COMPLIANCE TIP

TO: Posted to Compliance Website
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SUBJECT: HPI: Distinguishing Between Duration, Timing, and Context
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Coders and providers new to Evaluation and Management (E/M) services, and even those who are not new to E/M, sometimes confuse the “timing,” “duration” and “context” dimensions of the History of Present Illness (HPI). This may be because the AMA’s CPT® manual only includes seven dimensions of HPI: location, quality, severity, timing, context, modifying factors, and associated signs and symptoms. CPT® does not list “duration” as a separate dimension of HPI. In the April 1996 issue of the CPT® Assistant, an article entitled “Understanding the History of Present Illness: The Seven Dimensions” addressed “timing” as:

> Establishing the onset for each symptom or problem, and a rough chronology of the development of the problem, are also important. To do this, the physician may ask; is it primarily nocturnal, diurnal, or continuous? Or has there been a repetitive pattern for the symptom?

The 1995 and 1997 versions of the Documentation Guidelines for Evaluation and Management Services developed by the Centers for Medicare and Medicaid Services (CMS) include eight dimensions of HPI. Duration has been added while timing has been maintained. As a result, CMS splits the AMA’s description of timing into two separate dimensions:

Duration – How long the sign or symptom has been occurring. This would be documented as a length of time (e.g., 2 weeks, 1 year, 4 months, 3 days, etc.)

Timing – When the sign or symptom occurs. Timing would be documented as a period in time or frequency (e.g., at night, continuously, in the morning, monthly, occasionally, etc.).
“Context” often gets confused with “Timing” as well. Context is more of an event or activity and may even include a location rather than a period in time or length of time. Context describes what the patient was doing, where the patient was, or what caused the signs and symptoms to occur.

Here are some examples of context which certainly could vary based on the patient’s chief complaint:

- when I eat spicy food;
- after spending several hours in a smoke-filled bar;
- after my husband died;
- when I lift heavy objects;
- when I climb more than one flight of stairs; or
- after being hit in the head with a baseball.

Before coding the service, it is important to know whether the payer to whom the claim will be submitted follows CMS’ E/M guidelines or CPT’s, as there are differences between these two resources (the dimensions of HPI is just one example).

cc: Leon J. Haley, Jr., M.D., MHSA
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