E/M Documentation Guidelines Have Been Updated for Texas Medicaid

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Texas Medicaid has provided an update to the E/M coding guidelines in the current Texas Medicaid Program Provider Procedures Manual, Volume 1 General Information, section 1.6.10, “General Medical Record Documentation Requirements,” and Volume 2 Medical and Nursing Specialists, Physicians, and Physicians Assistants, subsection 9.2.59, “Physician Evaluation and Management (E/M) Services.”

The documentation guidelines identified in section 1.6.10 for E/M services were updated as follows:

- (Mandatory) The selection of evaluation and management codes (levels of service) is supported by the client’s clinical record documentation. Providers must follow either the 1995 or 1997 Documentation Guidelines for Evaluation and Management Services published by CMS when selecting the level of service provided.

The documentation guidelines identified in section 9.2.59 for E/M services were updated as follows:

- E/M is a benefit of Texas Medicaid. Providers must follow either the 1995 or 1997 Documentation Guidelines for Evaluation and Management Services published by CMS when selecting the level of service provided.

For more information, call the TMHP Contact Center at 1-800-925-9126.