

Codes: 99477, 99478, 99479, 99480

Basic Description: Neonatal Intensive Care, Initial and Subsequent

Code	Status	Age	Weight
99477	Initial	</= 28 days	Any
99478	Subsequent	Any	< 1500 gm
99479	Subsequent	Any	1500 – 2500 gm
99480	Subsequent	Any	2501 – 5000 gm

Age:

- Initial IC (99477): 28 days or younger
- Subsequent IC (99478, 99479, 99480): Any age infant meeting weight requirement

Weight:

- Initial IC (99477): Any weight infant meeting age requirement
- Subsequent IC 99478: <1500 gm
- Subsequent IC 99479: 1500 gm – 2500 gm
- Subsequent IC 99480: 2500 – 5000 gm
- On a subsequent visit, non-critical infants weighing > 5001 gm should receive standard subsequent hospital day bills 99231-33

Time:

- These are per diem, not time-based codes
- You do not need to document time spent delivering intensive care

Clinical Requirements:

- Care for neonates of infants who are *not critically ill* but have a need for intensive monitoring, observation, and frequent assessments by the health care team and supervision by the physician.
- Examples include:
 - o Neonates who require intensive but not critical care services from birth
 - o Neonates who are no longer critically ill but require intensive physician and health care team observation and interventions
 - o Recovering low birth weight infants who require a higher level of care than that defined by other hospital care services

Example diagnoses:

- neonatal fever
- sepsis
- hyperbilirubinemia
- respiratory distress
- acute respiratory failure
- tachycardia
- tachypnea

Example interventions:

- heat maintenance
- supplemental oxygen
- enteral nutrition
- parenteral nutrition
- IV antibiotic therapy
- Phototherapy
- follow up of lab testing
- follow up of culture
- frequent vital sign monitoring
- close clinical monitoring under the direct supervision of a physician

Example autotext / dotphrase for attending note

_[*****EDIT**: ID statement, reason for hospitalization or event description]

This patient is acutely ill and requires intensive monitoring due to _[*****Dropdown**: neonatal fever, sepsis, hyperbilirubinemia, respiratory distress, acute respiratory failure, tachycardia, tachypnea]. Intensive care interventions provided include: _[*****Dropdown**: supplemental oxygen, enteral nutrition, parenteral nutrition, IV antibiotic therapy, phototherapy, follow up of lab testing, follow up of cultures], frequent vital sign monitoring, and close clinical monitoring under the direct supervision of a physician.

Plan: _

Example autotext / dotphrase for attestation to resident note

Hospital Medicine Attending Attestation

Date of Service: _[*****EDIT**]

I have personally seen and examined the patient today. I have reviewed the resident's note and agree with the documented history and physical examination as being identical to my own (except as updated or modified below). I also agree with the resident's documented plan, which I formulated together with the house staff on rounds today (except as updated or modified below).

_[*****EDIT**: ID statement, supporting historical events and exam findings]

This patient is acutely ill and requires intensive monitoring due to _[*****Dropdown**: neonatal fever, sepsis, hyperbilirubinemia, respiratory distress, acute respiratory failure, tachycardia, tachypnea]. Intensive care interventions provided include: _[*****Dropdown**: supplemental oxygen, enteral nutrition, parenteral nutrition, IV antibiotic therapy, phototherapy, follow up of lab testing, follow up of cultures], frequent vital sign monitoring, and close clinical monitoring under the direct supervision of a physician.

Plan: _