

Part B Insider (Multispecialty) Coding Alert

CPT® 2013: Ob-Gyn Coders: Consider Several Revisions to Your CPT® Manual

The few new codes will be overshadowed by verbiage changes.

Although the 2013 CPT® manual doesn't include hundreds of new codes impacting [ob-gyn practices](#), you'll be happy to see several changes that will help you submit cleaner claims going forward, experts say.

For example, you'll find a new code for a cystourethroscopy: 52287 (Cystourethroscopy, with injection[s] for chemodenervation of the bladder). Uro-gyns may perform this procedure to treat idiopathic overactive bladder with botulinum toxin that he can't treat in any other way.

Currently, you have to report this with 52000 (Cystourethroscopy [separate procedure]) and 64614 (Chemodenervation of muscle[s]; extremity[s] and/or trunk muscle[s] [e.g., for dystonia, cerebral palsy, multiple sclerosis]).

Watch out: Additionally, you'll see new sets of biochemical assay codes for ovarian cancer, type 2 diabetes, and fetal congenital anomalies (81500-81512) -- but your ob-gyn will only order these tests and not perform them. You'll also see the wording change in revisions to various levels (1-9) of molecular pathology testing, but again, your ob-gyn doesn't perform these services.

Don't Miss These Revisions

Speaking of revisions, most of the ob-gyn CPT® 2013 changes you'll need to adopt relate to these type of changes " not new codes. So if you miss these subtle differences, then you may be setting yourself up for lost reimbursement or a denial. The new wording is underlined, and you'll see the deleted wording via the strikethroughs.

For instance, you'll see that venipuncture code 36410 (Venipuncture, age 3 years or older, necessitating physician's the skill of a physician or other qualified health care professional [separate procedure], for diagnostic or therapeutic purposes [not to be used for routine venipuncture]) will include the skill of the physician or other qualified health professional.

You will no longer find a reference to a physician in 59300 (Episiotomy or vaginal repair, by other than attending physician).

You will also find imaging guidance now included with 64561 (Percutaneous implantation of neurostimulator electrode array; sacral nerve (transforaminal placement) including image guidance, if performed). Ob-gyns may perform this on patients with urge incontinence.

You will find an addition to codes 76376 and 76377 (3D rendering with interpretation and reporting of computed tomography, magnetic resonance imaging, ultrasound, or other tomographic modality with image postprocessing under concurrent supervision; not requiring image postprocessing on an independent workstation).