

### Uncoding the Confusion Around Infusion Coding

Right now, Hematology and Oncology coders are in incredibly high demand, and it's unlikely that demand will fade anytime soon. Afterall, according to cancer.org there are almost 5,000 cancer cases being diagnosed daily. And while that's not great news for any of us in healthcare, one thing we can all agree on is the importance of accurately coding for infusion therapies.



# STEP 1: Select the initial code.

- 1. Did the patient receive a chemotherapy drug? If no, go to #2.
  - i. Was more than one chemotherapy drug given? If so, look at the start and stop times for each chemo drug and select the one with the longest time.
  - ii. How was the drug given?
    - 1. IV for greater than 15 minutes = 96413
    - 2. IV for 15 minutes or less = 96409
    - 3. IVP (intravenous push) = 96409
    - 4. Other intraarterial, intrathecal, etc. Select codes from 96401-96406 or 96420-96450 appropriately.
    - 5. Go to Step 2.
- 2. Did the patient receive a non-chemo (Therapeutic, Prophylactic, Diagnostic; AKA: TPD) drug? If no, go to step c.
  - i. Was more than one drug given? If so, look at the start and stop times for each drug and select the one with the longest time.
  - ii. How was the drug given?
    - 1. IV for greater than 15 minutes = 96365
    - 2. IV for 15 minutes or less = 96374
    - 3. IVP (intravenous push) = 96374
    - 4. Go to Step 2.

#### 3. Hydration only

- i. Was hydration given for more than 30 minutes?
  - 1. If yes, code 96360
  - 2. If no, you cannot bill for hydration per CPT. You may be able to bill an E/M visit if the documentation supports.





### STEP (2): Select additional time for the initial code.

Use these handy charts to figure out if you need to bill for additional time.

CHEMOTHERAPY			
(TOTAL TIME IN MINUTES)	CODE	UNITS	
90 minutes or less	Not allowed		
91-150	96415	1	
151-210	96415	2	
211-270	96415	3	
271-330	96415	4	
331-390	96415	5	
391-450	96415	6	
451-510	96415	7	
510-570	96415	8	
and so on			

TPD			
(TOTAL TIME IN MINUTES)	CODE	UNITS	
90 minutes or less	Not allowed		
91-150	96366	1	
151-210	96366	2	
211-270	96366	3	
271-330	96366	4	
331-390	96366	5	
391-450	96366	6	
451-510	96366	7	
510-570	96366	8	
and so on			

HYDRATION		
(TOTAL TIME IN MINUTES)	CODE	UNITS
30 minutes or less	Not allowed	
31-90	96360	1
91-150	96361	1
151-210	96361	2
211-270	96361	3
271-330	96361	4
331-390	96361	5
391-450	96361	6
451-510	96361	7
510-570	96361	8
and so on		



## STEP (3): Select codes for additional drugs given.

- 1. Did the patient receive an additional chemotherapy drug? If no, go to #2.
  - i. For each additional chemo drug given, look at the start and stop times. Do any of the times overlap the initial chemo drug already coded, or each other? If no, continue.
    - 1. If yes, you may be able to bill if the drug was given at a different site or via a different method. Otherwise, the overlapping chemo drugs cannot each have an administration fee. To define your time for the overlapping chemo, find the earliest start time and the latest stop time, and figure the total minutes. Do not add the times together.
  - ii. How was the drug given?
    - 1. IV for greater than 15 minutes = 96417
    - 2. IV for 15 minutes or less = 96411
    - 3. IVP (intravenous push) = 96411
    - 4. Pump (also known as CIV) that lasts longer than 8 hours = 96416
    - 5. On-body applicator = 96377
    - 6. Other intraarterial, intrathecal, etc. Select codes from 96401-96406 or 96420-96450 appropriately.
  - iii. Repeat for each additional chemo drug given.
- 2. Did the patient receive a non-chemo drug? If no, continue to #3.
  - i. For each additional drug given, look at the start and stop times. Do any of the times overlap any other drug (even if it's a chemo drug) already coded, or each other? If no, continue.
  - ii. If yes, you'll have to do some research.
    - 1. Were the drugs mixed in the same bag or the same syringe? If so, no additional code can be billed.
    - 2. If it is an infusion code 96368 can be billed one time for all the drugs that overlap. Note that this code can only be used one time per day no matter how many drugs overlap. Also note that the drugs must be in a separate bag to use 96368.
  - iii. How was the drug given?
    - 1. IV for greater than 15 minutes = 96367
    - 2. IV for 15 minutes or less = 96375
    - 3. IVP (intravenous push) = 96375
    - 4. IM or SQ = 96372
  - 2. Repeat for each additional non-chemo drug given.
- 3. Was the patient given hydration before or after the drug(s) If no, continue to Step 4.
  - i. Hydration can be billed separately if not given at the same time as a drug. You will use code 96361 to bill the hydration, but the times/units will vary slightly than from the chart above. Here is the time chart for add-on hydration:

ADD-ON HYDRATION		
(TOTAL TIME IN MINUTES)	CODE	UNITS
30 minutes or less	Not allowed	
31-90	96360	1
91-150	96361	2
151-210	96361	3
211-270	96361	4
271-330	96361	5
331-390	96361	6
391-450	96361	7
451-510	96361	8
510-570	96361	9
and so on		



## STEP (4): Select additional time codes for additional drugs.

Use these handy charts to figure out if you need to bill for additional time for EACH additional drug given.

CHEMOTHERAPY			
(TOTAL TIME IN MINUTES)	CODE	UNITS	
90 minutes or less	Not allowed		
91-150	96415	1	
151-210	96415	2	
211-270	96415	3	
271-330	96415	4	
331-390	96415	5	
391-450	96415	6	
451-510	96415	7	
510-570	96415	8	
and so on			

TPD			
(TOTAL TIME IN MINUTES)	CODE	UNITS	
90 minutes or less	Not allowed		
91-150	96366	1	
151-210	96366	2	
211-270	96366	3	
271-330	96366	4	
331-390	96366	5	
391-450	96366	6	
451-510	96366	7	
510-570	96366	8	
and so on			





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Lori has 20 years of experience working in the business side of medicine. Lori began her career in patient accounts and then moved into billing and coding. She has served as a Billing Supervisor and Compliance Officer, where she wrote, maintained and trained employees and providers on fraud and abuse. In 2015, Lori received her MBA from Quincy University in Quincy, IL. Lori has traveled the country educating coders and physicians on complex coding topics such as Hem/Onc and E/M guidelines. Lori is a current member of the AAPC National Advisory Board, an active member of her local AAPC Chapter, and is a licensed PMCC instructor.

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