Community-Acquired Bacterial Pneumonia

Vital Signs

Coding Specifications

Codes required to document patient has pneumonia and a visit occurred:

An ICD-9-CM diagnosis code for pneumonia and a CPT code are required to identify patients to be included in this measure. A place-of-service indicator for emergency department is required if using the critical care CPT code to identify the patient for the measure.

All measure specific coding should be reported on the claim(s) representing the eligible encounter.

Pneumonia ICD-9-CM diagnosis codes

- 481, 482.0, 482.1, 482.2, 482.30, 482.31, 482.32, 482.39, 482.40, 482.41, 482.42, 482.49, 482.81, 482.82, 482.83, 482.84, 482.89, 482.9, (bacterial pneumonia)
- 483.0, 483.1, 483.8 (pneumonia due to other specified organism)
- 485 (bronchopneumonia organism unspecified)
- 486 (pneumonia organism unspecified)
- 487.0 (influenza with pneumonia)

AND

CPT codes

- 99201, 99202, 99203, 99204, 99205
- 99212, 99213, 99214, 99215
- 99281, 99282, 99283, 99284, 99285
- 99291

AND

- Place-of-service indicator: 23 (emergency department), if reporting 99291
- 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337
- 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350

Quality codes for this measure:

CPT II Code descriptors

(Data collection sheet should be used to determine appropriate code.)

- *CPT II 2010F:* Vital signs (temperature, pulse, respiratory rate, and blood pressure) documented and reviewed
- *CPT II 2010F–8P:* Vital signs (temperature, pulse, respiratory rate, and blood pressure) not documented and reviewed, reason not otherwise specified

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