

Part B Insider (Multispecialty) Coding Alert

IV Infusion Bundled Into Lesion Laminectomy Codes

Physician Coder have been accustomed to billing 90780 (Intravenous infusion for therapy/diagnosis, administered by physician or under direct supervision of physician; up to one hour) separately when reporting administration of a support drug following chemotherapy. But the first National Correct Coding Initiative update changes that.

On Jan. 1, 90780 becomes a component of a number of codes as well. This nonchemotherapy infusion code can be billed separately when you use it to report administration of a support drug following chemotherapy.

But as of Jan. 1, this code will be a component of lesion laminectomy codes 63281-63290, laminectomy for implantation of neurostimulator electrodes code 63655, new catheter infusion for anesthetic agent code 64449 (... lumbar plexus, posterior approach), new anesthetic agent injection code 64517 (... superior hypogastric plexus), anesthetic code 64530, and destruction by neurolytic agent codes 64614, 64640 and 64680-64681.