

Outpatient Facility Coding Alert

Reader Question: Use 36000 as Catheter Placement Code

Question: Our surgeon noted that, for a 62-year-old patient, he inserted a central line through the right femoral vein and advanced a triple lumen catheter over the wires into the right femoral vein, where it terminated. Should I report 36556 even though the line didn't terminate in the subclavian, brachiocephalic, iliac vein; the superior or inferior vena cava; or the right atrium?

Louisiana Subscriber

Answer: No, 36556 (Insertion of non-tunneled centrally inserted central venous catheter; age 5 years or older) is not the best code for this case. You are correct that to use 36556 or any other central venous access codes the tip of the catheter (or device) must terminate in one of the areas you listed.

Instead, report 36000 (Introduction of needle or intracatheter, vein) for the service you describe, because the catheter terminates in the femoral vein.

This case emphasizes the importance of coding the service actually performed rather than letting a term dictate code choice. Even if the op report mentions a "central line," you should not report a central venous access procedure if the documentation doesn't match the codes.

Caution: Before reporting a catheter placement code, such as 36000, ensure that the code isn't included in another service performed during the same session, such as an anesthesia service or vascular access for critical care. Review code edits and guidelines before capturing the code.