

Infusion Therapy

Last week, we reviewed and broke down a chemotherapy encounter. Chemotherapy can be tricky and confusing mainly because those patients typically have more infusions than just chemotherapy, so we as auditors are left trying to figure out the initial code as well as the correct add-on services. Hydration therapy is more straightforward and typically only requires the use of the initial code. For today's tip, we have taken a pediatric patient clinic visit that included hydration therapy and broken down the encounter for proper level of service auditing. We have also audited the hydration therapy services.

Click [here](#) for the encounter, and then check the members-only forum on July 30th to receive the complete analysis of the encounter. While reviewing the encounter, ask yourself the following questions:

- The provider billed an E/M with the hydration therapy. Was an E/M supported?
- If an E/M is supported, what level of service? The provider billed a 99212 for the encounter and used modifier 25.
- Could the E/M encounter have been billed at a higher level given the fact that time was documented?
- Based on the time of the hydration, is it billable as an infusion?
- What codes should have been billed for the total hydration services?

This Week's Tip Provided by:

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