

Internal Medicine Coding Alert

Reader Question: Don't Bill 82270 or 82274 Until Patient Returns Hemoccult Test

Question: I've always been told that if you give a patient a take-home hemoccult test, that you can't bill the service until the patient brings it back to the office. Is that correct? Do we record the date of service for when the card is given to them, or when it's given back?

Maine Subscriber

Answer: Yes, you're correct -- the code represents testing the specimen(s) and reading the results, not just handing the patient the card. You'll typically report the service with one of three codes, depending on the purpose of the test (e.g. screening versus diagnostic) and the nature of the test (i.e., peroxidase activity versus immunoassay). The codes in question are:

- 82270 -- Blood, occult, by peroxidase activity (e.g., guaiac), qualitative; feces, consecutive collected specimens with single determination, for colorectal neoplasm screening (i.e., patient was provided 3 cards or single triple card for consecutive collection)
- 82272 -- Blood, occult, by peroxidase activity (e.g., guaiac), qualitative, feces, 1-3 simultaneous determinations, performed for other than colorectal neoplasm screening
- 82274 -- Blood, occult, by fecal hemoglobin determination by immunoassay, qualitative, feces, 1-3 simultaneous determinations.

Note: If the patient doesn't return for you to read the card, you won't bill the service unless you have a policy stating that you can bill the patient directly for the supply cost. The patient should be aware of the policy up front.