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**Dilation and curettage (D&C)** is a procedure to remove tissue from inside your uterus. Health care providers perform dilation and curettage to diagnose and treat certain uterine conditions — such as heavy bleeding — or to clear the uterine lining after a miscarriage or abortion. CPT 59840- any trimester

**D&E** is done during the second trimester and is pretty similar to a D&C in that it uses a vacuum aspiration but requires more surgical instruments to remove the tissue (like forceps). Because it's done later on in a pregnancy, it can take a little longer. (A D&E usually lasts about 30 minutes, whereas a D&C may be closer to 20.) (CPT 59841 = 14 to 20 weeks 59841-22 more than 20 weeks))

**Incomplete abortion** means that the contents of the womb haven't been expelled completely. The abortion has happened, but there is still some material left in the womb. CPT (59812)

**Induced abortion** is the termination of a pregnancy by artificial means.

**Hysterotomy abortion** is a surgical procedure that removes an intact fetus from the uterus in a process similar to a cesarean section. The procedure is generally used after the failure of another method, or when such a procedure would be medically inadvisable, such as in the case of placenta accreta.(CPT 59100, 59852, 59857)

**Missed abortion** is an in-utero death of the embryo or fetus before the 20th week of gestation with retained conception products. (CPT 59820 (before 14 weeks) and 59821 (14-20 weeks))

**Septic abortion** refers to any abortion, spontaneous or induced, that is complicated by uterine infection, including endometritis. CPT 59830)

**Spontaneous abortion** is noninduced embryonic or fetal death or passage of products of conception before 20 weeks gestation CPT (59812)

E/M Code

Spontaneous/Other Medical Abortion before 20 weeks

E/M Code + 59414

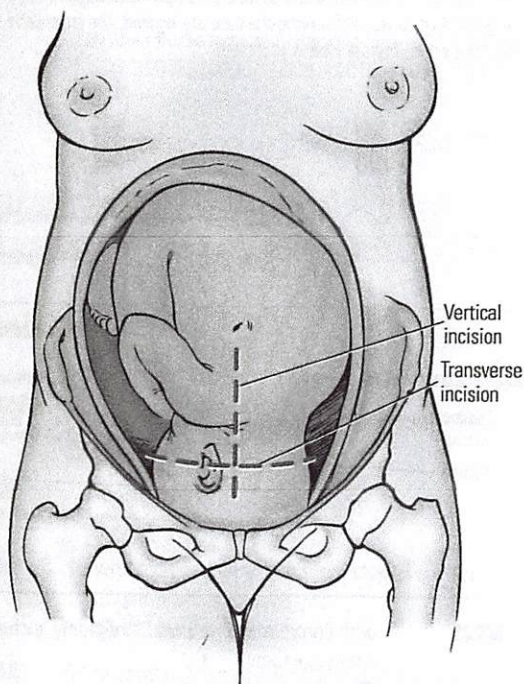
Spontaneous + delivery of placenta before 20 weeks

**Therapeutic medical abortion** is done because the woman has a health condition. (see codes 59850, 59851 and 59852 injections before 20 weeks)



**Cesarean Delivery**

59510-59515

**Delivery After Previous Cesarean Delivery**

Patients who have had a previous cesarean delivery and now present with the expectation of a vaginal delivery are coded using codes 59610-59622. If the patient has a successful vaginal delivery after a previous cesarean delivery (VBAC), use codes 59610-59614. If the attempt is unsuccessful and another cesarean delivery is carried out, use codes 59618-59622. To report elective cesarean deliveries use code 59510, 59514 or 59515.

- 59610** Routine obstetric care including antepartum care, vaginal delivery (with or without episiotomy, and/or forceps) and postpartum care, after previous cesarean delivery  
 ➔ CPT Assistant Feb 96:2, Apr 97:3, Aug 02:3
- 59612** Vaginal delivery only, after previous cesarean delivery (with or without episiotomy and/or forceps);  
 ➔ CPT Assistant Feb 96:2, Aug 02:3
- 59614** including postpartum care  
 ➔ CPT Assistant Feb 96:2
- 59618** Routine obstetric care including antepartum care, cesarean delivery, and postpartum care, following attempted vaginal delivery after previous cesarean delivery  
 ➔ CPT Assistant Feb 96:2, Aug 02:4
- 59620** Cesarean delivery only, following attempted vaginal delivery after previous cesarean delivery;  
 ➔ CPT Assistant Feb 96:2

- 59622** including postpartum care  
 ➔ CPT Assistant Feb 96:2

**Abortion**

► (For medical treatment of spontaneous complete abortion, any trimester, use E/M codes 99202-99233) ◀

(For surgical treatment of spontaneous abortion, use 59812)

- 59812** Treatment of incomplete abortion, any trimester, completed surgically  
 ➔ CPT Assistant Fall 93:9, Fall 95:16
- 59820** Treatment of missed abortion, completed surgically; first trimester  
 ➔ CPT Assistant Fall 93:9, Fall 95:16, Feb 99:10
- 59821** second trimester  
 ➔ CPT Assistant Fall 93:9, Fall 95:16
- 59830** Treatment of septic abortion, completed surgically  
 ➔ CPT Assistant Fall 93:9
- 59840** Induced abortion, by dilation and curettage  
 ➔ CPT Assistant Fall 93:9, Sep 03:16
- 59841** Induced abortion, by dilation and evacuation  
 ➔ CPT Assistant Fall 93:9
- 59850** Induced abortion, by 1 or more intra-amniotic injections (amniocentesis-injections), including hospital admission and visits, delivery of fetus and secondines;  
 ➔ CPT Assistant Fall 93:10
- 59851** with dilation and curettage and/or evacuation  
 ➔ CPT Assistant Fall 93:10
- 59852** with hysterotomy (failed intra-amniotic injection)  
 ➔ CPT Assistant Fall 93:10
- (For insertion of cervical dilator, use 59200)
- 59855** Induced abortion, by 1 or more vaginal suppositories (eg, prostaglandin) with or without cervical dilation (eg, laminaria), including hospital admission and visits, delivery of fetus and secondines;
- 59856** with dilation and curettage and/or evacuation
- 59857** with hysterotomy (failed medical evacuation)

**Other Procedures**

- 59866** Multifetal pregnancy reduction(s) (MPR)
- 59870** Uterine evacuation and curettage for hydatidiform mole  
 ➔ CPT Assistant Feb 99:10

Female Genital 56405-60699

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# Evaluation and Management

## Office or Other Outpatient Services

The following codes are used to report evaluation and management services provided in the office or in an outpatient or other ambulatory facility. A patient is considered an outpatient until inpatient admission to a health care facility occurs.

To report services provided to a patient who is admitted to a hospital or nursing facility in the course of an encounter in the office or other ambulatory facility, see the notes for initial hospital inpatient care (page 23) or initial nursing facility care (page 33).

For services provided in the emergency department, see 99281-99285.

For observation care, see 99217-99226.

For observation or inpatient care services (including admission and discharge services), see 99234-99236.

### Coding Tip

#### Determination of Patient Status as New or Established Patient

Solely for the purposes of distinguishing between new and established patients, **professional services** are those face-to-face services rendered by physicians and other qualified health care professionals who may report evaluation and management services reported by a specific CPT code(s). A new patient is one who has not received any professional services from the physician/qualified health care professional or another physician/qualified health care professional of the **exact** same specialty and subspecialty who belongs to the same group practice, within the past three years.

An established patient is one who has received professional services from the physician/qualified health care professional or another physician/qualified health care professional of the exact same specialty and subspecialty who belongs to the same group practice, within the past three years.

In the instance where a physician/qualified health care professional is on call for or covering for another physician/qualified health care professional, the patient's encounter will be classified as it would have been by the physician/qualified health care professional who is not available. When advanced practice nurses and physician assistants are working with physicians they are considered as working in the **exact** same specialty and exact same **subspecialties** as the physician.

*CPT Coding Guidelines, Evaluation and Management, Guidelines Common to All E/M Services, New and Established Patient*

## New Patient

►(99201 has been deleted. To report, use 99202)◄

### ★▲ 99202

**Office or other outpatient visit** for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and straightforward medical decision making.

When using time for code selection, 15-29 minutes of total time is spent on the date of the encounter.

➔ *CPT Changes: An Insider's View* 2013, 2017, 2021

➔ *CPT Assistant* Winter 91:11, Spring 92:13, 24, Summer 92:1, 24, Spring 93:34, Summer 93:2, Fall 93:9, Spring 95:1, Summer 95:4, Fall 95:9, Jul 98:9, Sep 98:5, Feb 00:11, Aug 01:2, Apr 02:14, Oct 04:10, Apr 05:1, 3, Jun 05:11, Dec 05:10, May 06:1, Jun 06:1, Oct 06:15, Apr 07:11, Sep 07:1, Mar 09:3, Aug 09:5, Dec 09:9, Jan 11:3, Mar 12:4, 8, Jan 13:9, Jun 13:3, Aug 13:13, 14, Jan 15:12, Mar 16:11, Sep 16:6, Apr 18:10, Sep 18:14, Jan 19:3, Jan 20:3, Feb 20:3, Mar 20:3

➔ *Clinical Examples in Radiology* Winter 12:9

### ★▲ 99203

**Office or other outpatient visit** for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and low level of medical decision making.

When using time for code selection, 30-44 minutes of total time is spent on the date of the encounter.

➔ *CPT Changes: An Insider's View* 2013, 2017, 2021

➔ *CPT Assistant* Winter 91:11, Spring 92:14, 24, Summer 92:1, 24, Spring 93:34, Summer 93:2, Fall 93:9, Spring 95:1, Summer 95:4, Fall 95:9, Jul 98:9, Sep 98:5, Feb 00:11, Aug 01:2, Apr 02:14, Oct 04:10, Feb 05:9, Apr 05:1, 3, Jun 05:11, Dec 05:10, May 06:1, Jun 06:1, Oct 06:15, Apr 07:11, Sep 07:1, Mar 09:3, Aug 09:5, Dec 09:9, Jan 11:3, Mar 12:4, 8, Jan 13:9, Jun 13:3, Aug 13:13, 14, Jan 15:12, Mar 16:11, Sep 16:6, Apr 18:10, Sep 18:14, Jan 19:3, Jan 20:3, Feb 20:3, Mar 20:3

➔ *Clinical Examples in Radiology* Winter 12:9

- ★▲ 99204 **Office or other outpatient visit** for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and moderate level of medical decision making.

When using time for code selection, 45-59 minutes of total time is spent on the date of the encounter.

➔ CPT Changes: *An Insider's View* 2013, 2017, 2021

➔ CPT Assistant Winter 91:11, Spring 92:14, 24, Summer 92:1, 24, Spring 93:34, Summer 93:2, Fall 93:9, Spring 95:1, Summer 95:4, Fall 95:9, Jul 98:9, Sep 98:5, Feb 00:11, Aug 01:2, Apr 02:14, May 02:1, Oct 04:10, Apr 05:1, 3, Jun 05:11, Dec 05:10, May 06:1, Jun 06:1, Oct 06:15, Apr 07:11, Sep 07:1, Mar 09:3, Aug 09:5, Dec 09:9, Jan 11:3, Mar 12:4, 8, Jan 13:9, Jun 13:3, Aug 13:13, 14, Jan 15:12, Mar 16:11, Sep 16:6, Apr 18:10, Sep 18:14, Jan 19:3, Jan 20:3, Feb 20:3, Mar 20:3

➔ Clinical Examples in Radiology Winter 12:9

- ★▲ 99205 **Office or other outpatient visit** for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and high level of medical decision making.

When using time for code selection, 60-74 minutes of total time is spent on the date of the encounter.

➔ CPT Changes: *An Insider's View* 2013, 2017, 2021

➔ CPT Assistant Winter 91:11, Spring 92:14, 24, Summer 92:1, 24, Spring 93:34, Summer 93:2, Fall 93:9, Spring 95:1, Summer 95:4, Fall 95:9, Jul 98:9, Sep 98:5, Feb 00:11, Aug 01:2, Apr 02:2, May 02:1, Oct 04:10, Apr 05:1, 3, Jun 05:11, Dec 05:10, May 06:1, Jun 06:1, Oct 06:15, Apr 07:11, Sep 07:1, Mar 09:3, Aug 09:5, Dec 09:9, Jul 10:4, Jan 11:3, Jan 12:3, Mar 12:4, 8, Jan 13:9, Jun 13:3, Aug 13:13, 14, Jan 15:12, Mar 16:11, Sep 16:6, Apr 18:10, Sep 18:14, Jan 19:3, Jan 20:3, Feb 20:3, Mar 20:3

➔ Clinical Examples in Radiology Winter 12:9

►[For services 75 minutes or longer, use prolonged services code 99417]◀

## Established Patient

- ▲ 99211 **Office or other outpatient visit** for the evaluation and management of an established patient, that may not require the presence of a physician or other qualified health care professional. Usually, the presenting problem(s) are minimal.

➔ CPT Changes: *An Insider's View* 2013, 2021

➔ CPT Assistant Winter 91:11, Spring 92:14, 24, Summer 92:1, 24, Spring 93:34, Summer 93:2, Fall 93:9, Spring 95:1, Summer 95:4, Fall 95:9, Oct 96:10, Feb 97:9, May 97:4, Jul 98:9, Sep 98:5, Oct 99:9, Feb 00:11, Aug 01:2, Jan 02:2, Oct 04:10, Feb 05:15, Mar 05:11, Apr 05:1, 3, May 05:1, Jun 05:11, Nov 05:1, Dec 05:10, Feb 06:14, May 06:1, Jun 06:1, Jul 06:19, Oct 06:15, Nov 06:21, Apr 07:11, Jul 07:1, Sep 07:1, Dec 07:9, Mar 08:3, Aug 08:13, Mar 09:3, Aug 09:5, Apr 10:10, Jan 11:3, Jan 12:3, Mar 12:4, 8, Apr 12:10, Jan 13:9, Mar 13:13, Jun 13:3, Aug 13:13, 14, Nov 13:3, Mar 14:14, Jan 15:12, Mar 16:11, Sep 16:6, Mar 17:10, Apr 18:10, Sep 18:14, Jan 19:3, Jan 20:3, Feb 20:3, Mar 20:3

- ★▲ 99212 **Office or other outpatient visit** for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and straightforward medical decision making.

When using time for code selection, 10-19 minutes of total time is spent on the date of the encounter.

➔ CPT Changes: *An Insider's View* 2013, 2017, 2021

➔ CPT Assistant Winter 91:11, Spring 92:14, 24, Summer 92:1, 24, Spring 93:34, Summer 93:2, Fall 93:9, Spring 95:1, Summer 95:4, Fall 95:9, Jul 98:9, Sep 98:5, Feb 00:11, Jun 00:11, Aug 01:2, Jan 02:2, May 02:3, Apr 04:14, Oct 04:10, Apr 05:1, 3, Jun 05:11, Dec 05:10, May 06:1, Jun 06:1, 11, Sep 06:8, Oct 06:15, Apr 07:11, Jul 07:1, Sep 07:1, Mar 08:3, Mar 09:3, Aug 09:5, Feb 10:13, Jul 10:4, Sep 10:4, Jan 11:3, Jun 11:3, Mar 12:4, 8, Apr 12:17, Jan 13:9, Mar 13:13, Jun 13:3, Aug 13:13, 14, Feb 14:11, Jan 15:12, Mar 16:11, Sep 16:6, Dec 16:12, Oct 17:6, Apr 18:10, Sep 18:14, Jan 19:3, Jan 20:3, Feb 20:3, Mar 20:3

- ★▲ 99213 **Office or other outpatient visit** for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and low level of medical decision making.

When using time for code selection, 20-29 minutes of total time is spent on the date of the encounter.

➔ CPT Changes: *An Insider's View* 2013, 2017, 2021

➔ CPT Assistant Winter 91:11, Spring 92:14, 24, Summer 92:1, 24, Spring 93:34, Summer 93:2, Fall 93:9, Spring 95:1, Summer 95:4, Fall 95:9, Jan 97:10, Jul 98:9, Sep 98:5, Aug 01:2, May 02:3, Oct 03:5, Apr 04:14, Oct 04:10, Mar 05:11, Apr 05:1, 3, Jun 05:11, Dec 05:10, May 06:1, Jun 06:1, 11, Sep 06:8, Oct 06:15, Apr 07:11, Jul 07:1, Sep 07:1, Mar 08:3, Mar 09:3, Aug 09:5, Sep 10:4, Jan 11:3, Jun 11:3, Mar 12:4, 8, Jan 13:9, Mar 13:13, Jun 13:3, Aug 13:13, 14, Jan 15:12, Mar 16:11, Sep 16:6, Apr 18:10, Sep 18:14, Jan 19:3, Jan 20:3, Feb 20:3, Mar 20:3

- ★▲ 99214 **Office or other outpatient visit** for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and moderate level of medical decision making.

When using time for code selection, 30-39 minutes of total time is spent on the date of the encounter.

➔ CPT Changes: *An Insider's View* 2013, 2017, 2021

➔ CPT Assistant Winter 91:11, Spring 92:15, 24, Summer 92:1, 24, Spring 93:34, Summer 93:2, Fall 93:9, Spring 95:1, Summer 95:4, Fall 95:9, May 97:4, Jul 98:9, Sep 98:5, Aug 01:2, Jan 02:2, May 02:1-2, Oct 03:5, Apr 04:14, Oct 04:10, Apr 05:1, 3, Jun 05:11, Dec 05:10, May 06:1, Jun 06:1, 11, Sep 06:8, Oct 06:15, Apr 07:11, Jul 07:1, Sep 07:1, Mar 08:3, Mar 09:3, Aug 09:5, Sep 10:4, Jan 11:3, Jun 11:3, Mar 12:4, 8, Jan 13:9, Mar 13:13, Jun 13:3, Aug 13:13, 14, Jan 15:12, Oct 15:3, Mar 16:11, Sep 16:6, Apr 18:10, Sep 18:14, Jan 19:3, Jan 20:3, Feb 20:3, Mar 20:3