

MEDICAL BILLING AND CODING

CURRENT PROCEDURAL TERMINOLOGY (CPT) CODES

Examination

2029F: Complete Physical Skin Exam Performed
99244: Anogenital Exam (Adult) - under New or Established Patient Office or Other Outpatient Consultation Services: used to report consultations provided in the office, outpatient, or other ambulatory facility, including hospital observation services, home services, domiciliary, rest home, or emergency dept.
99281-99288: ED services, detailed history and exam
99170: Anogenital Exam (Child, w/suspected trauma)
56820: Colposcopy of vulva
57420: Colposcopy of vagina, with cervix present
46600: Anoscopy/Examination
99070: Supplies and materials over and above those usually included with the office visit or other services rendered (digital photography/materials/supplies).

Toxicology (80300 – 80377)

80320: Ethyl, Alcohol, Blood
80320: Ethyl, Alcohol, Urine, Quantitative
80320: General Toxicology, Blood/Serum/Urine
80301: Alcohol, Ethyl, Urine, Qualitative

STI testing (pathology)

(all w/amplified probe technique)

87491: Chlamydia trachomatis
87591: Neisseria gonorrhea
87661: Trichomonas vaginalis

Special Service, Procedure, or Report

99199: used to report other medicine services or procedures for which there is no specific code available

Suicide Risk Assessment

3085F

Admission:

99218: Initial Observation Care (per day)*
99234: Observation/inpatient hospital care (same date)*

Office/Outpatient Visit, Established patient

99215

Other E&M Services related to Exam

99499

Laboratory Procedures

Venipuncture:
36415: Venous blood
36416: Capillary blood (i.e. finger/heel)
81025: Urine Pregnancy Test
85025, 85027: Complete Blood Count (CBC)
88048: Metabolic Panel (Total)
88076: Liver/Hepatic Function Test
86592: Syphilis Test (qualitative, i.e. VDRL, RPR, ART)



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Human Immunodeficiency Virus (HIV)
86703: HIV-1/2, single result antibody
87389: HIV-1/2 antigen and antibodies, 4th Gen w/reflexes
87535: HIV-1 RNA, qualitative, TMA
86689: Confirmatory test for HIV antibody (Western Blot)
G0435: HCPCS for Oral HIV-1/2 Screen
99401: Preventive Counseling (including HIV)

Radiology

(coding must be specific to type of imaging, anatomy, views, with or without contrast material):

70360: Radiologic exam neck, soft tissue
70150: Radiologic exam, facial bones, complete, 3 views:
70260: Radiologic exam, skull complete, minimum 4 views:
71045: Radiologic exam, chest single view:

Computed tomography:

70490: CT, soft tissue neck without contrast material
70491: CT, soft tissue neck with contrast material
70486: CT angiography with contrast - head
70498: CT angiography with contrast - neck
70450: CT head or brain without contrast material
70460: CT head or brain with contrast material: 70460

Magnetic Resonance Imaging:

70540: MRI imaging, orbit/face, and/or neck w/o contrast
70542: MRI imaging, orbit/face, and/or neck with contrast
70544: MR angiography, head without contrast
70545: MR angiography, head with contrast
70547: MR angiography, neck without contrast
70548: MR angiography, neck with contrast

Ultrasound:

76830: Transvaginal US, non-OB: 76830

*For the E&M of a patient which requires: a detailed or comprehensive history; a detailed or comprehensive examination; and medical decision making that is straightforward or of low complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs.

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MEDICAL BILLING AND CODING

CURRENT PROCEDURAL TERMINOLOGY (CPT) CODES

Examination & Management E/M Codes

ED Services: 99281-99285‡
Inpatient Services: 99221-99223*
Inpatient/Obs Consult: 99252-99255*
Outpatient Services (New Patient): 99202-99205*
Outpatient Services (Est Patient): 99211-99215*
Outpatient Consultation Services: 99242-99245*
Prolonged Service Code: 99417**|99418***
Inpatient/Obs Admit/DC Same Day: 99234-99236*
Unlisted E&M Service: 99499
Preventive Counseling: 99401-99404 w/mod 25:
Separately Identifiable Evaluation and Management Service by
the Same Physician/QHP on the Same Day of the Procedure or
Other Service (includes HIV counseling)

Special Service, Procedure, or Report

99199: used to report other medicine services
or procedures for which there is no specific code
available
99170: Anogenital exam (child, w/suspected trauma)
56820: Colposcopy of vulva
57420: Colposcopy of vagina, with cervix present
46600: Anoscopy/Examination
58999: unlisted procedure; female genital(non-OB)
99070: Supplies and materials over and above those
usually included with the office visit or other services
rendered (digital photography/material/supplies)

Toxicology

**Drug/Substance Definitive Qual/Quant, not otherwise
specified.**

80375: 1-3 substances
80376: 4-6 substances
80377: 7 or more substances

**Presumptive, any number of drug classes, any number
of devices or procedures by**

80305: Direct optical observation
80306: Instrument-assisted observation
80307: Chemistry Analyzer

Ethyl, Alcohol

80320: Blood/Serum/Urine
82077: Immunoassay; Blood/Saliva

STI testing (pathology)

(all w/amplified probe technique)

87491: Chlamydia trachomatis
87591: Neisseria gonorrhea
87661: Trichomonas vaginalis

Laboratory Procedures

Venipuncture:
36415: Venous blood
36416: Capillary blood
(i.e., finger/heel)
81025: Urine Pregnancy Test
84702-04703: HCG Blood Quant/Qual
85025, 85027: Complete Blood Count (CBC)
88048: Metabolic Panel (Total)
80076: Liver/Hepatic Function Test
86592: Syphilis Test (qualitative, i.e. VDRL, RPR, ART)



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87389: HIV-1/2 antigen and antibodies, 4th Gen w/reflexes
87535: HIV-1 RNA, qualitative, TMA
86689: Confirmatory test for HIV antibody (Western Blot)
G0435: HCPCS: Rapid HIV-1/2 Screen
99401: Preventive Counseling (including HIV)

Radiology (coding must be specific to type of imaging,
anatomy, views, with or without contrast material)

70140: Radiologic exam, facial bones; < 3 views
70150: Radiologic exam, facial bones; complete, minimum 3
views
70250: Radiologic exam, skull < 4 views
70260: Radiologic exam, skull complete, minimum 4 views
70360: Radiologic exam, neck, soft tissue
71045-71048: Radiologic exam, chest single view- 4 view

Computed tomography:

70490: CT, soft tissue neck without contrast material
70491: CT, soft tissue neck with contrast material
70486: CT angiography with contrast - head
70498: CT angiography with contrast - neck
70450: CT head or brain without contrast material
70460: CT head or brain with contrast material

Magnetic Resonance Imaging:

70540: MRI imaging, orbit/face, and/or neck w/o contrast
70542: MRI imaging, orbit/face, and/or neck with contrast
70544: MR angiography, head without contrast
70545: MR angiography, head with contrast
70547: MR angiography, neck without contrast
70548: MR angiography, neck with contrast

Ultrasound:

76817: Transvaginal US, OB 76856: Pelvic US, non-OB
76830: Transvaginal US, non-OB 76857: Pelvic US, OB

‡ Each code in the series is based on MDM: Low to High

*Each code in the series is based on MDM: Low to High and Time

** Use 99417 in conjunction with 99205, 99215, and 99245 to report prolonged time that exceeds 15 minutes (1 unit); list each 15 min/unit separately

*** Use 99418 in conjunction with 99223, 99236, and 99255 to report prolonged time that exceeds 15 minutes (1 unit); list each 15 min/unit separately

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