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Information You Need

Exclusive for AAPC Book and AAPC Coder Purchasers

New Codes Report DIY Blood Pressure Monitoring

The diversity of patients seen in the United States called for an expansion of new ways for physicians to monitor and care for them. With evidence-based research over the last 10 years proving the benefits of self-measured blood pressure (SMBP), two new CPT® codes are effective Jan. 1, 2020. The need for these codes reflects the transition of some physicians moving from checking BP in their office to do-it-yourself (DIY) home monitoring. [Learn More »](#)

4 Tips for Accurate Pulmonary Hypertension Coding

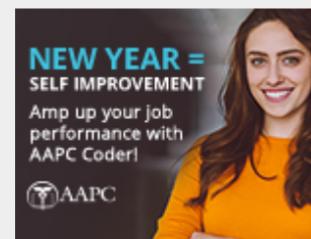
Despite the fact that pulmonary hypertension (PH) is a “frequently identified ... highly morbid condition ... associated with increased mortality, hospitalizations and financial burden,” it is “rarely coded in the EHR [Electronic Health Record]” according to a recent article published in *the Journal of Cardiac Failure*. What, then, can you and your provider do to ensure that this condition is coded, and ¾ equally important ¾ coded correctly? Here are four ways you can improve your PH coding. [Learn More »](#)

CMS Identifies E/M Codes With High Error Rates

Coding initial hospital care became more challenging after Medicare stopped paying for inpatient consult codes several years ago — but that can’t be the only factor driving the startling error rates for evaluation and management (E/M) codes 99223 and 99214. [Learn More »](#)

Are You Ready for the Big E/M Overhaul?

A year from now, the way you code evaluation and management (E/M) office visits is going to change completely. For starters, you will be selecting visit levels based only on time or medical decision making (MDM). There’s a lot to understand and to prepare for, so it’s a good idea to start getting ready now before the changes creep up on you. [Learn More »](#)



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