

## **Pain Management Coding Alert**

## Reader Question: Yes, You Can (Sometimes) Report Pre-EEG E/M

**Question:** If our physician performs an E/M service and then performs an electroencephalogram (EEG), can you report the E/M with modifier 25?

North Carolina Subscriber

**Answer:** It depends on the need for the E/M service. If the patient comes in strictly for the EEG, then you cannot report a separate E/M; all of the E/M work your physician performs on the same day (and before) a scheduled EEG is bundled into the work units for the EEG code.

**Exception:** When the EEG is not scheduled, there is a possibility that you might report an office E/M along with modifier 25 (Significant, separately identifiable evaluation and management service by the same physician or other qualified health care professional on the same day of the procedure or other service). If a patient comes in without a scheduled EEG, and thenthe physician performs an E/M that leads him to an EEG decision, then you might be able to report the E/Mseparately.

Let's say that a new patient reports with a chief complaint of headache. The physician conducts an E/M consisting of an expanded problem focused history and exam, along with straightforward medical decision making (MDM). Based on the E/M's outcomes, the physician orders an awake and drowsy EEG. Provided you have proof that » the E/M was necessary in order for the physician to make the EEG decision, you should be able to report:

- 95816 (Electroencephalogram [EEG]; including recording awake and drowsy) for the EEG
- 99202 (Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: an expanded problem focused history; an expanded problem focused examination; straightforward medical decision making ...) for the E/M
- Modifier 25 appended to 99202 to show that the E/M and the EEG were separately identifiable services
- R51 (Headache) appended to 95816 and 99202 to represent the patient's condition.

**Ask if you're unsure:** Sometimes, clarity is scarce when you're looking for an answer about reporting a separate E/M. If you've any doubt about whether or not your physician performed a separate E/M, ask her about it before coding.