

Internal Medicine Coding Alert

You Be the Coder: Port Catheter Flush

Test your coding knowledge. Determine how you would code this situation before looking at the box below for the answer.

Question: Which code should I report when a nurse does a port catheter flush on a patient if the procedure is accurately documented? Is there a code for PAC flushes, and would I use the saline code and heparin flush code with this?

Arkansas Subscriber

Answer: There is no CPT code for port catheter flushes, so the billing of this service would depend on who rendered the service and under what circumstances. Assuming that a nurse rendered this service in a physician's office, 99211 could be billed but the "incident to" rules would apply. Assuming proper documentation, this code could only be billed by the nurse if the physician was present in the office suite at the time the service was rendered. If the physician rendered the service, he or she would bill whatever level of E/M service (99212-99215) was documented.

Some oncologists around the country bill for this service using 90784 (therapeutic, prophylactic or diagnostic injection; intravenous). However, both the AMA and Medicare have indicated that port flushes should not be billed this way. You would definitely bill for the supplies for the flush, i.e., J1642, injection, heparin sodium (Heparin Lock Flush), per 10 units.