

Internal Medicine Coding Alert

Clip-and-Save Quick Tips: Understand When Diagnostic FOBT Codes Apply

You've got more ICD-9 choices than you may think

Now that you've got the rules for reporting screening tests locked in, you should learn what coding a diagnostic fecal occult blood test (FOBT) is all about. The key is knowing how to justify diagnostic code 82270 (Blood, occult, by peroxidase activity [e.g., guaiac], qualitative; feces, 1-3 simultaneous determinations) to Medicare payers.

How we can help: Use these CMS-approved conditions and symptoms that warrant an internist ordering a diagnostic FOBT.

1. The patient must have a known or suspected digestive tract condition that might cause intestinal **bleeding.** For example, the internist provides a stool-collection kit to a patient who has irritable bowel syndrome (564.1). When the patient returns the samples, you may bill diagnostic FOBT code 82270, says **Cathy Satkus**, a professional coder for Harvard Family Physicians, an internal medicine and family practice facility in Tulsa, Okla.

2. Your patient has unexpected anemia. In these cases, you should select the appropriate anemia ICD-9 codes (280.0-280.9).

3. The internist finds conditions related to blood loss. You can expect such a finding when the patient presents to the office with abdominal pain in the right upper quadrant (789.01), for instance.

4. A patient complains of black or red-tinged stools. A Medicare-approved diagnosis code for this condition includes 787.7 (Abnormal feces).

For more on diagnostic FOBTs, go online to www.cms.hhs.gov/mcd/viewncd.asp?ncd_id=190.34&ncd_version=1&show=all.