

## Outpatient Facility Coding Alert

### You Be the Coder: Code It Right For Autologous Blood Transfusion

**Question:** What is the correct way to work out claims for outpatient autologous blood transfusions? Do we use different codes for the collection and transfusion of blood?

Ohio Subscriber

**Answer:** As you may be aware, collection and transfusion of blood are different procedures and therefore need to be coded separately. Autologous means cells or tissues harvested from the same individual. Autologous blood transfusion means collecting and storing a person's blood, and transfusing his blood back to him whenever he is in need of blood transfusion. For the collection of autologous blood, you submit CPT® code 86890 (Autologous blood or component, collection processing and storage; predeposited). This code is permitted only in the hospital outpatient setting. The inclusive services include: collection, processing, transportation, and storage of blood.

Certain payers may allow you to use 86890 only when the patient does not receive a transfusion of the autologous unit because facilities include payment for collection, processing, and storage in the blood product code the performing entity bills at the time of transfusion.

For transfusion, look to dedicated CPT® code, 36430 (Transfusion, blood or blood components). In addition, you can submit the applicable blood product HCPCS code. Medicare instructs you should bill 36430 on the transfusion date and not on the date of collection of the blood.