

Internal Medicine Coding Alert

On page 40 of May issue (Vol. 13 No. 5):

On page 40 of May issue (Vol. 13 No. 5): The answer to the Reader Question "PAP/Pelvic Codes Depend on Payer" suggestively referred to V72.31 (Routine gynecological examination, general gynecological examination with or without Papanicolaou cervical smear, pelvic examination [annual] [periodic]) and V76.2 (Special screening for malignant neoplasms, cervix, routine cervical Papanicolaou smear) as procedure codes. In fact, they are the only ICD-9 diagnosis codes that many private payers recognize in order to support the billing of HCPCS codes G0101 (Cervical or vaginal cancer screening; pelvic and clinical breast examination) and Q0091 (Screening papanicolaou smear; obtaining, preparing and conveyance of cervical or vaginal smear to laboratory). For more info, you may refer to http://www.cms.gov/MLNProducts/downloads/mps_guide_web-061305.pdf (pp 15-18).