



# Pharmacist Billing

## Codes:

- E/M—99211 through 99215
- TCM—99495, 99496
- CCM—99439, 99490, 99487, G0511
- CGM—95249, 95250, 95251
- MTM—99605, 99606, 99607
- PCM—99424—99427



Pharmacists must be savvy managers, understanding the costs for their time, the administrative overhead required for their oversight, and adjudication of payment for their services.”

**-Shane P. Desselle**  
RPH, PhD, FAPhA



## Overview

Although significant progress has been made toward provider recognition for pharmacists in recent years, reimbursement beyond traditional dispensing services has continued to present some significant challenges. We hope that this resource will be helpful in targeting your efforts toward specific, reimbursable services and gaining an understanding of the opportunities that exist in the current market.

## Basic Foundational Elements

1. Organizational Structure (Independent, RHC, FQHC, Clinic, Pharmacy)
2. Service Framework (Transitional Care, Chronic Care, MTM)
3. Documentation (Standardized, Data Collection)

**Q: What restrictions and/or regulations does our organization face?**

A: Payers? Medical Billing? FQHC/RHC?

**Q: What advantages does our organization enjoy?**

A: Independence? Provider engagement?

Administrative engagement? Patient population?

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