PCC Get Paid Drop-In



Nov 18, 2026 is Apple Cider Day



Get Paid Vision

Every pediatrician gets maximal payment for every service rendered with minimal administrative effort



Drop-In Premise

1. **Crowdsource**: Ask each other and PCC coding, billing, and / or payor questions
2. **Connect**: Change your Zoom name to connect with other billers (*Include your state for geographic crowdsourcing)
3. **Comment**: PCC appreciates your insight into our product and service development

Your PCC Get Paid Crew

Ben: SME / Consultant

Brian: Apps / Coding

Doug B: Implementation

Douglas: Education Content

Jack: Application Support

Jan: Operations / Coding

Jay: Developer

Jeremy: Implementation

Justin: Visionary

Kelsey: Business Analyst

Kristen: Project Manager

Mary: Tech Support

Michael: Product Design

Noah: Developer

Owen: Quality Assurance

Phil: Operat. Specialist

Tim B: Developer

Agenda

01

Your Questions

02

2027 CPT Update

03

Development Show & Tell

Your Questions

What's the best code for....?





How do you all respond when....?

Who's got a good policy for....?



2027 CPT Update

2027 CPT Changes

Effective for DOS' beginning 1/1/27

E&M Services Guidelines

ADDED - 2027

To report services provided to a patient who is admitted to a hospital, birthing center, or nursing facility in the course of an encounter in the office or other ambulatory facility, see the notes for initial hospital inpatient or observation care, initial nursing facility care, or maternity care services.

American Medical Association. CPT Professional 2027

E&M Services Guidelines

MODIFIED - 2027

Stable, chronic illness: A problem with an expected duration of at least one year or until the death of the patient. For the purpose of defining chronicity, conditions are treated as chronic whether or not stage or severity *has changed* (eg, uncontrolled diabetes and controlled diabetes are considered a single chronic condition). “Stable” for the purposes of categorizing MDM is defined by the specific treatment goals for an individual patient.

American Medical Association. CPT Professional 2027

E&M Services Guidelines

2026

Stable, chronic illness: A problem with an expected duration of at least one year or until the death of the patient. For the purpose of defining chronicity, conditions are treated as chronic whether or not stage or severity changes (eg, uncontrolled diabetes and controlled diabetes are a single chronic condition). “Stable” for the purposes of categorizing MDM is defined by the specific treatment goals for an individual patient. ~~A patient who is not at his or her treatment goal is not stable, even if the condition has not changed and there is no short-term threat to life or function. For example, a patient with persistently poorly controlled blood pressure for whom better control is a goal is not stable, even if the pressures are not changing and the patient is asymptomatic. The risk of morbidity without treatment is significant.~~

American Medical Association. CPT Professional 2027

E&M Services Guidelines

MODIFIED - 2027

Chronic illness with exacerbation, progression, or side effects of treatment:

A chronic illness that is acutely worsening, poorly controlled, or progressing. The intent is to control progression, provide additional supportive care, or manage side effects. A patient who is not at his or her treatment goal is not stable, even if the condition has not changed and there is no short-term threat to life or function. For example, a patient with persistent, poorly controlled blood pressure for whom better control is a goal is not stable, even if the pressures are not changing and the patient is asymptomatic. The risk of morbidity without treatment is significant.

American Medical Association. CPT Professional 2027

E&M Services Guidelines -
Care Management Services

ADDED - 2027

Definitions The following definitions apply to the Care Management Services section:

Clinical staff: A clinical staff member is a person who works under the supervision of a physician or other QHP and who is allowed by law, regulation, and facility policy to perform or assist in the performance of a specified professional service but who does not individually report that professional service. For the purposes of care management, “clinical staff ” refers to members of the care team, under the direction of a physician or other QHP, who provide clinical support (see care management activities) to the patient receiving care management.

American Medical Association. CPT Professional 2027

E&M Services Guidelines -
Care Management Services

ADDED - 2027

Definitions (cont'd)

Direction/directs/directed by: Refers to the physician or other QHP oversight of the care plan. The care team may implement aspects of the care plan, as appropriate, which have been approved by the physician or other QHP.

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E&M Services Guidelines -
Care Management Services

List of Care Management Activities:

- **ADDED** facilitating and providing social and emotional support to help the patient cope with the condition, address social drivers of health needs, and adjust daily routines to better meet diagnosis and treatment goals;
- **MODIFIED** ongoing review of patient status, including review of laboratory and other studies ~~and other studies not reported as part of an E/M service, noted above;~~

American Medical Association. CPT Professional 2027

E&M Services Guidelines -
Care Management Services

List of Required Care Management Capabilities:

- **MODIFIED** reporting physician or other QHP directs the activities of the care team

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E&M Services Guidelines -
Complex Chronic Care Management Services

- **MODIFIED** Complex chronic care management services are services that require at least 60 minutes of clinical staff time, under the direction of a physician or other qualified health care professional (QHP). Time spent by the physician or other QHP may be used toward the time necessary to report 99487, 99489, 99490. Complex chronic care management services require moderate or high medical decision making as defined in the Evaluation and Management guidelines. If the time spent by clinical staff, including physician or other QHP time, is less than 60 minutes but 20 minutes or more, see chronic care management services.

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E&M Services Guidelines -
Principle Care Management Services

- **MODIFIED** …Time spent by the physician or other QHP that does not meet the threshold to report 99424 may be used toward the time required to report 99426, 99427

Vaccines, Toxoids

ADDED

90616

Influenza virus vaccine, trivalent (tIRV), mRNA, 37.5 mcg/0.38 mL dosage, for intramuscular use

90639

Influenza virus vaccine, quadrivalent (qIRV), mRNA; 50 mcg/0.5 mL dosage, for intramuscular use

American Medical Association. CPT Professional 2027

Lactation Care Services

ADDED

98963

Lactation care directed by a physician or other qualified health care professional, including history, assessment, training, and report; first 30 minutes

Do not report 98963 for services of less than 30 minutes

+98964

… each additional 15 minutes (List separately in addition to code for primary procedure)

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2027 RVU Values

Comparison: New Codes to Other Time-based Staff

98963 Lactation care dir by MD/QHP … first 30 mins

+98964 …each addit 15 mins

✚ **99415** Prolonged clinical staff svce …during E&M in office or OP, direct patient contact w/MD supervision; first hour

✚ 99416 …each additional 30 minutes

NON-FACILITY TOTAL	
98963	1.78
98964	0.52
99415	0.66
99416	0.41

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G2211 in 2027

G2211 will be removed as of 1/1/2027

Replaced with modifier B1 and B2 which can be appended to E/M codes

Development Show & Tell

Join Us Again!

Live Weblabs and Drop-In Sessions - PCC Learn



December Drop-In

Register

Thu 12/17 2p EDT

UC 2027

Register

Nashville, TN

7/13-7/16

January Drop-In

Register

Tue 1/19 2p EDT

Thanks!

We appreciate your time and your **presence**

Please feel free to reach out to us

support@pcc.com



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