

## Part B Insider (Multispecialty) Coding Alert

## Correct Coding Initiative: CCI 15.0 Takes Aim at Several New CPT Codes

New IV infusion code 96365 sees scores of bundles.

With over half a million changes to the Correct Coding Initiative (CCI), you've got your work cut out for you this post-holiday season.

Version 15.0 of CCI, which was effective on Jan. 1, institutes over 522,000 changes to its code pairs, with 18 percent of the changes taking place among the codes in CPT's anesthesia section.

**E/M codes:** Medicare payers will now bundle most of the E/M codes (99201-99215) into the new brachytherapy codes (77785-77787), and no modifier can separate these bundles.

"Most of the other brachytherapy codes include an E/M service according to CCI, so although it would have been nice not to have this new code bundled with E/M, it was expected," says **Ali Johns** with East Billing in East Hartford, Conn.

In addition, CCI will also bundle the E/M series into several codes from the new hydration series (such as 96360, 96365, and 96372-96374). This means the payer will deny the E/M code when billed with the hydration code. However, you can separate this edit with a modifier (such as 59, Distinct procedural service), when the physician performs the services as separately identifiable and medically necessary.

**Hydration codes under fire:** The new edition of CCI bundles codes from CPT's new hydration series into hundreds of other codes besides just E/M.

**For example:** You'll no longer be able to report 96365 (Intravenous infusion, for therapy, prophylaxis, or diagnosis [specify substance or drug]; initial, up to 1 hour) with most of the codes from the anesthesia section (01000-01999), and no modifier can separate these bundles.

Likewise, 96365 also now bundles into most of the remaining surgical and procedural codes from the rest of CPT, including integumentary, musculoskeletal, respiratory, cardiovascular, digestive, radiology, and other systems. In some cases, a modifier can separate the bundles (such as with the urology codes, 50010-53852), whereas in others, no modifier will allow you to collect for 96365 (for instance, when it's bundled into the radiology oncology codes (77261-77790).