

Part B Insider (Multispecialty) Coding Alert

Reader Question: Check Records to Nail Down Laryngoscopy Code

Question: Our physician recently performed a laryngoscopy during which he removed a foreign body. As there are different foreign body removal codes during a laryngoscopy, I was wondering which of the codes to use? Is it possible to assess this just by seeing the patient documentation?

Answer: As you have correctly observed, there are many codes to report a foreign body removal during a laryngoscopy. To be precise, you have four codes to report a foreign body removal during a laryngoscopy:

- 31511 (Laryngoscopy, indirect; with removal of foreign body)
- 31530 (Laryngoscopy, direct, operative, with foreign body removal)
- 31531 (Laryngoscopy, direct, operative, with foreign body removal; with operating microscope or telescope)
- 31577 (Laryngoscopy, flexible fiberoptic; with removal of foreign body)

For reporting the right procedure by looking through patient documentation, you will need to look for some clues to point you in the right direction.

If you see words like "mirror" or "indirect" being used, you are more likely to be seeing a simple procedure of using a mirror to guide your clinician and no scope was used during the procedure. In such a case, you report 31511.

Instead, if you see your clinician introducing a scope through the nose to view the structures or are seeing words like "flexible," "fiberoptic" or "nasopharyngeal laryngoscopy" in the patient documentation, your clinician has used a flexible fiberoptic scope and you should report the FBR with 31577. Also, an indirect or a flexible laryngoscopy can be performed in your office and does not require general anesthesia.

If you see the procedure being performed in the OR, or you see in the patient documentation that the patient received general anesthesia, your clinician is more likely to be performing a direct operative laryngoscopy. So, in such a case, you report 31530. If you observe your clinician used an operating microscope or a telescope for the procedure, you report 31531.