



Accurate Documentation and CPT Coding for Nutrition, Vaccination, and Office Visits

Guidance for Providers

At Aetna Better Health of Michigan, we recognize that accurate coding is crucial for ensuring compliance, securing appropriate reimbursement, and minimizing audit risk. This letter outlines our recommendations for proper documentation and CPT coding related to the Service Categories below.

Proper documentation and coding are essential for compliance, accurate reimbursement, and quality patient care. This executive summary outlines the key components and best practices for documenting and coding nutrition counseling, vaccination counseling, and office visits using the appropriate CPT codes.

Nutrition Counseling

Code	Description	Use Case	Documentation Requirements
97802	Medical nutrition therapy; initial assessment and intervention, individual, face-to-face, each 15 minutes.	First session with the patient	Nutrition assessment, diagnosis, intervention plan, and monitoring strategy
97803	Re-assessment and intervention, individual, face-to-face, each 15 minutes.	Follow-up sessions	Update assessment, progress evaluation, modification of intervention plan

Vaccination Counseling

Code	Description	Use Case	Documentation Requirements
90460	Immunization administration through 18 years of age via any route of administration, with counseling by physician or other qualified health care professional; first	Pediatric vaccination counseling	Document counseling provided, vaccine administered, and parental/guardian discussion

	vaccine/toxoid component.		
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Office Visits

Code	Description	Use Case	Documentation Requirements
99213	Office or other outpatient visit for the evaluation and management of an established patient, typically 15 minutes.	Routine follow-up or problem-focused visit	Chief complaint, history, examination, medical decision making, and care plan

Key Documentation Points

- Ensure all services are documented clearly, including assessment, intervention, and patient response.
- Use the correct CPT code for each service provided, based on the session type and patient needs.
- Include details supporting medical necessity and the rationale for the chosen intervention.
- Monitor and update the care plan as needed, especially for follow-up visits and ongoing counseling.

Accurate documentation and CPT coding enhance patient care, support compliance, and ensure optimal reimbursement. Adhering to these guidelines will help maintain high standards in clinical practice and supports fair reimbursement and quality reporting.

Regards,
 Provider Experience
 Aetna Better Health of MI