

## Internal Medicine Coding Alert

### CPT 2009: Break Down Outpatient ESRD Into These G-Code Mirroring Cat I Codes

**Using these codes for inpatient dialysis will result in claim denial.**

**Coders, take notice:** Since Jan. 1, Medicare has been throwing out claims for G0308-G0327, and you need to refile with CPT age-based codes. Here's how to correctly assign the new monthly, home, or partial month series.

#### **New Section Replaces 90918-90925, G0308-G0327**

First, you'll be out of luck if you look under "dialysis" for codes 90918-90925. CPT 2009 deletes and relocates them to a new section entitled "End-Stage Renal Disease Services," says **Richard J. Hamburger, MD, FACP, FASN**, professor emeritus of medicine at Indiana University in Indianapolis. New codes include 90951-90970, which contain new descriptors.

Similarly, if you thumb through your HCPCS Level-II 2009 manual, you'll find that Medicare's ESRD codes G0308-G0327 have been deleted. Instead use the new CPT Category I codes 90951-99070.

#### **Rely on 90951-90970 Only for ESRD Outpatients**

The new codes 90951-90970 allow you to capture physician work for outpatient dialysis services. Do not use the new codes for:

- inpatient services
- E/M services that cannot be furnished on dialysis
- non-ESRD dialysis services performed in an outpatient setting.

**Instead:** Continue to use existing CPT category I "Hemodialysis" codes 90935-90940 for inpatient ESRD and non-ESRD procedures or for outpatient non-ESRD dialysis services.

#### **Check If Treatment Is Monthly, Home, or Partial**

Patients will fall into one of three categories of outpatient ESRD codes.

**Monthly:** For patients who have monthly outpatient dialysis, you will use 90951-90962 (End-stage renal disease [ESRD] related services monthly, for patients ...) per month based on the patient's age at the end of the month and the number of face-to-face visits. You can also use these codes when a physician provides a complete assessment and outpatient dialysis services over a period of less than a month.

**Home:** When a patient is on monthly home dialysis, you will use 90963-90966 (End-stage renal disease [ESRD] related services for home dialysis per full month ...) per month, which replace HCPCS Level-II codes G0320-G0323. CPT divides these codes into the same age groupings as 90951-90962.

**Partial month:** For a patient who had not had a complete assessment during the month and requires dialysis services for less than a month or has had home dialysis for less than a month, assign an age-based code from 90967-90970 (End-stage renal disease [ESRD] related services for dialysis less than a full month of service, per day ...) per day.

For reporting purposes, CPT considers a month as having 30 days. Hamburger, who is a CPT advisor, noted in "ESRD Services: CPT & RVUs" at the CPT and RBRVS 2009 Annual Symposium in Chicago, that additional circumstances which may cause partial month codes to be used include:

- transient patients
- before a complete assessment was furnished:
  - a. the patient was hospitalized
  - b. dialysis was stopped due to recovery or death
  - c. the patient received a kidney transplant.