Part B Insider (Multispecialty) Coding Alert

Reader Questions: Patient's Self-Diagnosis May Not Stick

Question:

A 48-year-old female, fearing she has H1N1, reports to the emergency department (ED) complaining of weakness and fatigue; she rates her fatigue at 8 on a scale of 10, saying \"I can barely get out of bed.\" After a level-three E/M that includes a rapid screen, the physician determines the patient does not have H1N1, but is suffering from chronic iron deficiency anemia due to heavy, excessive bleeding associated with uterine fibroids. The patient requests an H1N1 vaccination, which the nurse provides. How should I code this encounter?

Answer:

You'll report an E/M for the physician's services and the facility will code for the vaccination administration. On the claim, report the following:

99283 (Emergency department visit for the evaluation and management of a patient, which requires these 3 key components: an expanded problem focused history; an expanded problem focused examination; and medical decision making of moderate complexity...) for the E/M

V04.81 (Need for prophylactic vaccination and inoculation against certain viral diseases; influenza) appended to 99283 to represent the patient's need for vaccination

280.0 (Iron deficiency anemia secondary to blood loss [chronic]), appended to 99283 to represent the patient's uterine bleeding

626.6 (Metrorrhagia) appended to 99283 to represent the patient's uterine bleeding.