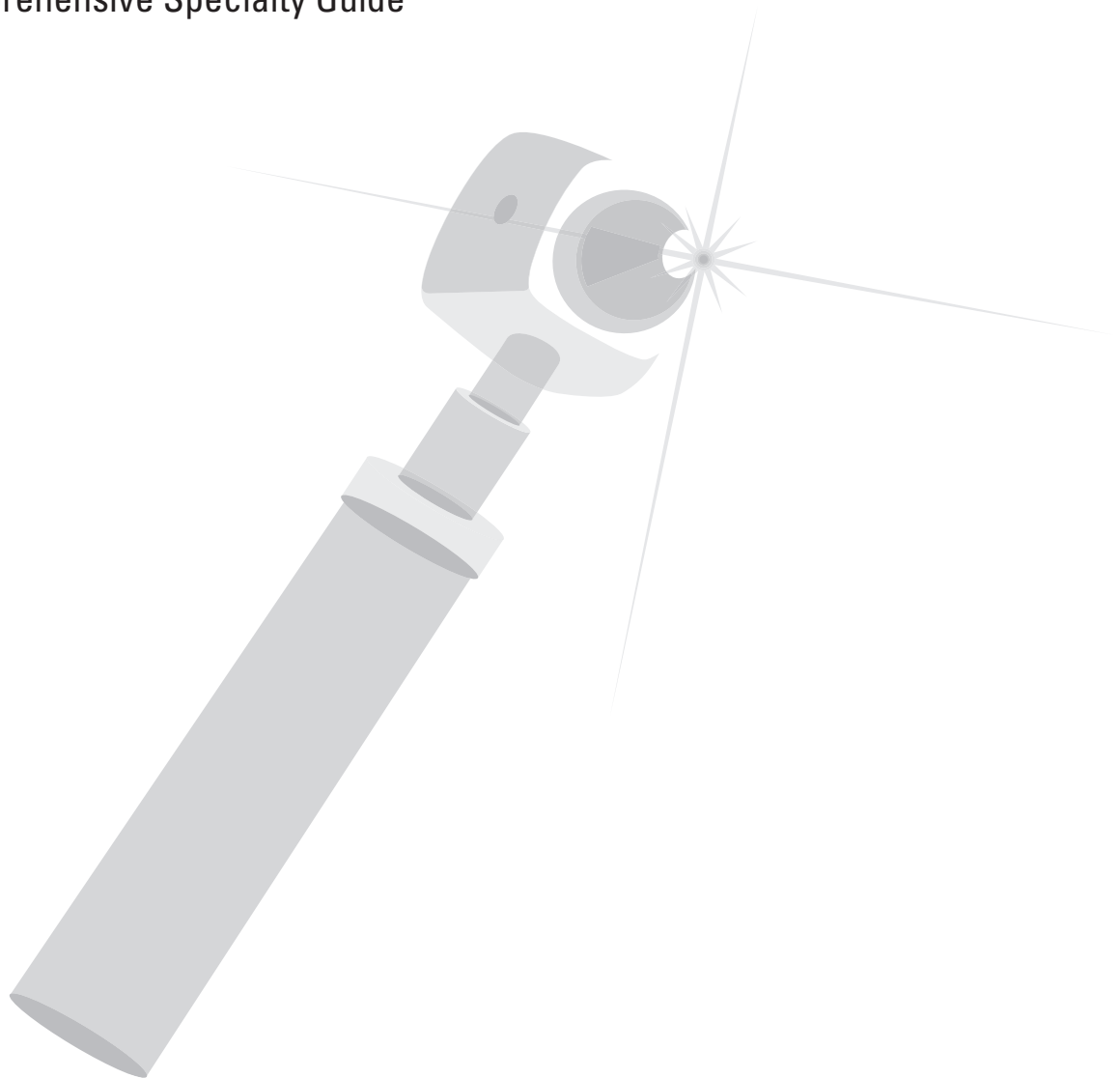


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Illustrated Coding and Billing for

ENT/Allergy/ Pulmonology

A Comprehensive Specialty Guide



Expert

2010

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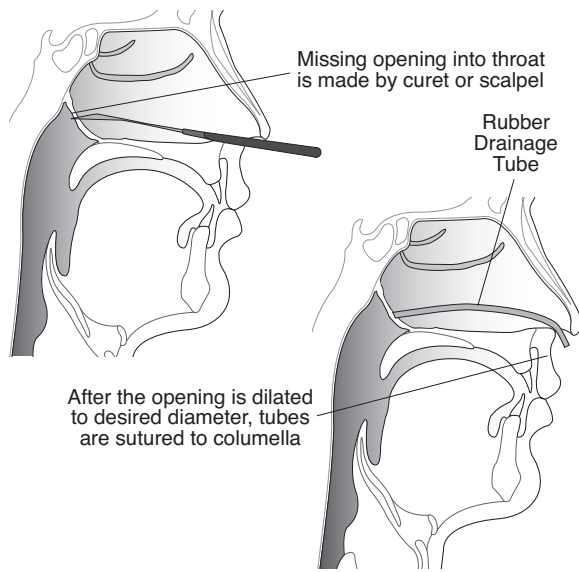
30540

30540 Repair choanal atresia; intranasal

Plain English Description

The physician repairs choanal atresia, a congenital anomaly of the anterior skull base in which one or both posterior nasal passages are closed. An intranasal approach is used to repair the atresia. A local anesthetic is injected into the nose. A speculum is positioned in the nose; an operating microscope is inserted; and the atretic membrane is visualized and palpated. A curved incision is made in the mucosa; an anterior mucosal flap is elevated; and the bone is removed by drilling parallel to the hard palate, taking care not to damage surrounding structures. The atretic plate is penetrated to expose the nasopharyngeal mucosa. The opening is enlarged by drilling into the vomer, pterygoid plate, and hard palate. Posterior mucosal flaps are created, rotated and laid down adjacent to the previously created anterior flaps and imbricated. Stents are placed and secured to maintain the new choanal opening.

Repair choanal atresia; intranasal



CT Lysis of intranasal synechia (30560) should not reported separately, unless performed at a different anatomical site in which a 59 modifier is appended to the end of the code. Do not use modifier 63. For a transpalatine choanal atresia repair – 30545.

ICD-9-CM Diagnostic Codes (commonly used)

- 738.0** Acquired deformity of nose
- 748.0** Choanal atresia, congenital
- 748.1** Other congenital anomalies of nose

HCPCS Code(s)

No crosswalks apply to this code or code range.

Anesthesia Code(s)

00160

RVU(s)

Code	Work	PE Facility	PE Non-Facility	MP	Total Non-Facility	Total Facility	Global	Status
30540	7.81	8.35	8.35	.67	16.83	16.83	090	A

Modifiers*

Code	Modifier	Code	Modifier	Code	Modifier	Code	Modifier
30540	50						

CCI

30540 30545^{1E}, 30560¹, 36000¹, 36410¹, 37202¹, 51701¹, 51702¹, 51703¹, 62318¹, 62319¹, 64415¹, 64416¹, 64417¹, 64450¹, 64470¹, 64475¹, 69990⁰, 92502⁰, 96360¹, 96365¹, 96372¹, 96374¹, 96375¹, J2001¹

** See Appendix for CCI information

● New Code

▲ Revised Code

GO Code

⊘ Do Not Code

* See Appendix C for Modifier Rules

31239

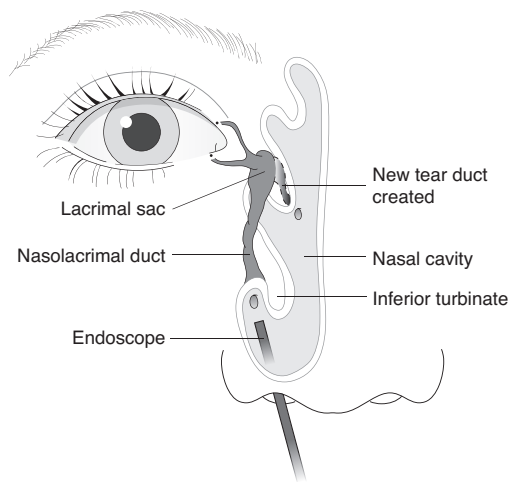
31239 Nasal/sinus endoscopy, surgical; with dacryocystorhinostomy

Plain English Description

A surgical nasal/sinus endoscopy is performed with dacryocystorhinostomy. This procedure is done when the nasolacrimal duct is blocked and the flow of tears needs to be restored through the creation of a new tear duct canal. A topical nasal decongestant and local anesthetic with a vasoconstrictor are applied as needed. A fiberoptic light probe is introduced through the upper or lower canaliculus and passed into the lacrimal sac. An endoscope is introduced through the nose and the light probe is located endoscopically on the lateral wall of the nose and its position is noted. A small circle of mucosa is removed at the site of transillumination and the underlying bone is exposed. A portion of the uncinete process may be removed to gain access to the underlying bone, which is removed using a drill or YAG laser. The light probe is removed and replaced with a metal probe. Tenting of the medial wall of the lacrimal sac is observed with the nasal endoscope and the lacrimal sac is opened using cutting forceps. The opening is enlarged to approximately 1 cm. Stents attached to silastic tubing are inserted through the upper and lower canaliculi and the stent is passed into the nose, and removed from the tubing, then the tubing is secured forming a continuous loop around the canaliculi.

Endoscopic dacryocystorhinostomy

An endoscope is used to assist in creating a new tear duct from the lower eyelid into the nose



CT For an open dacryocystorhinostomy procedure – 68720. Codes 68810 and 68811 (probing of nasolacrimal duct) are included in this procedure, and should not be reported separately, unless performed on the opposite side; if so, it is reported with a modifier 59 and LT or RT.

ICD-9-CM Diagnostic Codes (commonly used)

- 238.2** Neoplasm of uncertain behavior of skin
- 374.10** Ectropion, unspecified
- 375.20** Epiphora, unspecified as to cause
- 375.21** Epiphora due to excess lacrimation
- 375.22** Epiphora due to insufficient drainage
- 375.30** Dacryocystitis, unspecified
- 375.42** Chronic dacryocystitis
- 375.53** Stenosis of lacrimal canaliculi
- 375.56** Stenosis of nasolacrimal duct, acquired
- 375.69** Other changes of lacrimal passages
- 470** Deviated nasal septum
- 473.0** Chronic maxillary sinusitis
- 478.0** Hypertrophy of nasal turbinates

HCPCS Code(s)

No crosswalks apply to this code or code range.

Anesthesia Code(s)

00160

RVU(s)

Code	Work	PE Facility	PE Non-Facility	MP	Total Non-Facility	Total Facility	Global	Status
31239	9.23	7	7	.62	16.85	16.85	010	A

Modifiers*

Code	Modifier	Code	Modifier	Code	Modifier	Code	Modifier
31239	N/A						

CCI

31239 30801¹, 31231⁰, 31233¹, 31235¹, 31237¹, 36000¹, 36410¹, 37202¹, 51701¹, 51702¹, 51703¹, 62318¹, 62319¹, 64415¹, 64416¹, 64417¹, 64450¹, 64470¹, 64475¹, 68810¹, 68811¹, 69990⁰, 92502⁰, 92511⁰, 96360¹, 96365¹, 96372¹, 96374¹, 96375¹

* See Appendix C for Modifier Rules

● New Code

▲ Revised Code

☐ Code

⊘ Do Not Code

** See Appendix for CCI information

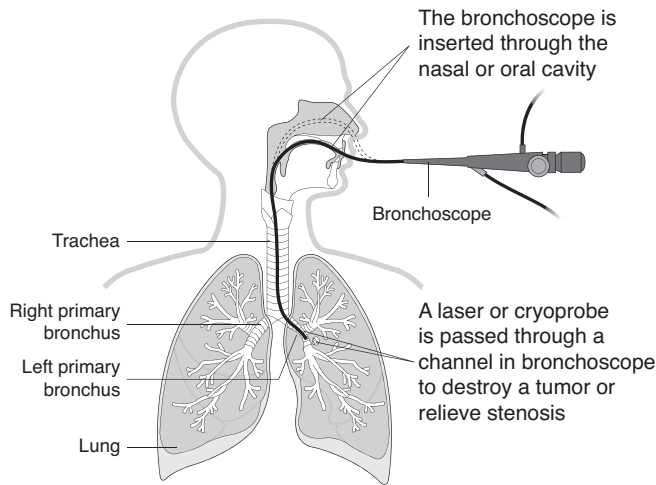
31641

31641 Bronchoscopy (rigid or flexible); with destruction of tumor or relief of stenosis by any method other than excision (eg, laser therapy, cryotherapy)

Plain English Description

A rigid or flexible bronchoscope is inserted through the nose or mouth and advanced into the oropharynx. The oropharynx is examined. The vocal cords are visualized and examined. The bronchoscope is then advanced into the trachea, which is also examined before the scope is advanced into each mainstem bronchus and any tumor tissue is destroyed or stenosis relieved without excision. If a rigid bronchoscope is used, a telescope or flexible bronchoscope may be inserted through the rigid bronchoscope to visualize the distal segment of each mainstem bronchus. Once the tumor has been visualized, a suction catheter and laser fiber, quartz fiber (for photodynamic therapy), cryotherapy, electrocautery, or argon plasma coagulation (APC) device are inserted. Technique differs slightly depending on the type of device used. If a laser device is employed, the laser is fired and the lesion is destroyed while continuous suction is applied. If cryotherapy is used, repetitive freeze/thaw cycles are used to destroy the lesion. If electrocautery (thermal destruction) is employed, direct contact is made with the lesion through thermal probes or forceps used to destroy the lesion. APC, another form of thermal destruction, does not require direct contact with the lesion. Argon plasma is used to conduct the electric current. When gas is released an arc is created that generates heat and destroys the lesion. If photodynamic therapy is employed, a photosensitizer is administered intravenously and a light source is delivered via a quartz fiber which is delivered through the bronchoscope.

Bronchoscopy
With destruction of tumor or relief of stenosis



Coding Guidance

- CT** For 31641: Add bronchoscopic photodynamic therapy – 96570-96571
- GO** Code an additional endobronchial ultrasound (EBUS) during bronchoscopy – 31620. Code bronchoscopic photodynamic therapy – 96570-96571.

ICD-9-CM Diagnostic Codes (commonly used)

- 162.0** Malignant neoplasm of trachea
- 162.2** Malignant neoplasm of main bronchus
- 162.3** Malignant neoplasm of upper lobe, bronchus or lung
- 162.4** Malignant neoplasm of middle lobe, bronchus or lung
- 162.5** Malignant neoplasm of lower lobe, bronchus or lung
- 162.8** Malignant neoplasm of other parts of bronchus or lung
- 162.9** Malignant neoplasm of bronchus and lung, unspecified
- 197.0** Secondary malignant neoplasm of lung
- 212.2** Benign neoplasm of trachea
- 212.3** Benign neoplasm of bronchus and lung
- 212.9** Benign neoplasm of respiratory and intrathoracic organs, site unspecified
- 235.7** Neoplasm of uncertain behavior of trachea, bronchus, and lung
- 239.1** Neoplasm of unspecified nature of respiratory system
- 478.74** Stenosis of larynx
- 748.3** Other congenital anomalies of larynx, trachea, and bronchus
- V10.11** Personal history of malignant neoplasm of bronchus and lung
- V10.12** Personal history of malignant neoplasm of trachea
- V42.6** Lung transplant status

HCPCS Codes

No crosswalks apply to this code or code range.

Anesthesia Code(s)

00520, 00326

RVU(s)

Code	Work	PE Facility	PE Non-Facility	MP	Total Non-Facility	Total Facility	Global	Status
31641	5.02	1.63	1.63	.35	7	7	000	A

Modifiers*

Code	Modifier	Code	Modifier	Code	Modifier	Code	Modifier
31641	50						

CCI

31641 00520⁰, 31231¹, 31500⁰, 31525¹, 31526¹, 31535¹, 31536¹, 31540¹, 31541¹, 31575¹, 31622⁰, 31625¹, 31640^{1E}, 31717¹, 31720¹, 36000¹, 36410¹, 37202¹, 51701¹, 51702¹, 51703¹, 62318¹, 62319¹, 64415¹, 64416¹, 64417¹, 64420¹, 64421¹, 64450¹, 64470¹, 64475¹, 69990⁰, 76000¹, 76001¹, 77002¹, 89220⁰, 92511⁰, 96360¹, 96365¹, 96372¹, 96374¹, 96375¹

** See Appendix for CCI information

● New Code

▲ Revised Code

GO Code

⊘ Do Not Code

* See Appendix C for Modifier Rules

Catheterization

- arterial, 36620
- aspiration
 - nasotracheal, 31720
 - tracheobronchial, 31725
- bronchial brush biopsy, 31717
- Eustachian tube, 69405

Central venous catheter/device

- centrally inserted
 - nontunneled, 36555-36556
 - tunneled
 - with port, 36560-36561
 - with pump, 36563
 - without pump/port, 36557-36558, 36565
- nontunneled, 36555-36556
- peripherally inserted
 - with port, 36570-36571
 - without pump/port, 36568-36569
- removal, 36589-36590
- repair, 36575-36576
- replacement
 - catheter only, 36578
 - complete
 - nontunneled, 36580
 - peripherally inserted, 36584-36585
 - tunneled, 36581-36583
- tunneled, 36557-36558
- two catheters
 - with port, 36566
 - without pump/port, 36565-36566

Circadian respiratory pattern, 94772**Closure**

- fistula
 - or tracheostomy, 31820, 31825
 - postauricular, 69700
 - salivary, 42600
- skin
 - layer, 12051-12057
 - secondary, 13160

Cochlear implant/device

- diagnostic analysis
 - 7 years or older, 92603-92604
 - younger than 7, 92601-92602
- implantation, 69930

Collection, blood specimen

- capillary, 36416
- central/peripheral venous catheter, 36592
- completely implantable venous access device, 36591

Computed tomography

- limited/follow-up, 76380
- maxillofacial area, 70486-70488
- neck, soft tissue, 70490-70492
- orbit, sella, posterior fossa, inner ear, 70480-70482

Computerized dynamic posturography, 92548**Construction, tracheoesophageal fistula, 31611****Consultation**

- clinical pathology, 80500-80502

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Decompression

- facial nerve, 69720-69725, 69955
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- mastoidectomy cavity, 69220, 69222

Declothing, vascular access device, 36593**Destruction**

- lesion
 - palate, 42160
 - skin
 - malignant, 17280-17286
 - pre-malignant, 17000-17004
 - vascular proliferative, 17106-17108
 - uvula, 42160
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- esophagus
 - balloon
 - for achalasia, 43458
 - retrograde, 43456
 - over guide wire, 43453
 - sound/bougie, 43450
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Displacement therapy, 30210**Dissection, jugular node, 38542****Diversion, parotid duct, 42507-42510****Diverticulectomy**

- esophagus/hypopharynx, 43130-43135

Drainage

- abscess
 - auditory canal, 69020
 - ear
 - complicated, 69020
 - simple, 69000
 - lymph node, 38300
 - nasal
 - internal, 30000
 - septum, 30020
 - parapharyngeal
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 - intraoral approach, 42720
 - parotid
 - complicated, 42305
 - simple, 42300
 - peritonsillar, 42700
 - retropharyngeal
 - external approach, 42725
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 - complicated, multiple 10061
 - simple, single 10060
 - sublingual, 42310
 - submaxillary
 - external, 42320
 - intraoral, 42310
- cyst
 - thyroglossal duct

Drainage – continued

- hematoma
 - ear
 - complicated, 69020
 - simple, 69000
 - nasal
 - internal, 30000
 - septum, 30020
 - skin, 10140
 - seroma, 10140

Electrocochleography, 92584**Endolymphatic sac operation, 69805-69806****Endoscopy, nasal sinus**

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 - with tonsils, 42820-42821
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 - sublingual salivary, 42408
 - thyroglossal duct, 60280-60281
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- epiglottis, 31420
- ethmoid
 - extranasal, 31205
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