

Outpatient Facility Coding Alert

You Be the Coder: When in Doubt, Use Clinical Responsibility as a Reference

Question: My physician is suggesting that we report code 30117 for the removal of a nasopharyngeal mass using scope and biting forceps. I do not believe this code is correct, but cannot come up with a better alternative outside of an unlisted code. How should we report this service?

Texas Subscriber

Answer: The confusion here seems to lie within the code description for 30117 (Excision or destruction (eg, laser), intranasal lesion; internal approach). As you can see, despite the fact that the provider performs an endoscopic approach, there is no reference to endoscopic approach in the description. However, the reference to an "internal approach" in the code description means that you may include any and all approaches involving access intranasally - including an endoscopic approach.

Furthermore, the clinical responsibility for code 30117 states the following:

- "When the patient is appropriately prepped and anesthetized, the provider uses one of several internal techniques for the destruction or excision of a lesion in the nose. She may use a laser, cryotherapy, a chemical, or other methods. She destroys the lesion and then applies an antibiotic at the site. When the procedure is complete, she leaves the wound open to heal."

As you can see, you should also include the use of removal via a forceps approach as a component of code 30117. Based on this information, it is not advised that you report this service using unlisted code 30999 (Unlisted procedure, nose).