

Outpatient Facility Coding Alert

You Be the Coder: Know When to Use 31622 and 31623

Question: My doctor wants me to bill 31623 and 31622 for services during the same encounter, but I don't think I can bill both. Would you confirm for me?

Arkansas Subscriber

Answer: You are correct that you can't report both codes together if the pulmonologist performed one bronchoscopy with brushings. Code 31622 (Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with cell washing, when performed [separate procedure]) represents a diagnostic bronchoscopy and is inherent in the procedure represented by 31623 (Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with brushing or protected brushings).

Remember: You should always report the most extensive procedure when selecting from a single family of codes. In this case, a bronchoscopy with brushings is more extensive than a simple diagnostic bronchoscopy, so you should only report 31623.

You cannot report separate procedures even if the physician performed the diagnostic bronchoscopy at a separate session on the same date. The National Correct Coding Initiative bundles the diagnostic bronchoscopy into other bronchoscopies without the ability to unbundle the services when appropriate.