

## APC Answer Letter 2009 index

### 2010 ICD-9-CM

Military injuries. Oct., p. 2.  
Poisoning by antidepressant. Oct., p. 2.  
Voice disturbance, nervousness codes. Oct., p. 3.

### Ancillary services

Blood administration not a routine service. March, p. 5.

### Angioplasty

Coding failed procedure with stent placement. June, p. 1.  
Don't code stent if lesion not crossed. Aug., p. 1.  
Know how to report with atherectomy. July, p. 1.

### Buddy taping, immobilizers

Intent of 29000–29799 code series. Oct., p. 1.

### Cardiac

Charging for multiple ventricular leads. April, p. 1.  
Charging for temporary pacemakers. Jan., p. 2.  
Coverage limitations of Holter monitoring. Feb., p. 1.  
Incomplete catheterization. Aug., p. 1.  
Physician analysis, technician review. March, p. 1.  
Use 93539 and 93556 for arterial grafts. Jan., p. 1.

### Drug waste

Schedule patients for most efficient use. June, p. 4.

### ED

Be prepared for recovery audit contractors. May, p. 2.  
Charges when patient leaves. March, p. 4.  
Consult MAC for LWBS patient guidance. May, p. 1.  
Determine when to bill 'nurse only services.' Nov., p. 1.  
Don't delay claim for autopsy. April, p. 2.  
Know criteria for urgent care clinics. March, p. 7.  
Modifier -52 inappropriate for triage only. Dec., p. 1.  
Nursing services without physician order. April, p. 3.  
Trauma activation code. March, p. 6.

### E/M

Follow CMS coding guidelines. Feb., p. 3.  
Macular degeneration injections. June, p. 7.

Post-procedure complications. March, p. 3.  
Second rabies vaccine administration. Nov., p. 3.

### Hyperbaric oxygen therapy

Timing determines whether service is billable. May, p. 4.

### ICD-10

Involving physicians in implementation. June, p. 5.  
Set training schedule for coding staff. April, p. 5.

### Incisions

Code hemorrhoids properly. March, p. 3.

### Injections and infusions

Add-on codes and concurrent administration. May, p. 6.  
Coding hierarchy eliminates confusion. Sept., p. 2.  
Finding drug functional class information. March, p. 3.  
Follow Medicare guidelines for multiple sites. Dec., p. 2.  
Hierarchy for concurrent administration. Aug., p. 3.  
Instructional notes explain analysis. Dec., p. 3.  
Know how to distinguish hydration. May, p. 5.  
Lack of start, stop times affects code selection. Aug., p. 2.  
Morphine and conscious sedation procedures. Oct., p. 3.  
Observation and particular conditions. June, p. 5.  
Report 96376 in facility setting only. Aug., p. 3.  
Report drug and administration codes. Aug., p. 2.  
Review 2009 initial services, service hierarchy. June, p. 6.  
Saline 'wide open' therapeutic or hydration? Oct., p. 4.  
Start, stop times and hierarchy. Oct., p. 6.  
Therapeutic heparin protocol techniques. April, p. 5.  
Time helps determine proper code selection. Nov., p. 4.  
Understand hierarchy to code correctly. July, p. 3.

### Intubation

Injection integral, not separately billable. Nov., p. 5.

### J codes

Is use with 99144 appropriate? June, p. 3.

### Lesions

Don't use pathology reports to document size. Feb., p. 6.

> *continued on p. 8*

## 2009 index *< continued from p. 7*

### Lumbar myelogram

Note whether study is with, without contrast. July, p. 6.  
Procedure not performed. July, p. 5.

### Medical equipment

DME supplier needs billing privileges. March, p. 2.  
Surety bond not always necessary. March, p. 1.

### 'Medical Home'

ED, clinic coding for services remains same. Nov., p. 5.

### Modifiers

-50. Feb., p. 4.  
-59. Jan., p. 2.  
-74. July, p. 3.  
-GY. Feb., p. 6.

### MRIs

Note details when coding extremities. July, p. 7.  
Select from appropriate auditory code range. Feb., p. 3.

### Multiple procedures

Understand knee anatomy, CPT rules. May, p. 6.

### NCCI

Don't report 58120-59 with 59563. Sept., p. 3.  
Simultaneous procedures. Aug., p. 5.  
Underlying principle. Sept., p. 4.

### Never events

New modifiers for noncovered services. Oct., p. 6.

### Observation

Concurrent procedures. Oct., p. 7.

### Orthotics

Understand overlap of 97760, -52, L-codes. Dec., p. 4.

### Radiology

Law trumps persuasive resources. Dec., p. 4.  
Multiple views. Feb., p. 1.  
Ultrasound documentation requirements. Nov., p. 7.

### Radiopharmaceuticals

Cancelled procedures. March, p. 4.

### Revenue codes

When is insulin not 'self-administered'? Jan., p. 4.

### Specimen collection

Blood draw methods. May, p. 1.  
Blood draw packaged with same-day infusion. July, p. 2.  
Hep lock. Jan., p. 1.  
Know when to report 36592. Sept., p. 1.  
Travel allowance. Feb., p. 7.  
Understand 36591, 36592 status indicators. Sept., p. 1.  
What is 'any other service' with 36592? June, p. 1.

### Status indicators Q1, Q2, Q3

Know when payment is separate, packaged. Sept., p. 5.  
Know when to add modifier -25. Aug., p. 7.

### Surgery

Contract determines who pays for supplies. Jan., p. 3.

### Suture removal

Setting, insurer dictate payment policy. Aug., p. 5.

### Teaching hospitals

Indirect medical education payments. Dec., p. 5.

### Unrelated services

Know when to bill for separate visit. April, p. 6.

### Vascular access

Follow guidelines for new long-term device. Dec., p. 6.

### Visit levels

CMS provides guidelines for calculation. Sept., p. 7.  
Evaluate LWBS scenarios. Dec., p. 6.

### Wound care

Bill E/M during first visit. April, p. 6.  
E/M, active management. March, p. 7.  
Negative pressure therapy. April, p. 7. ■