

Part B Insider (Multispecialty) Coding Alert

CCI: Steer Your Way Clear Through CCI 16.2's Injection, Oncology Edits

Not all news is bad news, however, with several code pair deletions coming your way.

Effective July 1, you'll have over 16,000 new edit pairs to stay on top of, thanks to CCI Version 16.2, which CMS released last week.

"There are 16,843 new edit pairs, bringing the total number of active edit pairs to 653,718," said analyst **Frank Cohen, MPA, MBB** of The Frank Cohen Group, LLC, in a June 17 announcement about the CCI changes.

For instance: Several codes will become components of sinus endoscopy procedures effective July 1. For instance, you'll no longer be able to report facet joint injection codes 0213T or 0216T with nasal and sinus endoscopy codes 31231-31294, and no modifiers can separate these edits.

Otolaryngologists don't perform facet joint injections, says **Barbara J. Cobuzzi, MBA, CPC, CENTC, CPC-H, CPC-P, CPC-I, CHCC**, president of CRN Healthcare Solutions, a coding and reimbursement consulting firm in Tinton Falls, N.J., making these CCI pairings curious. Some analysts believe that CMS is simply covering its bases to ensure that practices don't report the new T codes as a substitute for more appropriate anesthesia codes.

In fact, the new Category III facet joint injection codes 0213T-0216T will be bundled into hundreds of additional codes starting in July, ranging from cardiac procedures to gastroenterology services to orthopedic procedures. For instance, 0213T and 0216T are bundled into all of the wrist incision codes (25000-25040), in addition to scores of other orthopedic procedure codes. No modifier can separate the majority of these edits.

CCI Deletes 36 Code Pairs

Not all news from CCI Version 16.2 is bad news. CCI corrects several previous code bundles by deleting 36 edit pairs effective July 1, "with 12 backdated to January 1, 2010 and two backdated to April 1, 2010," Cohen said in his June 17 analysis.

For instance: You've faced an edit that has barred you from reporting cardiovascular stress test codes 93015-93017 with 93025 (Microvolt T-wave alternans for assessment of ventricular arrhythmias) since 2002, but starting July 1, you'll be able to report these codes together, thanks to an edit deletion in the new version of CCI.

CCI Slashes Ability to Separate Some Edits

You can no longer use a modifier (such as 59, Distinct procedural service) to separate the edits bundling 25 different code pairs. For instance, in the past you could report 77785 (Remote afterloading high dose rate radionuclide brachytherapy; 1 channel) with 77761 (Intracavitary radiation source application; simple) and separate these edits with a modifier to collect for both procedures. Starting July 1, no modifier will allow you to bill the codes together.

The good news: On 386 other bundles, CCI took the opposite approach, now allowing you to use a modifier to separate the edits. For instance, in the past you could not use a modifier to report both 38571 and 38770 together, but effective July 1, you will be able to bill them together using a modifier.

The same goes for the edit bundling 64553 (Percutaneous implantation of neurostimulator electrodes; cranial nerve) into 64555 (...peripheral nerve [excludes sacral nerve]) -- you can now report the codes together with a modifier. In all of these cases, you can only append a modifier (such as 59) when the bundled procedures are considered distinct from one another.

