



Coding for After Hours and Other Special Services”

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[99053](#)

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The special services codes are found in the Medicine section in the *Current Procedural Terminology (CPT®)* codes and are always reported **in addition** to the basic service. The most commonly reported will be the after-hours services.

CPT codes **99050-99060**

- ▶ provide a mechanism for reporting special services provided as an adjunct to another basic service rendered (eg, there may be circumstances in which services are provided on an emergency basis in the office that disrupt other scheduled office services)
- ▶ can be reported by any physician/other qualified health care professional* per *CPT*
- ▶ are typically reported with only one code per encounter; however, circumstances may allow for more than one special services code to be reported per encounter (eg, **99051** and **99058**)
- ▶ have no assigned relative value units, but can be negotiated into individual contracts or are payable by certain private and public payers
- ▶ do not require a modifier
- ▶ can be reported in addition to either an E/M service or a non-E/M service

The reporting methods outlined in this article reflect the intent of the *CPT* Editorial Panel; however, third-party payers may request that you report these services differently. It is recommended that you check with the payers in your area to determine the variations in reporting of these services.

Special Services Codes

99050 Services provided in the office at times other than regularly scheduled office hours, or days when the office is normally closed (eg, holidays, Saturday or Sunday), in addition to basic service

- ▶ Used when patients are seen when the practice is normally “closed” or outside of regularly scheduled/posted office hours

*Other qualified health care professional is defined by *CPT* as an individual who is qualified by education, training, licensure/regulation (when applicable), and facility privileging (when applicable) who performs a professional service within his/her scope of practice and independently reports that professional service.

- ▶ Can be used on any day that the office is normally closed (eg, if your office is normally closed on Wednesdays)
- ▶ Typically only reported for sick/urgent visits to prevent patients from having to go to urgent care or emergency department and the diagnosis will support the reporting
- ▶ An example of when this code might be used is when an office has regularly posted office hours of Monday-Friday from 8:30 AM to 5:00 PM, and a patient is seen by the physician/other qualified health care professional* at 7:00 PM or during the weekend outside of the normally scheduled office time
- ▶ Evenings and holidays are not clearly defined by CPT; therefore check with your payers
- ▶ Do not report **99050** when:
 - The physician/other qualified health care professional* is scheduled to be in the office with support staff, even if patients are not scheduled
 - The physician/other qualified health care professional* is running late and sees a patient “after hours”
 - Providing telehealth services unless otherwise allowed by your payer(s) in writing

99051 Service(s) provided in the office during regularly scheduled evening, weekend, or holiday office hours, in addition to basic service

- ▶ Used when patients are seen when the practice has regularly scheduled expanded evening hours or regularly scheduled weekend/holiday hours
- ▶ Evenings and holidays are not clearly defined within CPT
- ▶ Can be reported in addition to any service, including sick/urgent visits, but also for addressing chronic medical conditions and preventive medicine services
- ▶ Evenings and holidays are not clearly defined by CPT; therefore check with your payers
- ▶ Do not report 99051 when:
 - The physician/other qualified health care professional* is running late and sees a patient during “evening hours”
- ▶ Do not report 99051 for telehealth services unless otherwise allowed by your payer(s) in writing

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99050 versus 99051

Example: A practice has posted office hours from 8am until 4pm. The office closes, but the physician receives a phone call at 5pm from a parent that their child is sick. The physician decides to stick around and have the mom bring the child in. He sees the patient at 5:15.

Code it!

99050

Example: A practice has posted office hours from 10am until 7pm. Per their payer contracts, all appointments made after 6pm are considered “evening hours.” A patient is scheduled for a 6:15pm well child appointment.

Code it!

99051

Example: A practice has office hours from 10am until 6pm. Per their payer contracts, all appointments made after 6pm are considered “evening hours.” A patient is scheduled at 5:30 for a sick visit. Due to some earlier complicated patients, the physician is running 40 minutes late. The patient is seen at 6:10pm.

Code it!

No code reported.

Example: A practice has “sick” same-day appointments only on Saturdays from 9am until noon. No patients are scheduled ahead of time. A physician/other qualified health care professional* is scheduled to be there along with staff.

Code it!

99051

99053 Service(s) provided between 10:00 PM and 8:00 AM at 24-hour facility, in addition to basic service

- ▶ Can be reported by any physician/other qualified health care professional*
- ▶ Requires that the facility is open 24 hours

Example: You speak with a mom at 11pm. Due to the severity of the symptoms, you refer her to a community emergency department (ED). Because there are no pediatric physicians in the ED, you decide to meet the patient there and see him at midnight. You can report **99053** in addition to other services.

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99056 Service(s) typically provided in the office, provided out of the office at request of patient, in addition to basic service

Example: A physician is called after hours. A mom believes that her 3 year-old “dislocated” his elbow. She is with him at the local park for another child’s soccer game. The physician is close by, so the mom asks if he could swing by the park. The physician agrees and meets there. After exam he confirms a nursemaid’s elbow and talks to the mom about reducing it. She agrees and the physician is able to reduce the elbow. Code **99056** can be added in addition to the other services.

99058 Service(s) provided on an emergency basis in the office, which disrupts other scheduled office services, in addition to basic service

- ▶ Reported when the condition of the patient requires immediate attention of the provider (eg, asthma attack, seizure) and that provider stops what they are doing to attend to the patient
- ▶ Diagnosis will support the medical necessity for reporting this service
- ▶ Do not report for:
 - Walk-ins
 - Patients you “fit” into the schedule
 - Siblings you add on during the encounter
- ▶ Unless they fit the criteria above

Example: A patient presents for an acute office visit. The nurse checks the patient in and notices that the patient seems very pale and weak. As she leaves the room, the patient faints, so she goes into another exam room to have the doctor see this patient immediately, disrupting the office schedule because the physician spends a great deal of time with the patient. You would report **99058** in addition to other services.

99060 Service(s) provided on an emergency basis, out of the office, which disrupts other scheduled office services, in addition to basic service

Example: As the on-call pediatrician at your local hospital, you are called in because a mom goes into labor with a pre-term baby. The hospital requires you to be there for the delivery. You leave the office immediately to attend the delivery. You can report 99060 in addition to other services provided.

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Table of Special Services Codes

	In-Office	Out of Office	Services that occur during regular office hours	Services that occur outside of regular office hours	24-Hour Facility	Emergency Basis
99050	X			X		
99051	X		X			
99053					X	
99056		X				
99058	X		X			X
99060		X	X			X

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