Interprofessional Telephone/Internet/Electronic Health Record Consultations

These codes were introduced in 2019 and Medicare will be paying for them in 2020. They are listed below with their approximate reimbursement under Medicare.

- 99446 5-10 minutes--$18
- 99447 11-20 minutes--$37
- 99448 21-30 minutes--$56
- 99449 31+ minutes--$74
- 99451 (not timed, typical time 5 minutes) --$38

The codes are to be used when the patient’s treating physician requests an opinion and/or treatment advice from a specialist to assist with diagnosis and/or management of the patient’s problem without the consultant having any face-to-face contact with the patient. In some cases the patient will be unknown to the consultant, in others the consultant may have seen the patient previously, but these codes can only be used if the patient has not been seen by the consultant within the past 14 days.

To use these codes, more than 50% of the time must be devoted to the medical consultative discussion either verbally or online. Except for code 99451, if more than 50% of the time is spent on data review, these codes may not be used. (Code 99451 includes the total review and communication time.) If the consultation takes place over more than one phone call, the time is cumulative. The codes require that a verbal and written report be made to the treating/requesting provider.

There is another code, 99452, that accounts for the time spent on the consultation by the requesting provider. This code has a typical time of 30 minutes, and under Medicare pays the same as 99451, approximately $38.