



CODING COMPANION

OB/GYN

A comprehensive illustrated guide to coding
and reimbursement

Sample

2021

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Getting Started with Coding Companion

Coding Companion for OB/GYN is designed to be a guide to the specialty procedures classified in the CPT® book. It is structured to help coders understand procedures and translate physician narrative into correct CPT codes by combining many clinical resources into one, easy-to-use source book.

The book also allows coders to validate the intended code selection by providing an easy-to-understand explanation of the procedure and associated conditions or indications for performing the various procedures. As a result, data quality and reimbursement will be improved by providing code-specific clinical information and helpful tips regarding the coding of procedures.

CPT Codes

For ease of use, evaluation and management codes related to OB/GYN are listed first in the *Coding Companion*. All other CPT codes in *Coding Companion* are listed in ascending numeric order. Included in the code set are all surgery, radiology, laboratory, and medicine codes pertinent to the specialty. Each CPT code is followed by its official CPT code description.

Resequencing of CPT Codes

The American Medical Association (AMA) employs a resequenced numbering methodology. According to the AMA, there are instances where a new code is needed within an existing grouping of codes, but an unused code number is not available to keep the range sequential. In the instance where the existing codes were not changed or had only minimal changes, the AMA assigned a code out of numeric sequence with the other related codes being grouped together. The resequenced codes and their descriptions have been placed with their related codes, out of numeric sequence.

CPT codes within the Optum360 *Coding Companion* series display in their resequenced order. Resequenced codes are enclosed in brackets for easy identification.

ICD-10-CM

Overall, the 10th revision goes into greater clinical detail than did ICD-9-CM and addresses information about previously classified diseases, as well as those diseases discovered since the last revision. Conditions are grouped with general epidemiological purposes and the evaluation of health care in mind. New features have been added, and conditions have been reorganized, although the format and conventions of the classification remain unchanged for the most part.

Detailed Code Information

One or more columns are dedicated to each procedure or service or to a series of similar procedures/services. Following the specific CPT code and its narrative, is a combination of features. A sample is shown on page ii. The black boxes with numbers in them correspond to the information on the pages following the sample.

Appendix Codes and Descriptions

Some CPT codes are presented in a less comprehensive format in the appendix. The CPT codes appropriate to the specialty are included in the appendix with the official CPT code description. The codes are presented in numeric order, and each code is followed by an easy-to-understand lay description of the procedure.

The codes in the appendix are presented in the following order:

- HCPCS
- Pathology and Laboratory
- Surgery
- Medicine Services
- Radiology
- Category III

Category II codes are not published in this book. Refer to the CPT book for code descriptions.

CCI Edit Updates

The *Coding Companion* series includes the list of codes from the official Centers for Medicare and Medicaid Services' National Correct Coding Policy Manual for Part B Medicare Contractors that are considered to be an integral part of the comprehensive code or mutually exclusive of it and should not be reported separately. The codes in the Correct Coding Initiative (CCI) section are from the most current version available at press time. The CCI edits are located in a section at the back of the book. Optum360 maintains a website to accompany the *Coding Companions* series and posts updated CCI edits on this website so that current information is available before the next edition. The website address is <http://www.optum360coding.com/ProductUpdates/>. The 2021 edition password is: XXXXXX Log in each quarter to ensure you receive the most current updates. An email reminder will also be sent to you to let you know when the updates are available.

Index

A comprehensive index is provided for easy access to the codes. The index entries have several axes. A code can be looked up by its procedural name or by the diagnoses commonly associated with it. Codes are also indexed anatomically. For example:

69501 Transmastoid antrotomy (simple mastoidectomy)

could be found in the index under the following main terms:

Antrotomy

Transmastoid, 69501

OR

Excision

Mastoid
Simple, 69501

General Guidelines

Providers

The AMA advises coders that while a particular service or procedure may be assigned to a specific section, it is not limited to use only by that specialty group (see paragraphs two and three under "Instructions for Use of the CPT Codebook" on page xiii of the CPT Book). Additionally, the procedures and services listed throughout the book are for use by any qualified physician or other qualified health care professional or entity (e.g., hospitals, laboratories, or home health agencies). Keep in mind that there may be other policies or guidance that can affect who may report a specific service.

Supplies

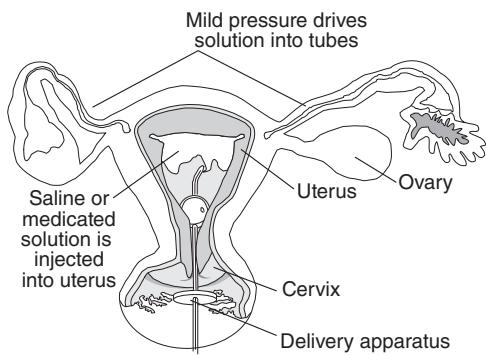
Some payers may allow physicians to separately report drugs and other supplies when reporting the place of service as office or other nonfacility setting. Drugs and supplies are to be reported by the facility only when performed in a facility setting.

Professional and Technical Component

Radiology and some pathology codes often have a technical and a professional component. When physicians do not own their own equipment and send their patients to outside testing facilities, they should append modifier 26 to the procedural code to indicate they performed only the professional component.

58350

58350 Chromotubation of oviduct, including materials



Explanation

The physician injects a liquid dye or solution into the uterine cavity or directly into the fallopian tubes. This procedure is frequently performed during a separately reported surgery, open or laparoscopic, to verify patency of tubes.

Coding Tips

When 58350 is performed with another separately identifiable procedure, the highest dollar value code is listed as the primary procedure and subsequent procedures are appended with modifier 51. Supply of materials should be reported separately with code 99070.

ICD-10-CM Diagnostic Codes

- N70.01 Acute salpingitis
- N70.03 Acute salpingitis and oophoritis
- N70.11 Chronic salpingitis
- N70.13 Chronic salpingitis and oophoritis
- N80.2 Endometriosis of fallopian tube
- N83.321 Acquired atrophy of right fallopian tube
- N83.322 Acquired atrophy of left fallopian tube
- N83.331 Acquired atrophy of right ovary and fallopian tube
- N83.332 Acquired atrophy of left ovary and fallopian tube
- N83.521 Torsion of right fallopian tube
- N83.522 Torsion of left fallopian tube
- N83.53 Torsion of ovary, ovarian pedicle and fallopian tube
- N83.6 Hematosalpinx
- N83.8 Other noninflammatory disorders of ovary, fallopian tube and broad ligament
- N97.1 Female infertility of tubal origin
- Q50.4 Embryonic cyst of fallopian tube
- Q50.6 Other congenital malformations of fallopian tube and broad ligament
- Z31.41 Encounter for fertility testing
- Z31.42 Aftercare following sterilization reversal

AMA: 58350 2019,Jul,6; 2018,Jan,8; 2017,Jan,8; 2016,Jan,13; 2015,Jan,16; 2014,Jan,11

Relative Value Units/Medicare Edits

| Non-Facility RVU | Work | PE | MP | Total |
|------------------|------|------|------|-------|
| 58350 | 1.06 | 1.89 | 0.12 | 3.07 |
| Facility RVU | Work | PE | MP | Total |
| 58350 | 1.06 | 1.16 | 0.12 | 2.34 |

| | FUD | Status | MUE | Modifiers | IOM Reference |
|-------|-----|--------|------|---------------|---------------|
| 58350 | 10 | A | 1(2) | 51 50 N/A N/A | None |

* with documentation

Terms To Know

adhesion. Abnormal fibrous connection between two structures, soft tissue or bony structures, that may occur as the result of surgery, infection, or trauma.

chromotubation. Injection of a medication or saline solution into the uterine cavity and fallopian tubes to verify patency of the tubes.

endometriosis. Aberrant uterine **mucosal** tissue appearing in areas of the pelvic cavity outside of its normal location, lining the uterus, and inflaming surrounding tissues often resulting in infertility or spontaneous abortion.

follicular cyst. Common type of ovarian cyst related to the menstrual cycle that occurs when the follicle in which the ovum develops does not rupture and expel the egg. Follicular cysts normally disappear within two or three menstrual cycles and are usually benign.

oophoritis. Inflammation or infection of one or both ovaries that can cause chronic pelvic pain, ectopic pregnancy, or sterilization.

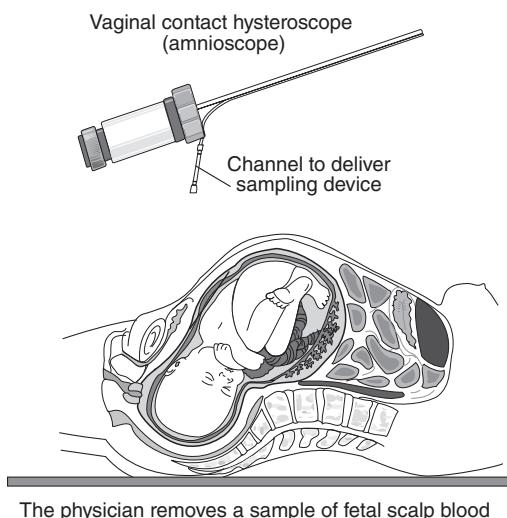
parametritis. Inflammation and infection of the tissue in the structures around the uterus.

patency. State of a tube-like structure or conduit being open and unobstructed.

salpingitis. Inflammation of the fallopian tubes, usually caused by a bacterial infection and occurring in conjunction with inflammation of the ovaries (oophoritis).

59030

59030 Fetal scalp blood sampling



Explanation

The physician samples fetal scalp blood during active labor for diagnostic purposes. This test, which assesses fetal distress during labor, must be done when the cervix is dilated more than 2 cm and the fetal vertex is low in the pelvis. The physician breaks the amniotic sac in patients whose water has not broken spontaneously and inserts an amnioscope through the vagina. An incision is made in the scalp with a narrow blade that penetrates no more than 2 mm. Blood is aspirated into a tube.

Coding Tips

For repeat fetal scalp blood sampling by the same physician or other qualified health care professional, report 59030 and append modifier 76; by a different clinician, append modifier 77. Note that 59030 can be reported in addition to the maternity package.

ICD-10-CM Diagnostic Codes

- 011.1 Pre-existing hypertension with pre-eclampsia, first trimester
- 011.2 Pre-existing hypertension with pre-eclampsia, second trimester
- 011.3 Pre-existing hypertension with pre-eclampsia, third trimester
- 011.4 Pre-existing hypertension with pre-eclampsia, complicating childbirth
- 014.02 Mild to moderate pre-eclampsia, second trimester
- 014.03 Mild to moderate pre-eclampsia, third trimester
- 014.04 Mild to moderate pre-eclampsia, complicating childbirth
- 014.12 Severe pre-eclampsia, second trimester
- 014.13 Severe pre-eclampsia, third trimester
- 014.14 Severe pre-eclampsia complicating childbirth
- 014.22 HELLP syndrome (HELLP), second trimester
- 014.23 HELLP syndrome (HELLP), third trimester
- 014.24 HELLP syndrome, complicating childbirth
- 015.02 Eclampsia complicating pregnancy, second trimester
- 015.03 Eclampsia complicating pregnancy, third trimester
- 015.1 Eclampsia complicating labor

- 063.0 Prolonged first stage (of labor)
- 063.1 Prolonged second stage (of labor)
- 068 Labor and delivery complicated by abnormality of fetal acid-base balance
- 075.5 Delayed delivery after artificial rupture of membranes
- 076 Abnormality in fetal heart rate and rhythm complicating labor and delivery
- 077.8 Labor and delivery complicated by other evidence of fetal stress

AMA: 59030 2019,Jul,6; 2014,Jan,11

Relative Value Units/Medicare Edits

| Non-Facility RVU | Work | PE | MP | Total | |
|------------------|------|--------|------|----------------|---------------|
| 59030 | 1.99 | 0.75 | 0.51 | 3.25 | |
| Facility RVU | Work | PE | MP | Total | |
| 59030 | 1.99 | 0.75 | 0.51 | 3.25 | |
| | FUD | Status | MUE | Modifiers | IOM Reference |
| 59030 | 0 | A | 2(3) | 51 N/A N/A 80* | None |

* with documentation

Terms To Know

complication. Condition arising after the beginning of observation and treatment that modifies the course of the patient's illness or the medical care required, or an undesired result or misadventure in medical care.

diagnostic. Examination or procedure to which the patient is subjected, or which is performed on materials derived from a hospital outpatient, to obtain information to aid in the assessment of a medical condition or the identification of a disease. Among these examinations and tests are diagnostic laboratory services such as hematology and chemistry, diagnostic x-rays, isotope studies, EKGs, pulmonary function studies, thyroid function tests, psychological tests, and other tests given to determine the nature and severity of an ailment or injury.

HELLP syndrome. Group of symptoms occurring in pregnancy, including hemolysis, elevated liver enzymes, and a low platelet count. These symptoms may occur simultaneously with preeclampsia or may be present prior to the patient becoming preeclamptic.

preeclampsia. Complication of pregnancy manifesting in the development of borderline hypertension, protein in the urine, and unresponsive swelling between the 20th week of pregnancy and the end of the first week following birth in mild to moderate cases. Severe preeclampsia presents with hypertension, associated with marked swelling, proteinuria, abdominal pain, and/or visual changes.

G0124

G0124 Screening cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation, requiring interpretation by physician

Explanation

These cervical or vaginal cytopathology screenings (any reporting system) of specimens collected in preservative fluid may be identified as "thin prep." The specimen is collected by cervical, endocervical, or vaginal scrapings or by aspiration of vaginal fluid and cells. This method saves time by eliminating the need for the physician to prepare a smear; the specimen is placed in a preservative suspension instead. At the laboratory, special instruments take the cells in the preservative suspension and "plate-out" a monolayer for screening, which will carefully review the specimen for abnormal cells.

Relative Value Units/Medicare Edits

| Non-Facility RVU | Work | PE | MP | Total |
|------------------|------|------|------|-------|
| G0124 | 0.42 | 0.46 | 0.02 | 0.9 |
| Facility RVU | Work | PE | MP | Total |
| G0124 | 0.42 | 0.46 | 0.02 | 0.9 |

G0141

G0141 Screening cytopathology smears, cervical or vaginal, performed by automated system, with manual rescreening, requiring interpretation by physician

Explanation

This cervical or vaginal cytopathology screening is done on specimens prepared in a smear. The specimen is collected by cervical, endocervical, or vaginal scrapings or by aspiration of vaginal fluid and cells. The screening method is microscopy examination of a spray or liquid fixated smear prepared by the physician collecting the specimen. Screening, defined as the careful review of the specimen for abnormal cells, may then be accomplished by different methods that involve the use of automated systems.

Relative Value Units/Medicare Edits

| Non-Facility RVU | Work | PE | MP | Total |
|------------------|------|------|------|-------|
| G0141 | 0.42 | 0.46 | 0.02 | 0.9 |
| Facility RVU | Work | PE | MP | Total |
| G0141 | 0.42 | 0.46 | 0.02 | 0.9 |

G0425-G0427

G0425 Telehealth consultation, emergency department or initial inpatient, typically 30 minutes communicating with the patient via telehealth
G0426 Telehealth consultation, emergency department or initial inpatient, typically 50 minutes communicating with the patient via telehealth
G0427 Telehealth consultation, emergency department or initial inpatient, typically 70 minutes or more communicating with the patient via telehealth

Explanation

These codes are used to report an initial inpatient or emergency department consultative visit or consultations that are furnished via telehealth in response to a request by the attending physician. Telehealth is the delivery of health-related services via telecommunications equipment. These services include counseling and coordination of patient care with the other providers.

Relative Value Units/Medicare Edits

| Non-Facility RVU | Work | PE | MP | Total |
|------------------|------|------|------|-------|
| G0425 | 1.92 | 0.75 | 0.14 | 2.81 |
| G0426 | 2.61 | 1.04 | 0.17 | 3.82 |
| G0427 | 3.86 | 1.56 | 0.25 | 5.67 |
| Facility RVU | Work | PE | MP | Total |
| G0425 | 1.92 | 0.75 | 0.14 | 2.81 |
| G0426 | 2.61 | 1.04 | 0.17 | 3.82 |
| G0427 | 3.86 | 1.56 | 0.25 | 5.67 |

G0438-G0439

G0438 Annual wellness visit; includes a personalized prevention plan of service (PPS), initial visit

G0439 Annual wellness visit, includes a personalized prevention plan of service (PPS), subsequent visit

Explanation

The initial annual wellness visit (AWV) includes taking the patient's history; compiling a list of the patient's current providers; taking the patient's vital signs, including height and weight; reviewing the patient's risk factor for depression; identifying any cognitive impairment; reviewing the patient's functional ability and level of safety (based on observation or screening questions); setting up a written patient screening schedule; compiling a list of risk factors, and furnishing personalized health services and referrals, as necessary. Subsequent annual wellness visits (AWV) include updating the patient's medical and family history, updating the current provider list, obtaining the patient's vital signs and weight, identifying cognitive impairment, updating the screening schedule, updating the risk factors list, and providing personalized health advice to the patient.

Relative Value Units/Medicare Edits

| Non-Facility RVU | Work | PE | MP | Total |
|------------------|------|------|------|-------|
| G0438 | 2.43 | 2.25 | 0.16 | 4.84 |
| G0439 | 1.5 | 1.68 | 0.1 | 3.28 |
| Facility RVU | Work | PE | MP | Total |
| G0438 | 2.43 | 2.25 | 0.16 | 4.84 |
| G0439 | 1.5 | 1.68 | 0.1 | 3.28 |

P3001

P3001 Screening Papanicolaou smear, cervical or vaginal, up to three smears, requiring interpretation by physician

Explanation

A screening Papanicolaou (commonly referred to as Pap) smear, cervical or vaginal, is a microscopic examination of cells scraped from the cervix or vaginal wall. The smears are examined for any cells that appear to be abnormal. It is a screening procedure when no known disease process exists.

Relative Value Units/Medicare Edits

| Non-Facility RVU | Work | PE | MP | Total |
|------------------|------|------|------|-------|
| P3001 | 0.42 | 0.46 | 0.02 | 0.9 |
| Facility RVU | Work | PE | MP | Total |
| P3001 | 0.42 | 0.46 | 0.02 | 0.9 |

Q0091

Q0091 Screening Papanicolaou smear; obtaining, preparing and conveyance of cervical or vaginal smear to laboratory

Correct Coding Initiative Update

*Indicates Mutually Exclusive Edit

0058T 36591-36592, 96523

0071T 0213T, 0216T, 36000, 36410, 36591-36592, 51701-51702, 57180, 57400-57410, 57452, 57500, 57530, 57800, 58100, 61650, 62324-62327, 64415-64417, 64435, 64450, 64486-64490, 64493, 69990, 72195-72197, 74712, 76376-76380, 76940, 76970, 76998, 77013, 77021-77022, 96360, 96365, 96372, 96374-96377, 96523, 99446-99449, 99451-99452, G0471

0072T 0071T, 0213T, 0216T, 36000, 36410, 36591-36592, 51701-51702, 57180, 57400-57410, 57452, 57500, 57530, 57800, 58100, 61650, 62324-62327, 64415-64417, 64435, 64450, 64486-64490, 64493, 69990, 72195-72197, 74712, 76376-76380, 76940, 76970, 76998, 77013, 77021-77022, 96360, 96365, 96372, 96374-96377, 96523, 99446-99449, 99451-99452, G0471

0404T 0213T, 0216T, 0228T, 0230T, 12001-12007, 12011-12057, 13100-13133, 13151-13153, 36000, 36400-36410, 36420-36430, 36440, 36600, 36640, 43752, 51701-51703, 57100, 57410, 57800, 58100, 62320-62327, 64400-64410, 64413-64435, 64445-64450, 64461, 64463, 64479, 64483, 64486-64490, 64493, 64505, 64510-64530, 69990, 76830-76831, 76856-76857, 76940, 76942, 76970, 76998, 92012-92014, 93000-93010, 93040-93042, 93318, 94002, 94200, 94250, 94680-94690, 94770, 95812-95816, 95819, 95822, 95829, 95955, 96360, 96365, 96372, 96374-96377, 96523, 99155, 99156, 99157, 99211-99223, 99231-99255, 99291-99292, 99304-99310, 99315-99316, 99334-99337, 99347-99350, 99374-99375, 99374-99375, 99377-99378

0475T 0476T-0478T, 36591-36592, 76970, 96523, 99453-99454

0476T 36591-36592, 76970, 96523, 99453-99454

0477T 36591-36592, 96523, 99453-99454

0478T 36591-36592, 96523, 99453-99454

0487T 36591-36592, 51701-51702, 96523

0500T 80500-80502, 81400-81408, 87624-87625, 96523

0548T No CCI edits apply to this code.

0549T No CCI edits apply to this code.

0550T No CCI edits apply to this code.

0551T No CCI edits apply to this code.

0567T No CCI edits apply to this code.

0568T No CCI edits apply to this code.

10060 0213T, 0216T, 0228T, 0230T, 11055-11057, 11401-11406*, 11421-11426*, 11441-11471*, 11600-11606*, 11620-11646*, 11719-11730, 11740, 11765, 12001-12007, 12011-12057, 13100-13133, 13151-13153, 20500, 29580-29581, 30000*, 36000, 36400-36410, 36420-36430, 36440, 36591-36592, 36600, 36640, 43752, 51701-51703, 62320-62327, 64400-64410, 64413-64435, 64445-64450, 64461-64463, 64479-64505, 64510-64530, 69990, 92012-92014, 93000-93010, 93040-93042, 93318, 93355, 94002, 94200, 94250, 94680-94690, 94770, 95812-95816, 95819, 95822, 95829, 95955, 96360-96368, 96372, 96374-96377, 96523, 97597-97598, 97602-97608, 99155, 99156, 99157, 99211-99223, 99231-99255, 99291-99292, 99304-99310, 99315-99316, 99334-99337, 99347-99350, 99374-99375, 99377-99378, 99446-99449, 99451-99452, 99495-99496, G0127-J2001

10061 0213T, 0216T, 0228T, 0230T, 10060, 11055-11057, 11406*, 11424-11440*, 11444-11451*, 11463-11471*, 11604-11606*, 11623-11626*, 11643-11646*, 11719-11730, 11740-11750, 11760, 11765, 12001-12007, 12011-12057, 13100-13133, 13151-13153, 20500,

29580-29581, 36000, 36400-36410, 36420-36430, 36440, 36591-36592, 36600, 36640, 43752, 51701-51703, 62320-62327, 64400-64410, 64413-64435, 64445-64450, 64461-64463, 64479-64505, 64510-64530, 69990, 92012-92014, 93000-93010, 93040-93042, 93318, 93355, 94002, 94200, 94250, 94680-94690, 94770, 95812-95816, 95819, 95822, 95829, 95955, 96360-96368, 96372, 96374-96377, 96523, 97597-97598, 97602-97608, 99155, 99156, 99157, 99211-99223, 99231-99255, 99291-99292, 99304-99310, 99315-99316, 99334-99337, 99347-99350, 99374-99375, 99377-99378, 99446-99449, 99451-99452, 99495-99496, G0127-J2001

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