## Falls — Risk Assessment (Measure 154) and Plan of Care (Measure 155)

## **Coding Specifications**

Codes required to document a visit occurred:

A CPT service code is required to identify patients to be included in this measure.

All measure-specific coding should be reported ON THE SAME CLAIM.

## CPT E/M service codes

- 97001, 97002 (physical therapy evaluation),
- 97003, 97004 (occupational therapy evaluation),
- 99201, 99202, 99203, 99204, 99205 (office new patient),
- 99212, 99213, 99214, 99215 (office established patient),
- 99241, 99242, 99243, 99244, 99245 (outpatient consult),
- 99304, 99305, 99306, 99307, 99308, 99309, 99310 (nursing facility),
- 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337 (domiciliary),
- 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350 (home visit)

Quality codes for this measure:

## **CPT II Code descriptors**

(Data collection sheet should be used to determine appropriate code or combination of codes.)

- *CPT II 1100F*: Patient screened for future fall risk; documentation of two or more falls in the past year or any fall with injury in the past year
- *CPT II 1101F*: Patient screened for future fall risk; documentation of no falls in the past year or only one fall without injury in the past year
- CPT II 1101F-8P: No documentation of falls status
- CPT II 3288F: Falls risk assessment documented
- *CPT II 3288F-1P:* Documentation of medical reason(s) for not completing a risk assessment for falls
- *CPT II 3288F-8P:* Falls risk assessment not completed, reason not otherwise specified
- *CPT II 0518F*: Falls plan of care documented
- *CPT II 0518F-1P*: Documentation of medical reason(s) for no plan of care for falls
- *CPT II 0518F–8P*: Plan of care not documented, reason not otherwise specified

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