

Outpatient Facility Coding Alert

Reader Questions: Choose 45378 When Colonoscopy is Used as Diagnostic Method

Question: Our physician performed a colonoscopy for a rectal bleed on a Medicare patient. The patient also has a family history of colon cancer. Should I report both 45378 and G0105?

Kentucky Subscriber

Answer: No, you should not report both 45378 (Colonoscopy, flexible; diagnostic, including collection of specimen[s] by brushing or washing, when performed[separate procedure]) and G0105 (Colorectal cancer screening; colonoscopy on individual at high risk). Each of these codes describes colonoscopy, and reporting them both during the same session would be double-billing.

In this case, the colonoscopy is diagnostic rather than screening, with a primary diagnosis of 578.1 (Blood in stool). Therefore, you should report 45378 only. You may, however, cite V16.0 (Family history of malignant neoplasm; gastrointestinal tract) as a secondary diagnosis.