

Part B Insider (Multispecialty) Coding Alert

CCI EDITS: Bid Farewell to Troubling DEXA Edits

But new CCI additions may disappoint some practices

For once, you've got some good news from the Correct Coding Initiative (CCI).

Thanks to the CCI's Version 14.1, you can once again report DEXA and absorptiometry codes 77080-77081 and 77083 with brachytherapy codes 77750-77799. Effective April 1, CCI will delete this edit.

With prostate cancer treatment, patients can suffer osteoporosis, so DEXA and absorptiometry can determine whether the patient is at risk for these conditions.

New additions: CCI 14.1 didn't stop with its deletion--as usual, most of the changes in this version of CCI were additions to the already expansive CCI edit database.

You'll find transmyocardial transcatheter closure codes 0166T-0167T bundled into dozens of cardiology codes, such as septal defect closure codes 33676-33688, because the descriptions overlap one another. You can separate these edits with a modifier.

Pathology: This quarter, CCI also takes aim at 87641 (Staphylococcus aureus), bundling it into tissue culture code 87253.

Pulmonology: CCI also hones in on vent management, bundling 94004 (Ventilation assist and management, nursing facility) into hospital vent management code 94002. You can separate these edits with a modifier.

In addition, you can no longer report aerosol inhalation code 94642 with continuous inhalation treatment code 94644. Starting in April, CCI will deny the charge for 94642, and no modifier can separate this bundle.

Anesthesia: If you've wondered about billing indicator dilution study codes 93561-93562 with anesthesia, CCI makes the answer clear. You can no longer report these two codes with hundreds of anesthesia codes, no modifier can separate them.

Evaluation and management: Starting in April, you'll find hydration codes 90760-90765 and 90772-90774 bundled into the E/M series.

Possible rationale: CCI 7.3 noted that all codes with -xxx- global periods included minor E/M services, so practices couldn't bill those codes with an E/M unless they could justify using modifier 25. But each individual carrier was able to decide whether to implement that rule.

-Now that the CCI is bundling some of those codes (such as 90760) with E/M services, they're not leaving it to the carriers anymore,- says **Barbara J. Cobuzzi, MBA, CPC-OTO, CPC-H, CPC-P, CPC-I, CHCC**, with **CRN Healthcare Solutions** in Tinton Falls, New Jersey.