

Part B Insider (Multispecialty) Coding Alert

NCCI Bundles 76942 With Dozens of Codes

New Codes Anticipated in 2004

When you're billing for guidance procedures such as fluoroscopy or ultrasound for vascular needle placement, it may feel as if you're trying to thread a sewing needle with yarn. The **Centers for Medicare & Medicaid Services** has set up a maze of edits governing these codes.

Luckily, help is on the way. The **Society of Interventional Radiology** has some recommendations for how you can bill these guidance codes without falling afoul of National Correct Coding Initiative edits and other problems. The current NCCI edits bundle 76942 (Ultrasonic guidance for needle placement) with vascular access codes 75600-75630, 75650-75896, 75940-75945, 75960-75982, and 75992-75995. CMS argued that "76942 should not be used to report guidance for vascular needle placement," SIR states.

But CMS also admitted that ultrasound guidance for vascular needle placement requires additional physician work. So the agency recommends that you append modifier -22 (Unusual procedural services) to those codes instead of using 76942 to reflect that additional work. If you're billing for nonvascular access such as central venous device placements using those codes, append modifier -59 (Distinct procedural service).

Columbia River, Ore., coder Casey Stilwell says she uses modifier -59 to bill a fluoroscopy and ultrasound with a stent placement, but omits the modifier if she's only billing an ultrasound.

Meanwhile, SIR has also found a lot of edits governing billing for fluoroscopy in conjunction with central venous access or PICC lines, says SIR's **Dawn Hopkins**. "SIR has consistently recommended that only one guidance code be used on those situations." If the physician performs both an ultrasound and a fluoroscopy, then bill for only the more "intensive" service, she says. For example, with a Groshin catheter (36489), you could bill 76003 for the fluoroscopy. The use of 76003 rather than the lower-paying 76000 denotes the additional work.

The good news is that SIR anticipates new codes in 2004 for ultrasound guidance for vascular access and for fluoroscopy guidance for central venous device placement. "A family of new codes is anticipated for central venous procedures," Hopkins says, "including imaging codes for fluoroscopy and ultrasound performed in conjunction with these procedures."