

Internal Medicine Coding Alert

Reader Questions: Test Reason Can Lead You to FOBT Code

Question: A commercially insured patient with rectal bleeding reports to the internist. She obtains a single fecal specimen via digital rectal examination (DRE) and sends the patient home. Which testing code should I choose: 82270 or 82272?

Tennessee Subscriber

Answer: Because the internist performed the fecal occult blood test (FOBT) due to the patient's symptoms, you'll code the encounter with 82272 (Blood, occult, by peroxidase activity [e.g., guaiac], qualitative, feces, 1-3 simultaneous determinations, performed for other than colorectal neoplasm screening).

If prompted by specific symptoms, the internist often performs DRE testing in the office to see if the bleeding is ongoing. On the claim, remember to append 569.3 (Hemorrhage of rectum and anus) to 82272 to reflect the patient's bleeding.

"Take-home" FOBT code: While you'll typically report 82272 for in-office FOBTs, you should choose 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 three cards or single triple card for consecutive collection]) for a "take-home" FOBT.

During a take-home FOBT, the patient obtains the samples himself at home and returns the cards to the physician. Internists conduct the 82272 FOBTs for screening purposes. First Coast Service Options, a Florida Medicare carrier, offers an explanation online at

 $\frac{\text{http://www.cms.hhs.gov/MCD/viewlcd.asp?lcd_id=6066\&lcd_version=15\&basket=lcd:6066:15:Colorectal+Cancer+Screening:Carrier:First+Coast+Service+Options||+lnc.+(00590):.}$