

Part B Insider (Multispecialty) Coding Alert

NCCI: Edits Brings Changes to Endoscopy Coding

Gastroenterologists will have a much harder time billing for common procedures in the wake of the latest revisions to the National Correct Coding Initiative.

The new NCCI introduces a number of nonmutually exclusive edits for eterostomy and endoscopy codes. For example, 44300 (Enter-ostomy or cecostomy, tube) becomes a component of 43820 (Gastro-jejunostomy) and 43830 (Gastro-stomy, open; without construction of gastric tube). And 45305 (Procto-sigmoidoscopy; with biopsy, single or multiple) becomes a component of new code 45335 (Sigmoidoscopy; with directed submucosal injection[s], any substance).

A number of codes have become components of new CPT 45381 (Colonoscopy; with directed submucosal injection[s], any substance), including proctosigmoidoscopy codes 45305, 45309, 45335 and 45340. That last code also becomes a component of new code 45386 (Colonoscopy; with dilation by balloon, one or more strictures).

A number of codes for surgery of the digestive system have become components of both new codes 45335 and 45381. These include manipulation codes 45900-45915, plus **CPT 46220** (Papillectomy or excision of single tag), 46600 (Anoscopy; diagnostic), 46940 (Curettage or cautery of anal fissure) and 46942 (Curettage or cautery of anal fissure; subsequent).

Codes 45905 (Dilation of anal sphincter under anesthesia other than local) and 45910 (Dilation of rectal stricture under anesthesia other than local) become components of new codes 45340 (Sigmoidoscopy with dilation by balloon, one or more strictures) and 45386.

Incision codes for abdomen, peritoneum and omentum 49000, 49002 and 49010 all become components of new code 34833 (Open iliac artery exposure with creation of conduit for delivery of infrarenal aortic or iliac endovascular prosthesis, by abdominal or retroperitoneal incision). Code 49000 also becomes a component of new code 49419, (Insertion of intraperitoneal cannula or catheter, with subcutaneous reservoir).

Coders will find 31231 (Nasal endoscopy, diagnostic, unilateral or bilateral) a nonmutually exclusive component of laryngoscopy (31575-31579) and bronchoscopy (31622-31656) codes.

Also, 31505 (Laryngoscopy, indirect; diagnostic) is a nonmutually exclusive component of a number of endoscopy codes (43200-43272 and 44360-44379). And 31525 (Endoscopy, diagnostic, except newborn) will be considered a component of esophagoscopy and endoscopy codes 43200-43272 and endoscopy codes 44360-44379.

Code 31575 (Laryngoscopy, flexible fiberoptic; diagnostic) is now a nonmutually exclusive component of endoscopy codes 43200-43272 and 44360-44379. The edits to 31505, 31525 and 31575 have a "0" in the modifier field, meaning they can't be overridden with a modifier.