

Part B Insider (Multispecialty) Coding Alert

Part B Coding Coach: Master Infusion Codes G0345-G0350

But new CPT codes will replace G codes in 2006

If you want Medicare to reimburse you for infusions in 2005, you'd better have the new G codes under your belt. The G code you use will depend on the infusion service the physician provides, be it hydration, therapeutic, sequential and/or concurrent infusions.

As of Jan. 1, codes G0345-G0350 replaced CPT infusion codes 90780-90781 for Medicare claims, according to the Nov. 15, 2004, Federal Register. Although most private payers will not accept G codes, you should check to see which codes your carriers prefer, because the services each set of codes describes differs slightly.

CPT is currently creating new infusion and injection codes for release next year. "So physician offices should expect to replace the G codes with new CPT codes in 2006," says **Laura Siniscalchi, RHIA, CCS, CCS-P, CPC,** manager of **Deloitte & Touche's Healthcare and Life Sciences Regulatory** in Boston.

Add Additional Infusion Choices and Less Possible Pay

The difference between 90780-90781 (Intravenous infusion for therapy/diagnosis, administered by physician or under direct supervision of physician...) and the new codes is that the G codes distinctly describe concurrent and/or sequential nonchemotherapy infusions that involve a different drug, Siniscalchi says.

Prior to Jan. 1, when the G codes took effect, the CPT codes did not represent these services, she says (For more on how Medicare's new G codes compare to CPT codes, see the Clip N' Save chart in the next article).

Reimbursement update: You can also expect a difference in payment. Based on national averages, you should receive approximately \$65 in reimbursement for G0345 (Intravenous infusion, hydration; initial, up to one hour) and \$21 for G0346 (...each additional hour, up to eight [8] hours), which is a drop compared to 2004's rates for 90780-90781. Code G0347 (Intravenous infusion, for therapeutic/diagnostic [specify substance or drug]; initial, up to one hour) brings in \$80 rather than the \$120 associated with 90780.

Reason: The codes pay less because the Medicare Modernization Act requires 2005's transitional payment adjustment for drug administration codes to be 3 percent. Last year the adjustment was 32 percent, according to the Register.

4 Examples Show You How

Although learning how to report the new G codes may seem daunting, you can become a pro in no time if you use these examples to ensure you report the new codes with accuracy.

Remember: Pay close attention to the time component of infusion codes. Because the code descriptors divide the service by hours ("up to one hour" and "each additional hour"), your physician needs to document the exact amount of time he spends on the infusion.

Example 1: An established patient presents to your office for an hour of hydration therapy.

Correct coding: You should report G0345 for hydration for up to one hour. If the physician administers the therapy for an additional hour, you would report G0346. When calculating time, any session 30 to 60 minutes long counts as an hour for coding purposes because guidelines instruct you to round up. So even if the physician only performed an additional



35 minutes of infusion, you could still report G0346.

Remember: You can report G0346 with multiple units based on the number of additional hours of infusion, says **Kathy Pride, CPC, CCS-P,** a coding training manager for **QuadraMed's Government Programs Division** in Port St. Lucie, FL.

Date of service is important: Code G0345 replaces 90780 (Intravenous infusion for therapy/diagnosis, administered by physician or under direct supervision of physician; up to one hour), and G0346 replaces +90781 (... each additional hour, up to eight [8] hours [list separately in addition to code for primary procedure]). For any hydration services the physician provided before Jan. 1, you should still report 90780 and 90781.

Example 2: Your physician treats a patient using an hour of infusion therapy.

Correct coding: You should assign G0347 (...for therapeutic/diagnostic...; initial, up to one hour), which represents therapeutic infusions. Although you should also use G0347 in place of 90780, be sure you don't confuse G0347 with G0345. The latter code represents only hydration services. With G0347 you should also report the drug code.

As with Example #1, if the physician provided more than one hour of infusion therapy, you would report add-on code G0348 (... each addition hour, up to eight [8] hours).

Example 3: During the hour-long infusion therapy, your physician administers a second drug sequentially.

Correct coding: You should use G0349 (...additional sequential infusion, up to one hour) for the sequential infusion along with G0347 for the initial infusion. And don't forget your J codes for the initial and sequential drugs. Your coding should look like this:

G0347

J code for initial drug

G0349 x the number of hours

J code for sequential drug

In the past, you would have used 90781 when the physician provided a second drug sequentially, even though this code described only the additional hour of infusion. That means 90780 was not accurately describing the physician's service, and the G codes strive to provide more complete information.

Example 4: The physician administers two drugs concurrently, meaning he provides them to the patient at the same time.

Correct coding: You should report G0350 (Concurrent infusion), which describes a service - concurrent infusion - that neither 90780 nor 90781 represented.

So in total, you should assign G0347 for the initial infusion, and then G0350 as an add-on code, plus the J codes for both drugs.

Tip: Because you didn't have distinct codes that represented concurrent or sequential infusions until now, your documentation will need to support these more specific codes, Siniscalchi says.

For example, if you assigned G0349 for sequential infusion, your documentation should show that the physician or nurse provided a second or other subsequent drug.

