

## Outpatient Facility Coding Alert

### CPT® 2018: Get Ready for These New 2018 CPT® Otolaryngology Codes

**CPT® gives coders five new options for coding nasal/sinus endoscopic procedures.**

From sinus endoscopies updates to a notable evaluation and management (E/M) observation care language revision, the CPT® 2018 additions, revisions, and deletions for otolaryngology are headed your way soon.

**Bottom line:** These changes will go into effect on January 1, 2018, but you don't want to be caught off guard. Start preparing now for CPT® 2018 to stay on top of everything you need to know.

#### Meet the New Sinus Endoscopy Codes

Starting in January, CPT® will present coders with five brand-new options to consider when coding nasal/sinus endoscopic procedures. These new codes are not taking the place of any current endoscopic procedures. Rather, they will offer coders new alternatives to situations in which they would previously have had to apply multiple CPT® codes or opt for an unlisted code entirely. Consider these five new sinus endoscopy procedure codes:

- 31241 (Nasal/sinus endoscopy, surgical; with ligation of sphenopalatine artery)
- 31253 (... with ethmoidectomy; total (anterior and posterior), including frontal sinus exploration, with removal of tissue from frontal sinus, when performed)
- 31257 (... with ethmoidectomy; total (anterior and posterior), including sphenoidotomy)
- 31259 (... with ethmoidectomy; total (anterior and posterior), including sphenoidotomy, with removal of tissue from the sphenoid sinus)
- 31298 (... with dilation of frontal and sphenoid sinus ostia (eg, balloon dilation)).

#### Be Aware of Sinus Endoscopy Code Description Revisions

In addition to the five new codes, you will want to become familiar with the changes made to these three existing sinus endoscopy codes:

- 31254 (Nasal/sinus endoscopy, surgical with ethmoidectomy; with ethmoidectomy, partial (anterior))
- 31255 (... with ethmoidectomy, total (anterior and posterior))
- 31276 (... with frontal sinus exploration, with or without including removal of tissue from frontal sinus, when performed).

While on the surface it may look like more, the changes to 31254 and 31255 actually amount to a subtle, inconsequential change. Essentially, CPT® is eliminating the term "with ethmoidectomy" from the code description, as it is redundant based on the previous descriptor of "surgical with ethmoidectomy." In a similar fashion, the changes to code 31276 are purely semantical, with no changes to the actual code description itself.

#### Stay on Top of these E/M Revisions

Beginning in January, you will find a subtle but important revision to all observation care discharge E/M codes. For the initial observation E/M codes 99217-99220 (Initial observation care, per day, for the evaluation and management of a patient ...), you will see the inclusion of the term "outpatient hospital" to describe the patient's observation status. For example, a portion of the description for code 99217 will change to "this code is to be utilized to report all services provided to a patient on discharge from outpatient hospital 'observation status' if the discharge is on other than the initial date of 'observation status.'"

"These changes appear to be clearing up the confusion that often arises with observation patient status," says **Barbara**

**J. Cobuzzi, MBA, CPC, CENTC, COC, CPC-P, CPC-I, CPCO**, AAPC Fellow, vice president at Stark Coding & Consulting LLC, in Shrewsbury, New Jersey. "Essentially, CPT® is clarifying that patients that are in observation are always in an outpatient status," Cobuzzi explains.

### **Consider These New Integumentary and Auditory Codes**

Lastly, you will want to note the addition of two new flap procedure and optical coherence tomography (OCT) codes. Starting in January, you will have the option to code a midface flap (zygomaticofacial) procedure and a muscle, myocutaneous, or fasciocutaneous flap procedure of the head and neck. You will code these two procedures as follows:

- 15730 (Midface flap (ie, zygomaticofacial flap) with preservation of vascular pedicle(s))
- 15733 (Muscle, myocutaneous, or fasciocutaneous flap; head and neck with named vascular pedicle (ie, buccinators, genioglossus, temporalis, masseter, sternocleidomastoid, levator scapulae)).

**Note:** Code 15733 will take the place of code 15732 (Muscle, myocutaneous, or fasciocutaneous flap; head and neck (eg, temporalis, masseter muscle, sternocleidomastoid, levator scapulae)), which will be deleted as of January.

Next year will also bring changes for those practices that implement OCT imaging, who should keep these new middle ear OCT category III codes in mind:

- 0485T (Optical coherence tomography (OCT) of middle ear, with interpretation and report; unilateral)
- 0486T (Optical coherence tomography (OCT) of middle ear, with interpretation and report; bilateral).