

Part B Insider (Multispecialty) Coding Alert

CPT 2008: Breaking News--No More Unlisted Codes For Laparoscopic Ob/Gyn Surgeries

3 approaches, 3 codes for paravaginal defect repair

If you code for a paravaginal defect repair (57284), you may find yourself throwing out the rule book soon.

The upshot: The descriptor for 57284 will change to reference only the open abdominal procedure. And you'll have one new code for the laparoscopic approach and another one for vaginal approach.

Currently, CPT doesn't offer a code for a laparoscopic paravaginal defect repair, laments one Ob/Gyn physician. Some doctors have tried to use 57284 for the laparoscopic approach, but -57284 was meant to be for an open approach.- So most experts advise you to use an unlisted code instead, he notes.

The new codes (and 57284) will include any additional urethropexy or cystocele repair that your physician performs as part of the paravaginal defect repair, one source familiar with the changes tells The Insider.

All three codes also will include any bladder or urethra fixation, commonly referred to as a -Burch- or -Marshall-Marchetti-Kranz (MMK)- procedure. If the surgeon operates on the urethra at the same time, payors consider this code part of the procedure, says the source. Helpful: Your CPT book will list the codes you cannot bill with these codes.

Note: You will be able to bill separately for a -sling procedure- for stress incontinence, the source notes. Previously, CPT included this procedure in the descriptor for 57284, but in January, none of the three new codes will include the sling procedure (57288).

Of course, the Correct Coding Initiative (CCI) may bundle 57288 into 57284 and the two new codes. If that happens, you should contact your specialty society and try to encourage the CCI to overturn those edits, experts advise.

Other changes: CPT 2008 also will include four new codes for total laparoscopic hysterectomy, say sources. And CPT 2008 will renumber some established codes, too. Finally, you'll have some new codes that will allow you to specify the size of an abdominal lesion that your physician removes.

Note: Look inside for more news on 2008's CPT code changes.