

Part B Insider (Multispecialty) Coding Alert

Reader Questions: G0121 Accepts No Other ICD-9 But V76.51

Question: A 73-year-old established Medicare patient with average risk for colorectal cancer presents for a screening colonoscopy on Feb. 11, 2010. The patient's records reveal his last covered screening to be on Jan. 31, 2000. How should I report this scenario?

Answer: On the claim, you should report G0121 (Colorectal cancer screening; colonoscopy on individual not meeting criteria for high risk). But make sure there is no need or any therapeutic intervention during the colonoscopy.

Heads up: Diagnosis coding for all G0121 claims require only one ICD-9: V76.51 (Special screening for malignant neoplasms; colon). If the chart indicates a diagnosis of colitis, for example, then you shouldn't be reporting a screening.

If you don't want a word from OIG and RAC auditors, you should make the chart notes and the procedure consistent.