

Indiana Gastroenterology, Inc.

Colonoscopy Coding Guidelines

Screening Colonoscopy—Low/Average Risk—Procedure Code 45378 only, Diagnosis Code Z12.11 only

A screening colonoscopy is for low/average risk patients and is typically covered once every 10 years. A patient must meet the following criteria to be considered for a screening colonoscopy:

- Adults 45 years or older
- Patients are asymptomatic (no present signs or symptoms)
- Patients have no personal history of polyps or colorectal cancer
- Patient has not had a colonoscopy in the last 10 years

NOTE: If you have a preventative policy under your insurance plan, the above criteria will apply to your procedure.

Colonoscopy—High Risk Procedure Code 45378

A colonoscopy may be recommended by your physician every 2-7 years for the following high risk patients:

- A personal history of polyps (**Diagnosis Code: Z86.010**)
- A personal history of colorectal cancer (**Diagnosis Code: Z85.038**)
- A personal history of inflammatory bowel disease, including Crohn's Disease and Ulcerative Colitis
- A 1st degree relative (sibling, parent, or child) who has had colorectal cancer or an adenomatous polyp (a type of polyp that could become cancerous) (**Diagnosis Code: Z80.0 or Z83.71**)
- A family history of familial adenomatous polyposis (this involves multipole adenomatous polyps, often in the hundreds, and carries a very high risk of colon cancer) (**Diagnosis Code: Z15.09**)
- A family history of hereditary nonpolyposis colorectal cancer (a type of colorectal cancer that runs in families and tends to cause cancer at a relatively young age – under 45 years) (**Diagnosis Code: Z80.0**)

NOTE: A high risk colonoscopy may not be covered under your preventative plan; please check with your insurance for benefits. Deductible and co-insurance may apply.

Diagnostic Colonoscopy Procedure Code 45378

A diagnostic colonoscopy may be recommended for signs and symptoms. Examples include, but are not limited to:

- Blood in stool/Hemoccult positive stool
- Rectal bleeding
- Iron deficiency anemia of unknown cause, confirmed by laboratory findings
- Change in bowel habits
- Persistent abdominal pain

NOTE: A diagnostic colonoscopy will apply to your deductible and co-insurance per your insurance policy.

Financial Responsibility

Most insurance companies offer preventative services and you can contact your insurance company if you have any questions (procedure codes are typically 45378, 45380, or 45385). **It is the patient's responsibility to know and understand their coverage and benefits.** Please be aware that if you have a personal history of colon polyps/colorectal cancer, this is usually covered as a diagnostic colonoscopy, and your deductible and co-insurance may apply. Indiana Gastroenterology, Inc. obtains prior authorization for services that require authorization, but we cannot guarantee how it will be covered.

Colonoscopy will create claims from several sources: you will receive bills/EOBs (Explanation of Benefits) for the physician performing the procedure, the facility where it is performed, anesthesia and pathology, if applicable.

It is the patient's responsibility to notify our office of any insurance changes prior to your scheduled procedure or your claim may be denied, making you financially responsible for the entire balance. Please be advised that Indiana Gastroenterology, Inc. is not responsible for paying your deductible or co-insurance, therefore we DO NOT offer a discount after we receive payment from your insurance company.

****Please contact your insurance company for questions and concerns regarding your coverage.****