

## **Internal Medicine Coding Alert**

## NCCI 9.3 Update: Don't Sweat NCCI's 94660-94662 Bundles

Worried about the latest National Correct Coding Initiative (NCCI), version 9.3, which took effect Oct. 1? If so, relax. NCCI's edits will affect few internal medicine practices.

Medicare bundled 94660 (Continuous positive airway pressure ventilation [CPAP], initiation and management) and 94662 (Continuous negative pressure ventilation [CNP], initiation and management) into the follow E/M hospital codes:

- 1. 99217 Observation care discharge
- 2. 99218 Initial observation care
- 3. 99281 Emergency department visit
- 4. 99295 Initial neonatal critical care ... 30 days of age or less
- 5. 99296 Subsequent neonatal critical care
- 6. 99298 Subsequent intensive care ... recovering very low birth weight infant (present body weight less than 1500 grams)
- 7. 99299 ... low birth weight infant (present body weight of 1500-2500 grams).

Nurses and respiratory therapists, not physicians, usually perform nebulizer treatments in a hospital setting, so these bundles shouldn't affect most internists, says **Kathy Pride, CPC, CCS-P**, an internal medicine coding consultant for QuadraMed in Port St. Lucie, Fla.

Typically, coders avoid reporting ventilation management and E/M codes together. Standard CPT, Medicare, and NCCI policy bundles 94660 and 94662 into most E/M codes, such as 99213 (Office or other outpatient visit ... established patient) and doesn't allow coders to use modifier -59 (Distinct procedural service) to unbundle the services, coding experts say.