

Part B Insider (Multispecialty) Coding Alert

CMS Clarifies Chemotherapy, E/M Billing

Billing for chemotherapy and drug infusions just became a bit simpler.

In Transmittal 147, issued April 24, the **Centers for Medicare & Medicaid Services** explains that it'll allow carriers to pay for chemotherapy administration code 96408 more than once per day. And it'll pay for 96408 for each drug administered. Also, CMS has established work relative value units (RVUs) for chemotherapy administration codes 96400, 96408 to 96425, 96520 and 96530, plus nonchemotherapy drug infusion services 90780 to 90781 and drug injection codes 90782 to 90788. These codes previously lacked work RVUs.

Each of these codes will have work RVUs equal to those for a level 1 office medical visit for an established patient (99211). But CMS reiterates that it won't pay for 99211 on the same day as a chemo administration code or non-chemo drug infusion service. CMS says that if providers [bill for 99211](#) with drug injection code, it'll pay only for 99211.

If you're providing an E/M code higher than 99211, you should use the -25 modifier. And carriers should pay for higher level E/M services on the same day as chemo or non-chemo infusion services if the E/M code meets the requirements CMS laid out in section 30.6.6 of its Internet Only Manual.