

Interventional Radiology Webcast Q and A:

1. We were told that we should not use 75716 and 75360 together? Is this correct?

Answer: On the CMS website in the CCI Edits, the 75716 has a 1 in the allowed on 2nd column code. Therefore, you can use this the codes together if the criteria is met and override the edit with the 59 modifier, if appropriate.

2. I have another question about peripheral vasc procedures done at the same time as a heart cath. The physician accesses the right CFA, does a left heart cath, and then proceeds to move catheter to say the right SFA and does an angiogram from there of the right lower leg. Can I code a separate cath placement and imaging study of the leg? What if he does that on the left leg? Are there any resources on this?

Answer: Use codes 36245-36248 when documentation supports selective catheterization of arteries (cannot be just drive by imaging). I would ask a couple of questions prior to billing. What is the medical necessity? And did they move the catheter purposefully? The provider must state in the documentation the necessity of moving the catheter and that there was a purpose.

Resources that I would recommend:

Ingenix - Coding Companion for Cardiology

Dr. Z's Medical Coding Series can be found at - www.zhealthpublishing.com

Coding Institute Articles for Cardiology

Some payers may pay for these services separately, others may not.