Part B Insider (Multispecialty) Coding Alert

Reader Questions: Avoid Revision Codes for Removal

Question: A Medicare patient wants us to remove his SCS leads and battery because the system that he has is not eliminating his pain. Our physician tried to implant two new leads to see if it would help the pain, but after several attempts, he could not implant and wanted to avoid damage. He then removed the two new leads, the two old leads, and the battery. How should we report this?

Colorado Subscriber

Answer: You could submit code 63661 (Removal of spinal neurostimulator electrode percutaneous array[s], including fluoroscopy, when performed) as well as 63688 (Revision or removal of implanted spinal neurostimulator pulse generator or receiver).

Code 63663 (Revision including replacement, when performed, of spinal neurostimulator electrode percutaneous array[s], including fluoroscopy, when performed) cannot be used since your physician did not perform a revision.

Look to R68.2 for Dry Mouth Dx in October

Question: Our physician documented 'dry mouth' as a diagnosis for a patient who has been on chemotherapy. How can we report this condition?

New Jersey Subscriber

Answer: In ICD-9-CM, dry mouth is considered as a disturbance of salivary secretion. You report the ICD-9-CM code 527.7 (Disturbance of salivary secretion) for patients diagnosed with dry mouth condition.

ICD-10 changes: You'll add another possibility to your coding options when ICD-10 becomes effective in October. The new system expands 527.7 into two codes:

- K11.7 □ Disturbances of salivary secretion
- R68.2 □ Dry mouth, unspecified.

Documentation basics: Providers should base their diagnosis of xerostomia on evidence obtained from the patient's history, an examination of the oral cavity and/or sialometry, a simple office procedure that measures the flow rate of saliva. Your physician may conclude the patient has this diagnosis if the patient complains of dry mouth, particularly at night, or of difficulty eating dry foods such as crackers.

Some payers will consider the administration of amifostine medically reasonable and necessary to reduce the incidence of moderate to severe xerostomia in patients undergoing radiation treatment for head and neck cancers.

Coder tips: In cases where radiation treatment causes xerostomia, you would report the appropriate head and neck cancer codes in addition to 527.7 and 709.9 (Unspecified disorder of skin and subcutaneous tissue) or K11.7 and L59.9 (Disorder of the skin and subcutaneous tissue related to radiation, unspecified) for ICD-10-CM. Check your payer policies to get the final word on which codes they require on the claim for payment.

What is dry mouth? Xerostomia, also called dry mouth, is a condition in which the salivary glands don't produce enough saliva to keep the mouth wet. Dry mouth can cause difficulties in tasting, chewing, swallowing, and speaking, and may cause infections of the mouth.

Codify
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