

HYDRATION, THERAPEUTIC, PROPHYLACTIC, AND DIAGNOSTIC INJECTIONS AND INFUSIONS (EXCLUDES CHEMOTHERAPY)

ISSUE DATE:

AUTHORITY: 32 CFR 199.4(b)(2)(v), (b)(3)(iii), (b)(5)(v), (d)(3)(vi), (e)(11)(ii), (e)(11)(iii), (g)(15)

I. CPT¹ PROCEDURE CODES

90760, 90761, 90765, 90767, 90768, 90772 - 90775, 90779

II. DESCRIPTION

Previously intravenous (IV) hydration infusion services were not specifically described within the CPT code book. Hydration infusion services were reported with the same codes as chemotherapy. To more accurately report infusion services, several secondary service categories of new codes have been established.

III. POLICY

A. Hydration IV infusion consistent of a pre-packaged fluid and electrolytes (e.g., normal saline, D5-1/2 normal saline +30mEq KCl/liter), but are not used to report infusion of drugs or other substances are covered.

B. Intravenous or intra-arterial push (an injection in which the health care professional who administers the substance/drug is continuously present to administer the injection and observe the patient or an infusion of 15 minutes or less) for therapy, prophylactic, or diagnosis is covered.

- END -

¹ CPT only © 2006 American Medical Association (or such other date of publication of CPT). All Rights Reserved.

