Policy Name | Initial Inpatient Consultation
---|---

**Summary**
This policy addresses reimbursement of inpatient consultations.

**Policy Statement**
A consultation is a type of evaluation and management (E/M) service provided by a physician at the request of another physician or other appropriate source. Consultation services are part of a course of action that starts when a physician requests a consultation; the consulting physician then renders a service, and then provides a written reply to the referring physician in the form of opinion or advice. Only one initial consultation per inpatient hospitalization will be reimbursed when submitted by the same physician for the same patient. Consultations provided to hospital inpatients and residents of nursing facilities are reported using Current Procedural Terminology (CPT) codes 99251-99255.

Documentation in the patient’s medical record required for consultation services includes:

- A written or verbal request from the requesting physician for consultation.
- The consultant's treatment recommendations, opinion and/or advice.
- Any services that were ordered or performed by the consulting physician, along with a written report for each service.

It may be decided that the consultant accept responsibility for ongoing management of the patient’s entire care or for the care of a specific condition or problem. If the consulting physician continues to care for the patient during the same inpatient hospitalization, subsequent hospital care codes should be reported.

**Note:** Effective 01/01/2010, the Center for Medicare and Medicaid Services (CMS) no longer recognizes consultation codes (99241-99255), with the exception of Telehealth Inpatient Consultation codes (G0406-G0408 and G0425-G0427). For Medicare beneficiaries, physicians must submit an E/M code based on the location and complexity of the visit.
### Definitions

**Inpatient Consultation**  An inpatient consultation service provided to a hospital inpatient by a physician whose opinion or advice regarding evaluation and/or management of a specific problem is requested by another physician or other appropriate source.

**Same Physician or Other Health Care Professional**  The same individual physician or health care professional rendering health care services reporting the same federal Tax Identification Number.
Inpatient consultation for a new or established patient, which requires these 3 key components: A problem focused history; A problem focused examination; and Straightforward medical decision making. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self limited or minor. Physicians typically spend 20 minutes at the bedside and on the patient's hospital floor or unit.

99252 Inpatient consultation for a new or established patient, which requires these 3 key components: An expanded problem focused history; An expanded problem focused examination; and Straightforward medical decision making. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of low severity. Physicians typically spend 40 minutes at the bedside and on the patient's hospital floor or unit.

99253 Inpatient consultation for a new or established patient, which requires these 3 key components: A detailed history; A detailed examination; and Medical decision making of low complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate severity. Physicians typically spend 55 minutes at the bedside and on the patient's hospital floor or unit.

99254 Inpatient consultation for a new or established patient, which requires these 3 key components: A comprehensive history; A comprehensive examination; and Medical decision making of moderate complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Physicians typically spend 80 minutes at the bedside and on the patient's hospital floor or unit.

99255 Inpatient consultation for a new or established patient, which requires these 3 key components: A comprehensive history; A comprehensive examination; and Medical decision making of high complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate
to high severity. Physicians typically spend 110 minutes at the bedside and on the patient’s hospital floor or unit.

| Resources | Centers for Medicare and Medicaid Services (CMS)  
| • *Current Procedural Terminology* (CPT®)  
| • Healthcare Common Procedure Coding System (HCPCS) |
| Effective Date | 03/01/1997 |
| Revision | 08/30/2019  Annual policy review |
| Updates | 02/06/2017  Annual policy review  
| 04/14/2016  Annual policy review |