

## Part B Insider (Multispecialty) Coding Alert

### Part B Coding Coach: Watch Out When Billing Discharge, E/M on the Same Day Thanks to New CCI Edits

#### Don't miss these closure of vesicouterine fistula edits.

The last round of Correct Coding Initiative (CCI) edits for 2013 brings 1,276 new edits—and although that doesn't sound like a lot of changes, some of them could be doozies.

"CCI version 19.3, effective October 1 of this year, has been released and contains some real surprises," says Frank Cohen, MPA, MBB, principal and senior analyst for The Frank Cohen Group in Clearwater, Fla.

#### Take Note of This E/M, Discharge Service Change

As of October 1, you will see that CCI no longer bundles 99239 (Hospital discharge day management; more than 30 minutes) into the E/M codes 99201-99203 and 99211-99214.

"These were previously considered mutually exclusive bundles, so it looks like you can bill for a discharge and an E/M service on the same date of service," says Melanie Witt, RN, CPC, COBGC, MA, an ob-gyn coding expert based in Guadalupita, N.M. "However, if the MD is billing for discharge, he can't bill the patient as new under CPT® rules, since he will have provided a face-to-face E/M service within the past 3 years."

**Bottom line:** "Sometimes these bundles don't make sense at all (even when they are removed)," Witt explains. Keep in mind, however, if the patient is discharged from the hospital (and you generally can only bill for discharge day management if the patient was admitted for medical management of a condition), and then is seen in the office the same day for the same issue that resulted in their hospitalization, you may find yourself explaining this to the payer before any payment will be made. If the patient is seen for an unrelated reason, make sure your diagnostic coding reflects this.

#### Include These Procedures Into 51925

You can no longer report a slew of procedures in addition to 51925 (Closure of vesicouterine fistula; with hysterectomy). The new bundled procedures are:

- 57530, Trachelectomy (cervicectomy), amputation of cervix (separate procedure)
- 58140, Myomectomy, excision of fibroid tumor(s) of uterus, 1 to 4 intramural myoma(s) with total weight of 250 g or less and/or removal of surface myomas; abdominal approach
- 58146, Myomectomy, excision of fibroid tumor(s) of uterus, 5 or more intramural myomas and/or intramural myomas with total weight greater than 250 g, abdominal approach
- 58545, Laparoscopy, surgical, myomectomy, excision; 1 to 4 intramural myomas with total weight of 250 g or less and/or removal of surface myomas
- 58546, Laparoscopy, surgical, myomectomy, excision; 5 or more intramural myomas and/or intramural myomas with total weight greater than 250 g

All of these edits have a "0" modifier indicator, meaning that you cannot use a modifier to override any of them.