PCC CODING WEBLAB

Jan Blanchard, CPMA

November 2016
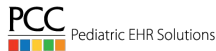
Control Your Fu

Roadmap – Version 7.6

Deployment for PCC 7.6 will happen in phases based on Account Team assignment, and is currently scheduled to begin on the following dates:
- Green Team Clients: Weekend of 2/4/17 - 2/5/17
- Blue Team Clients: Weekend of 2/11/17 - 2/12/17
- Red Team Clients: Weekend of 2/18/17 - 2/19/17
    - 2/20/17 is President's Day. We will explore whether any adjustment is needed.

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News

Pulse may now also be found in PCC EHR

| Open Chart |
| 1 | 6 | 0 | 0 | 0 | News | Logged In: pcc |

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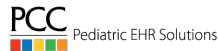
ICD-10 2017 Guidelines Edits

Clarifies:
- Excludes 1
  - "An exception to the Excludes1 definition is the circumstance when the two conditions are unrelated to each other."

ICD-10 2017 Guidelines Edits

Addition:
- Section I. Conventions, general coding guidelines and chapter specific guidelines
  - 19. Code assignment and Clinical Criteria - "The assignment of a diagnosis code is based on the provider's diagnostic statement that the condition exists. The provider's statement that the patient has a particular condition is sufficient. Code assignment is not based on clinical criteria used by the provider to establish the diagnosis."

ICD-10 2017 Guidelines Edits

Clarification:

- Laterality should be assigned to both sides even if only one side is treated during an encounter.
  - Treatment on one side but condition exists on both

ICD-10 2017 Guidelines Edits

ICD-10-CM Official Guidelines for Coding and Reporting
FY 2017 - (October 1, 2016 - September 30, 2017)
- Narrative changes appear in **bold text**
- Items underlined have been moved within the guidelines since the FY 2016 version
- *Italics* are used to indicate revisions to heading changes

www.cdc.gov/nchs/data/icd/10cmguidelines_2017_final.pdf

Nov 2016 AAP Coding Newsletter

Find it at talk.pcc.com
- More ICD-10 Updates
  - Q82.26 Congenital sacral dimple!!!
  - Guidelines edits
    - Chapter 16 changes
- Modifier usage table

Nov 2016 AAP Coding Newsletter

- 'Incident To'
  - Refresher
  - Scenarios

Your Questions

Q1: When billing for Albuterol administered in the office, is J7609, J7610 or J7613 the right HCPCS code. I used the 2.5mg/3ml vial.

Q2: The description is for a unit dose of 1mg, but the vials come as 2.5mg. How do we set this up on the Procedure Table?
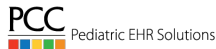

Answers

A1: The choice of HCPCS depends upon **dosage** and **route of administration** as detailed in the Table of Drugs:

https://www.cms.gov/Medicare/Coding/HCPCSReleaseCodeSets/Downloads/2016-Table-of-Drugs.pdf

IA - Intra-arterial administration
IV - Intravenous administration
IM - Intramuscular administration
IT - Intrathecal
SC - Subcutaneous administration

INH - Administration by inhaled solution
VAR - Various routes of administration
OTH - Other routes of administration
ORAL - Administered orally

Answers

A1: The choice of HCPCS for albuterol also depends upon whether the supply you're administering is compounded *and* whether it's concentrated.

https://www.cms.gov/Medicare/Coding/HCPCSReleaseCodeSets/Downloads/2016-Table-of-Drugs.pdf

Akineton, see Biperiden			
Alatrofloxacin mesylate, injection	100 mg	IV	J0200
Albuterol	0.5 mg	INH	J7620
Albuterol, concentrated form	1 mg	INH	J7610, J7611
Albuterol, unit dose form	1 mg	INH	J7609, J7613
Aldesleukin	per single use vial	IM, IV	J9015
Aldomet, see Methyldopate HCl			

Brand Names

Protopam Chloride, see Pralidoxime chloride
Proventil, see Albuterol sulfate, compounded
Prozine-50, see Promazine HCl

Xiaflex, see Collagenase
Xopenex, see Albuterol
Xylocaine HCl, see Lidocaine HCl

Venofer, see Iron sucrose
Ventolin, see Albuterol sulfate
VePesid, see Etoposide and Etoposide, oral

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Answers

A2:
"In almost all situations, the units field should indicate one (1) unit. Even if you often administer more than one unit, you should select additional units in the PCC EHR and Partner billing tools. In the Procedures table, you configure the smallest, standard administered amount. If you *always* administer two or more units of a medication, then you could indicate that here and also change the Procedure Name to "Drug Name (2 Units)", for example."

-Add and Configure Immunization and Medication Procedures in Partner
http://learn.pcc.com/help/add-and-configure-immunizations-in-partner/

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Bonus

Find out what your payer contracts say about wastage. If they deem it payable, they may accept this HCPCS modifier:

JW - Drug Amount Discarded/Not Administered to any Patient

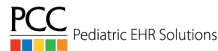burlington, VT

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HCPCS Files

Free downloads:

- 2017 Alpha-Numeric Index
- 2017 Table of Drugs

https://www.cms.gov/Medicare/Coding/HCPCSReleaseCodeSets/Alpha-Numeric-HCPCS.html

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What Questions
Do You Have?

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Resources

Another new video is available for viewing in our new video series for coding and billing.

Documenting Histories in E&M

http://learn.pcc.com/help/documenting-histories-in-em/

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Next Coding Weblab:
Wed 12/15/16
12 pm EST

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PCC Pediatric EHR Solutions

Jan Blanchard, CPC, CPMA
Pediatric Solutions Consultant

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jan@pcc.com
www.pcc.com

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