

Part B Insider (Multispecialty) Coding Alert

Pronouncement of Death: You May Be Able To Bill A Discharge Code For Death Pronouncement

Carriers disagree about the appropriateness of post-mortem billing

When a patient dies, a physician will often do a significant amount of work, but Medicare has no code for pronouncing a patient dead.

Physicians can bill for "reasonable and necessary medical services rendered up to and including pronouncement of death," according to a new FAQ posted on **CIGNA Medicare's** Web site. Physicians can bill hospital discharge codes 99238-99239 and other codes, as appropriate.

This guidance clashes with the opinion of another Part B carrier, **Regence Medicare**, which said a year ago that it was "inappropriate" for physicians to use a discharge code to bill for filling out a death certificate (see PBI, Vol. 5, no. 4). With clashing carrier opinions, coders should be careful to seek their own carrier's opinion, say experts.

The CPT guidelines are pretty clear that pronouncing a patient dead can count as a discharge summary, says **Susie Elmore**, coding specialist at **Clark-Holder Clinic** in LaGrange, GA. So she recommends using a discharge code for more than 30 minutes or less than 30 minutes, depending on how long the service takes. She suggests using diagnosis code **V68.0** (Attendance for issue of medical certificates) with this service.

You can also bill separately for any other services the physician provides prior to the patient's death, such as CPR or cardiac shock, Elmore adds.

Don't Bill For DOA Patients

If a patient arrives at the emergency room already dead, that's more likely to be a borderline case. Frequently, the patient will go directly to the coroner after being declared dead, notes Elmore.

But in many cases, the emergency physician will perform a detailed examination of a DOA patient to make sure there is no outside trauma, notes **Pam Fazek**, director of coding with **Health Care Business Resources**, an emergency physician billing company in Bala Cynwyd, PA. The physician may also take a history from a family member. But most hospitals will ask the physician to "hold off" from billing for those services.