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| **Code** | **Level of MDM \*** | **Number & Complexity of Problems Addressed** | **Amount & Complexity of Data – Reviewed & Analyzed\*** | **Risk of Complications**  **Morbidity/Mortality of Patient Management** |
| **99211** | **N/A** | **N/A** | **N/A** | **N/A** |
| **99202**  **99212** | **Straight forward** | **Minimal**   * 1 self-limited or minor problem | **Minimal or none** | **Minimal risk** of morbidity from additional diagnostic testing or treatment |
| **99203**  **99213** | **Low** | **Low**   * 2 or more self-limited or minor problems; or * 1 stable chronic illness; or * 1 acute, uncomplicated illness or injury | **Limited** – must meet the requirements of at least 1 of the 2 categories.  **Category 1** Tests and documents  Any combination of 2 from the following:   * Review of prior external notes from a unique source\*; * Review of the results of each unique test\*; * Ordering of each unique test\*   **Category 2**: Assessment requiring an independent historian. ((For the categories of independent interpretation of tests and discussion of management or test interpretation, see moderate or high) | **Low risk** of morbidity from additional diagnostic testing or treatment |
| **99204**  **99214** | **Moderate** | **Moderate**   * 1 or more chronic illnesses with exacerbation, 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** - must meet the requirements of at least 1 out of 3 categories.  **Category 1**: Tests, documents, or independent historian(s). Any combination of 3 from the following:   * Review of prior external note(s) from each unique source\*; * Review of the result(s) of each unique test\*; Ordering of each unique test\*; * Assessment requiring an independent historian(s) or   **Category 2**: Independent interpretation of tests: independent interpretation of a test performed by another physician/other qualified health care professional (not separately reported); or  **Category 3:** Discussion of management or test interpretation. Discussion of management or test interpretation with external physician/other qualified health care professional\appropriate source (not separately reported) | **Moderate risk** of morbidity from additional diagnostic testing or treatment.  **Examples only:**   * 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 social determinants of health |
| **99205**  **99215** | **High** | **High**   * 1 or more chronic illnesses with severe exacerbation, progression, or side effects of treatment; or * 1 acute or chronic illness or injury that poses a threat to life or bodily function | **Extensive** (Must meet the requirements of at least 2 out of 3 categories)  **Category 1**: Tests, documents, or independent historian(s)   * Any combination of 3 from the following: * Review of prior external note(s) from each unique source\*; * Review of the result(s) of each unique test\*; * Ordering of each unique test\*; * Assessment requiring an independent historian(s) or   **Category 2:** Independent interpretation of tests   * Independent interpretation of a test performed by another physician/other qualified health care professional (not separately reported); or   **Category 3**: Discussion of management or test interpretation   * 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.  **Examples only:**   * 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 de-escalate care because of poor prognosis |