and/or Complexity of Data to be Reviewed and Analyzed <i>(Each unique test, order, or document contributes to the combination of 1 or combination of 2 in Category 1 below.)</i>	
99211 99212	Minimal	Minimal • 1 self-limited or minor problem	Minimal or none	Minimal risk of morbidity from additional diagnostic testing or treatment
99213 99214	Low	Low • 2 or more self-limited or minor problems; or • 1 acute chronic illness; or • 1 acute uncomplicated illness or injury	Limited <i>(Must meet the requirements of at least 1 out of 3 categories)</i> <b>Category 1: Tests and documents</b> • Any combination of 1 from the following: • Review of prior external records from each unique source <sup>1</sup> ; • Review of the results of each unique test <sup>2</sup> ; • Ordering of each unique test <sup>3</sup> or <b>Category 2: Assessment requiring an independent historical</b> <i>(For the categories of independent interpretation of tests and discussion of management or test interpretation, see moderate to high)</i>	Low risk of morbidity from additional diagnostic testing or treatment
99215 99216	Moderate	Moderate • 3 or more chronic illnesses with exacerbations, progression, or side effects of treatment; or • 2 or more stable chronic illnesses; or • 1 undiagnosed new problem with uncertain prognosis; or • 1 acute illness with systemic symptoms; or • 1 acute complicated injury	Moderate <i>(Must meet the requirements of at least 1 out of 3 categories)</i> <b>Category 1: Tests, documents, or independent historical</b> • Any combination of 1 from the following: • Review of prior external records from each unique source <sup>1</sup> ; • Review of the results of each unique test <sup>2</sup> ; • Ordering of each unique test <sup>3</sup> ; • Assessment requiring an independent historical or <b>Category 2: Independent interpretation of tests</b> • Independent interpretation of a test performed by another practitioner/qualified health-care professional (not separately reported) or <b>Category 3: Discussion of management or test interpretation</b> • Discussion of management or test interpretation with external practitioner/qualified health-care professional/appropriate source (not separately reported)	Moderate risk of morbidity from additional diagnostic testing or treatment  <i>Examples only:</i> • Prescription drug management • Decision regarding minor surgery with identified patient or procedure risk factors • Decision regarding elective major surgery without identified patient or procedure risk factors • Diagnosis or treatment significantly limited by acute deterioration of health
99217 99218	High	High • 4 or more chronic illnesses with acute exacerbations, progression, or side effects of treatment; or • 3 acute or chronic illness or injury that pose a threat to life or bodily function	Extensive <i>(Must meet the requirements of at least 2 out of 3 categories)</i> <b>Category 1: Tests, documents, or independent historical</b> • Any combination of 1 from the following: • Review of prior external records from each unique source <sup>1</sup> ; • Review of the results of each unique test <sup>2</sup> ; • Ordering of each unique test <sup>3</sup> ; • Assessment requiring an independent historical or <b>Category 2: Independent interpretation of tests</b> • Independent interpretation of a test performed by another physician/other qualified health-care professional (not separately reported) or <b>Category 3: Discussion of management or test interpretation</b> • Discussion of management or test interpretation with external physician/other qualified health-care professional/appropriate source (not separately reported)	High risk of morbidity from additional diagnostic testing or treatment  <i>Examples only:</i> • Drug therapy requiring intensive monitoring for toxicity • Decision regarding elective major surgery with identified patient or procedure risk factors • Decision regarding emergency major surgery • Decision regarding hospitalization • Decision not to resuscitate or to do resuscitate care because of poor prognosis

# Ama Preventive Guide

**Jean Kinney**



## **Ama Preventive Guide:**

**AMA Guidelines for Adolescent Preventive Services (GAPS)** American Medical Association,1994      **American Medical Association Complete Guide to Prevention and Wellness** ,2008-09-29 A comprehensive guide to preventing illness and promoting wellness an essential health resource for every age and stage of life      Guide to Clinical Preventive Services DIANE Publishing Company,1997-03 An exhaustive report on recommended clinical preventive services that should be provided to patients in the course of routine clinical care including screening for vascular neoplastic and infectious diseases and metabolic hematologic ophthalmologic and ontologic prenatal and musculoskeletal disorders Also mental disorders and substance abuse counseling and immunization The majority of deaths below age 65 are preventable This Guide results from the most comprehensive evaluation and synthesis of preventive interventions to date      *Adolescent Health Care* Lawrence S. Neinstein,2008 This practical easy to use guide is a staple in health care facilities that treat adolescents is widely used for board preparation and is recommended by the American College of Physicians for their internal medicine library The substance abuse section has been completely reorganized and new chapters cover psychosomatic illness as well as complementary medicine      *Clinical Men's Health E-Book* Joel J. Heidelbaugh,2007-10-22 Here s the first evidence based guide to focus solely on the various health conditions that unequally affect men This text provides a biopsychosocial approach to diseases and disorders of male patients from birth through infancy childhood and adolescence and from early through late adulthood Replete with current evidence based guidelines to facilitate clinical decision making the framework of each chapter builds upon epidemiological data centered on men Special attention is given to the circumstances that influence men to either seek or not seek routine medical care Provides a general overview of the construct of men s health detailing the organization of preventive healthcare in men diagnostic bias in men s healthcare gender disparities on a global level and the hesitancy of men to seek help Focuses on pertinent medical disorders and biopsychosocial issues in the developing male from infancy through school age to adolescence Highlights a comprehensive review of common system based disease conditions that unequally impact adult men through an evidence based approach Examines special concerns of adolescent and adult males including lifestyle risks suicide nutrition stress exercise and fitness integrative medicine cosmetic plastic surgery cancer and end of life issues Summarizes clinical care guidelines for special populations of men including athletes executives prisoners homosexuals and transgendered men Authored by leaders from numerous subspecialties for well rounded perspectives on many clinical problems      **Journal of the American Medical Association** ,2009-07      National Library of Medicine Current Catalog National Library of Medicine (U.S.),1993      **Clinical Men's Health** Joel J. Heidelbaugh,E. Jauniaux,Mark B. Landon,2007-01-01 This text provides a biopsychosocial approach to diseases and disorders of male patients from birth through late adulthood Replete with current evidence based guidelines to facilitate clinical decision making the framework of each chapter builds upon epidemiological data centered on men      Clinical Practice Guidelines

Directory Naomi Kuznets, 2000 This annual publication is a bibliographic listing of approximately 2 000 guidelines standards and other available patient management strategies developed by physician organizations and others that helps physicians and group practices to improve their quality of medical care and ensure appropriate utilization of health care resources

**Current Care of Women** Dawn P. Lemcke, 2004 A practical up to date multidisciplinary source of information on the care of women in a primary care setting More than sixty contributors provide clinically relevant information on diseases and disorders unique to women The book addresses general topics affecting women's health such as prevention health care access communication styles and cultural and racial issues Following the popular Lange CURRENT format this

comprehensive text features superbly organized rapidly accessible information **Director of Practice Parameters, 1996 Edition** American Medical Association, 1996 **Handbook on Drug Abuse Prevention** Robert H. Coombs, 1995 HA13

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*Policy Compendium* American Medical Association, 1999 Clinical Manual of Substance Abuse Jean Kinney, 1996 A comprehensive practical reference for all health care professionals who care for patients with substance abuse problems Part I provides a framework for clinical management of these patients and Part II is comprised of chapters on working with specific populations and groups **Accident Prevention Manual for Industrial Operations** National Safety Council, 1959

**Clinician's Handbook of Preventive Services**, 1994 *Guidelines for Women's Health Care*, 1996 Current Pediatric Diagnosis & Treatment William W. Hay, 2007 Authoritative timely pediatrics coverage in a find it now format *Current Diagnosis Treatment in Pediatrics* 18e offers concise clinically oriented coverage of the ambulatory and hospital care of children from birth through infancy and adolescence Utilizing the popular Current Series format this handy guide answers all the questions that come up in daily practice and provides the details necessary to make a sound diagnosis and treatment plan The American Medical Association Family Medical Guide Jeffrey R. M. Kunz, 1982

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