

Chemotherapy and Infusion Services

It is not always easy for coders, auditors, or physicians to choose the proper codes for chemotherapy and infusion services. These are confusing codes, so it's a good idea to regularly practice coding scenarios involving them. This week, we will review a chemotherapy encounter and audit the services. Next week, we will review an infusion encounter and do the same. Click the link below to review the full documentation. After reviewing, consider the following questions. The rationale for these questions will be posted to the members-only forum on July 23, 2015.

- The provider billed a 99213 in addition to the chemotherapy services. Was this level of service supported?
- In order to bill the E/M (if appropriate) with the chemotherapy services, modifier 25 would be needed. Is modifier 25 supported in this encounter based on the documentation?
- Verify whether practice billed the chemotherapy services correctly:
 - 96413
 - 96360
 - 96375
 - 96375
 - J9265 x 3 units
 - J2550 x 2 units
 - J1200

Click [here](#) to obtain the chart encounter, then visit the forum to post your follow up comments.

This Week's Tip Provided by:

Shannon DeConda, CPC, CPC-I, CEMC, CMSCS, CMPA
Founder and President, NAMAS
Partner and Director of Coding Compliance, Doctors Management, LLC

