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Maxim Health Information Services is a division of Maxim Healthcare Services, the largest privately held healthcare staffing company in the nation. As part of a large business enterprise and a [leader in the industry](#), MHIS can help take your career to the next level. Now more than ever, hospitals and medical facilities understand the importance of hiring HIM staff to increase their bottom line. This has opened the door to many new [career opportunities](#) in the health information industry. MHIS staffs positions for on-site coders, remote coders, auditors, and more.

Welcome to the August issue of Maxim Coding CornerSM! As a leader in the HIM industry, [Maxim Health Information Services](#) is committed to providing you with updates on coding-related topics that matter to you.

This month, we are providing a crash course in Medical Decision Making 101. Read below to learn key information that will help you make smart decisions when coding, and be sure to visit our [online job board](#) to search for a variety of positions nationwide. Our jobs are updated frequently, so check back often to view new opportunities!

Introduction to Medical Decision Making

A key component in an evaluation and management service (E&M) is the medical decision making. Determining the complexity of the medical decision making is measured by the:

- Number of diagnoses or treatment options that must be considered
- Amount and/or complexity of data reviewed
- The risk of complications and/or the risk of morbidity or mortality

CPT recognizes four different levels of medical decision making in the E&M descriptors. The four levels include:

- Straight forward
- Low complexity
- Moderate complexity
- High complexity

Contributory Factors of E&Ms

There are four contributory factors of E&Ms:

Counseling

Counseling takes place when there is a discussion with the patient and/or the patient's family concerning issues such as:

- Diagnostic results or impressions
- The patient prognosis
- The risks or benefits of the treatment options

Coordination of Care

The *coordination of care* involves discussions with other agencies, providers, or family members about the patient's plan of care. This is usually not payable separately from the E&M service that is being performed.

Nature of the Presenting Problem

Expressed in the patient's own words, the *nature of the presenting problem* is referred to as the chief complaint. It is the disease, injury, illness, sign, or symptom that is the reason for the encounter. A diagnosis may or may not be established yet.

Time

For most of the CPT categories, *time* is provided in the code description only as an estimate of the average time spent in providing that level of care. The clinical circumstances in any particular case could require more or less of your time. An E&M code is never selected based on time unless the encounter included more than 50% of time devoted to either counseling or coordination of care. If that's the case, then time can be the controlling factor for selecting the appropriate level of care to report. Time is measured differently for office and outpatients than it is for inpatients.

Tips to Remember

Outpatient. For office and outpatients, time is counted as face-to-face time spent between the physician and the patient and/or the patient's family. It does not include time that the nurse spends with the patient or time spent documenting in the patient's chart.

Inpatient. In an inpatient situation, time is defined as unit/floor time. This includes time the Physician spends on the patient's hospital unit as well as time spent at the patient's bedside rendering care. On an inpatient basis, the average time for these codes include the time in which the Physician reviews the medical record, examines the patient, charts notes, and communicates with other professionals and the patient's family. It does not include time spent off the patient's floor even if they are reviewing labs or X-rays.

In order to select an E&M code based on time, the medical record documentation must include all of the following:

- Total length of time for the encounter
- The nature of the counseling that was completed or the coordination of care activities
- That more than half of the time was spent counseling or coordinating care

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