

Part B Insider (Multispecialty) Coding Alert

PATHOLOGY: Learn To Use Compatibility Blood Tests Only When Needed

Also: Be sure to charge for each unit of blood, but not for each transfusion

There's a new computer crossmatch code on the scene that replaces 99090--and pays about \$13. Plus, [CPT 86923](#) (Compatibility test each unit; electronic) can ease the transfusion workload for patients with two documented blood types and no clinically significant antibodies.

Many hospitals use the common spin-technique compatibility test before transfusing blood (86920, Compatibility test each unit; immediate spin technique). But studies indicate that the risk of a transfusion reaction is exceedingly small if the patient receives a compatible blood type and has a negative antibody screen and history. That's why the **American Association of Blood Banks** (AABB) approved standards that allow a transfusion with no serologic crossmatch for a patient with two blood typings on file and no clinically significant antibodies, says **Suzanne H. Butch, MA, MT(ASCP)SBB**, administrative manager at **University of Michigan's Blood Bank and Transfusion Services** in Ann Arbor.

How to use the new code: To "skip" the 86920 crossmatch for a patient with no clinically significant antibodies, the hospital can issue donor blood using a computer. The lab information system must be set up to detect a "mismatch" between the donor and recipient ABO and Rh blood types and antibody history--a so-called "computer crossmatch." Report the service as 86923. This "electronic" compatibility test is not a lab test at all; it involves only computer detection of an ABO or Rh mismatch, and it is not a serologic crossmatch.

Important: What if the patient has known antibodies based on history or positive antibody screen and identification? "You cannot use the 86923 crossmatch for a recipient with clinically significant antibodies," Butch says.

Labs must perform an antiglobulin crossmatch (86922, Compatibility test each unit; antiglobulin technique) to ensure compatibility between donor and recipient blood when known antibodies are present.

Keep in mind: Regardless of which compatibility test you perform (86920, 86921, 86922 or 86923), you should charge one unit of the code for each unit of blood that you crossmatch. For instance, if you electronically crossmatch and transfuse three units, report 86923 x 3.

Hidden trap: The unit of service for the crossmatch is different from the transfusion service itself. Regardless of how many blood units you use, report 36430 (Transfusion, blood or blood components) only once for each day the patient receives a transfusion.