

## Internal Medicine Coding Alert

### Reader Question: Charge Patients for 99080 Claims

**Question:** I have tried using special reports code 99080 for a Regence Blue Shield report and for a patient letter describing lab results and treatment recommendations. Both times Regence denied the code, stating that 99080 is not a covered benefit. Even though I had the patient sign a waiver prior to charges, the insurer made 99080 a provider "write off" and refused to allow me to bill the patient. Do you have any advice on getting the claim paid?

Washington Subscriber

**Answer:** No insurance companies pay for 99080 (Special reports such as insurance forms, more than the information conveyed in the usual medical communications or standard reporting form). You should use this code when patients bring in forms to be completed that are over and above the usual documentation required to adjudicate a claim. Therefore, the patient should pay for this service.

For example, an established patient presented with a form for the physician to complete certifying that the patient was physically fit to go skydiving. The physician could charge code 99080, but not to the patient's insurance company. This would be an "out-of-pocket" expense to the patient.

In addition, you can never report 99080 in conjunction with 99455 (Work related or medical disability examination by the treating physician ...) and 99456 (Work related or medical disability examination by other than the treating physician ...) when completing worker's compensation forms. CPT does not allow this coding combination.