



**TO: Physicians, Physician Assistants, Certified Nurse-Midwives, Advanced Practice Registered Nurses, Naturopaths, Podiatrists and Optometrists**  
**RE: Clarifying Guidance for Procedure Code 99417**

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The Department of Social Services (DSS) is updating the guidance for billing prolonged office and other outpatient evaluation and management (E/M) services for procedure code 99417\* previously posted in Provider Bulletin (PB) 2020-95.

Retroactive to January 1, 2021, DSS is following the guidance as published in the 2021 Current Procedural Terminology (CPT) manual published by the American Medical Association (AMA) and, when billing for CPT code 99417, providers may use the time spent with or without direct patient contact. Providers should review and follow the guidance provided in the 2021 CPT manual for billing and documenting services under procedure code 99417.

This provider bulletin supersedes only the section titled “Prolonged Services – 99417” in PB 2020-95. All other guidance in that PB remains in effect.

*\*Prolonged office or other outpatient evaluation and management service(s) beyond the minimum requires time of the primary procedure which has been selected using total time, requiring total time with or without direct patient contact beyond the usual service, on the date of the primary service, each 15 minutes of total time (List separately in addition to codes 99205, 99215 for office or other outpatient Evaluation and Management services).*