

Part B Insider (Multispecialty) Coding Alert

CPT Panel Will Resolve Tricky Drug Coding Issues

CPT 2006 should untangle several of your trickiest drug billing questions.

The CPT Editorial Panel decided in its February meeting to clarify many changes it will make effective in CPT 2006. For example, the panel decided you should only bill the CPT code for the "push" technique when an infusion lasts less than 15 minutes. The panel also decided that the professional who administers the infusion substance or drug must be continuously present during the infusion, according to the **American Society for Clinical Oncology**.

In addition, the CPT Panel will clarify in CPT 2006 that you should only bill one "initial" code when you administer multiple injections or infusions, unless protocol requires that you use two separate sites. You should use the "initial" code that best describes the reason for the encounter, regardless of the order in which the provider administers the infusions or injections.

The CPT panel agreed to add language to the hydration infusion section clarifying that the services also include therapeutic, prophylactic or diagnostic injections, ASCO reports. And the panel will add language to the therapeutic injection section to clarify that these services are "also for prophylactic injections." Finally, the panel will specify that when you report codes in which infusion time is a factor, you should select the right code using the documented time it took the professional to administer the infusion.