

Part B Insider (Multispecialty) Coding Alert

CHEMOTHERAPY: Bill One E/M Service Before 78804 And 79403

But don't bill separately for administration of infusion

Apart from a few hold-outs most of the carriers are already providing instructions for how to bill new [CPT 78804](#) for using Zevalin or Bexxar multiple day tests of tumor localization or distribution of radiopharmaceutical agents.

Luckily, a few carriers have already issued some helpful coding guidance on how to use 78804. Figuring out the appropriate biodistribution of the agents requires a comparison of isotope uptake in several organ systems between three scans taken over the seven days following administration, says **Cigna Healthcare**. Generally, therapeutic administration happens one to two weeks after the dosimetric administration.

Thus, the study requires whole-body gamma camera images within 24 hours and then again after a couple of days. Patients may also require a third set of images at 90-120 hours. The physician provides review and oversight during the entire study. The provider should personally supervise a slow infusion of the indium-111 labeled antibody, watching for potential reactions and should make sure images are free of motion and artifacts.

After the second or third set of images, the physician will sit down and compare the images together, "and that's why it's one code," explains consultant **Cindy Parman** with **Coding Strategies** in Powder Springs, GA. The patient doesn't have to be there when the images aren't being taken. Your documentation should include the complete interpretation and report, who did the injections and how long it took.

Group Health NY says you must submit the diagnostic test and the therapeutic treatment on separate claims, but you shouldn't report the administration of the diagnostic and therapeutic radiopharmaceutical separately, because this is included in the overall procedure codes. However, you can bill one evaluation and management service to evaluate the patient for the diagnostic and therapeutic services. You shouldn't bill more than one E/M service.

Separately, the 2004 CPT update also revised the descriptors for 78800 (Radiopharmaceutical localization of tumor or distribution of radiopharmaceutical agent[s]; limited area) and 79400 (Radiopharmaceutical therapy, nonthyroid, nonhematologic by intravenous injection). In both cases, the codes now clearly include radiopharmaceutical agent distribution to keep up with "changing medical practice."