

Part B Insider (Multispecialty) Coding Alert

Coding: NCCI Edits to Gastrointestinal Surgery are Hard to Stomach

43247 and 43239 especially targeted

Billing for surgery on the digestive system just became a maze of dead ends and blind alleys. As of Oct. 1, you'll be unable to bill for many common procedures together. The new edits in the National Correct Coding Initiative version 9.3 include the following:

1. Enterectomy codes 44120 and 44125 became components of donor enterectomy codes 44132-44136. You can't use a modifier to override these edits. Also a component of 44133 and 44135 are hepatectomy codes 47120-47130.
2. [CPT 43247](#) (Upper gastrointestinal endoscopy; with removal of foreign body) became a component of 43246 (Upper gastrointestinal endoscopy; with directed placement of percutaneous gastrostomy tube). Meanwhile, two codes for dilation of esophagus (43450 and 43453) became components of 43247. Also, 43760* (Change of gastrostomy tube) became a component of 43247 as well.
3. Two codes became components of 43239 (Upper gastrointestinal endoscopy; with biopsy, single or multiple): stomach biopsy code 43600 and intestinal biopsy code 44100.
4. Three codes became components of 48554 (Transplantation of pancreatic allograft) and 48556 (Removal of transplanted pancreatic allograft). Even with a modifier, you can no longer bill for pancreatectomy codes 48140-48146 with either of those codes.
5. CPT code 48148 (Excision of ampulla of Vater) became a component of enterectomy codes 44120-44127, pancreatectomy codes 48152-48155, and pancreas transplantation codes 48554-48556. Pancreatectomy codes 48140-48155 also became components of 48554 and 48556.