

## Part B Insider (Multispecialty) Coding Alert

## **Venous Access: New Codes Mean More Specificity But Also More Requirements**

Understand the coding requirements for 36555-36597

Coders rejoiced when CPT Codes 2004 introduced a number of new codes for central line and port placement services (36555-36597).

But these new codes will require much better physician documentation, says **Marcella Bucknam**, HIM program coordinator at Clarkson College in Omaha, Neb. The pressure is on surgeons and anyone else who places lines to provide more information on whether the line was placed peripherally or centrally, tunneled or not, or via port versus pump.

One significant change is that CPT adds new codes for the tunneled central lines (36557-36558) that are differentiated from the codes for implanted reservoirs and ports (36570-36571, 36576, 36578). Whereas in 2003, CPT listed one code (36533, Insertion of implantable venous access device, with or without subcutaneous reservoir) for all lines with pumps, CPT now includes eight new implanted reservoir and port codes, Bucknam says.

For example, an 81-year-old patient was recently diagnosed with non-small cell cancer of the right upper lobe of the lung when she underwent mediastinoscopy that revealed mediastinal nodal disease. Because of her advanced stage of cancer, resection was not performed. She returns today for placement of an Infusaport for chemotherapy administration. In the past, you would have coded this as 36533. Now, you would code this as 36561 (Insertion of tunnelled centrally inserted central venous access device, with subcutaneous port; age 5 years or older).

Bucknam also points out that new codes specifying the catheter and ports with subcutaneous pumps or ports (36560, 36563, 36570, 36576, 36578, 36582, 36583, 36585, 36590) will impact your coding. For example, a patient was recently diagnosed with an advanced cervical cancer that has spread to the chest. Her preoperative workup revealed bilateral pulmonary nodules, suspicious for metastatic disease, indications for thoracoscopy with biopsy, and insertion of INFUSAID for 5-fluorouracil chemotherapy administration.

In the past, you would have coded this as 36530. Now, you would code this as 36563 (Insertion of tunneled centrally inserted central venous access device, with subcutaneous pump).

CPT also adds new codes for the mechanical removal of obstructive material (36595, 36596) and other procedures, e.g, central venous access - 36597, shunt insertion - 36838, and ligation - 37765, 37766.