

Internal Medicine Coding Alert

Reader Question: Take Time to Answer This Question, Infuse Your Coding Knowledge

Question: Our nonphysician practitioner (NPP) performed an infusion lasting 107 minutes. How should we code it?

West Virginia Subscriber

Answer: Your question doesn't specify whether the infusion was subcutaneous (SubQ) or intravenous (IV). This is important, as there are two different codes for the different types of infusion.

If your NPP performed a SubQ infusion, you would code 96369 (Subcutaneous infusion for therapy or prophylaxis (specify substance or drug); initial, up to 1 hour, including pump set-up and establishment of subcutaneous infusion site(s)) for the first infusion hour. You would then use the add-on code 96370 (... each additional hour (List separately in addition to code for primary procedure)) for the extra 37 minutes, assuming there was no additional pump set-up with the establishment of new subcutaneous infusion site(s). If there was, you would report 96371 (Subcutaneous infusion for therapy or prophylaxis (specify substance or drug); additional pump set-up with establishment of new subcutaneous infusion site(s) (List separately in addition to code for primary procedure)) for the extra 37 minutes.

IV infusions have similar time stipulations. So, if this was the method your NPP used, you would use 96365 (Intravenous infusion, for therapy, prophylaxis, or diagnosis (specify substance or drug); initial, up to 1 hour) for the first infusion hour, adding on 96366 (... each additional hour (List separately in addition to code for primary procedure)) for the extra 37 minutes, assuming only one drug was involved. Otherwise, you may have to look at 96367 (Intravenous infusion, for therapy, prophylaxis, or diagnosis (specify substance or drug); additional sequential infusion of a new drug/substance, up to 1 hour (List separately in addition to code for primary procedure)) and/or 96368 (Intravenous infusion, for therapy, prophylaxis, or diagnosis (specify substance or drug); concurrent infusion (List separately in addition to code for primary procedure)) as add-ons to the base code.

Additionally, you can report the appropriate J code(s) for the drug(s) specified in either of the infusion methods.