

Internal Medicine Coding Alert

Reader Question: Never Submit 99211 With 96372

Question: One of our patients purchases her medicine through her prescription program and comes to our office for the injection. The nurse normally administers the injection, which we would report with 96372. CPT® guidelines direct us to bill 99211 if the visit takes place without physician supervision. What's the correct way to handle this?

Vermont Subscriber

Answer: You cannot ever bill 99211 (Office or other outpatient visit ...) with 96372 (Therapeutic, prophylactic or diagnostic injection ...). In fact, according to the Correct Coding Initiative (CCI), no modifier will separate the edit bundling these codes together, so there are no circumstances under which they can be reported together. You have two options:

- **Option 1:** You bill 96372 for the injection as an incident-to service if a supervising physician is present in the office.
- **Option 2:** You bill 99211 instead.

This rule would only apply when a nurse (RN or LPN) is giving the injection, not the internist, nurse practitioner (NP), or physician assistant (PA). If a physician or other qualified health care professional is administering the injection himself or herself and reporting it under his or her provider number, you should report the injection with 96372.