



LM PRASAD MD SC  
Colon and Rectal Surgery

## Colonoscopy Surgical Coding Guidelines

**Screening Colonoscopy** – Average Risk – Procedure Code G0105 only, Diagnosis Code V76.51 only

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

- Adults 50 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**

A colonoscopy may be recommended by your physician every 2-5 years for the following high risk patients:

- A personal history of colon polyps
- A personal history of colorectal cancer
- A personal history of inflammatory bowel disease, including Crohn's Disease and Ulcerative Colitis
- A close relative (sibling, parent, or child) who has had colorectal cancer or an adenomatous polyp (a type of polyp that could become cancerous)
- A family history of familial adenomatous polyposis (this involves multiple adenomatous polyps, often in the hundreds, and carries a very high risk of colon cancer)

- A family history of hereditary non polyposis colorectal cancer (a type of colorectal cancer that runs in families and tends to cause cancer at a relatively young age - under 45 years)

**NOTE:** A high risk colonoscopy is typically covered under your preventative plan.

### **Diagnostic Colonoscopy**

A diagnostic colonoscopy may be recommended for the following signs and symptoms:

- Blood in stool/hem 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.

### **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, 45383 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 or family history of colorectal cancer, this is usually covered as a diagnostic colonoscopy and your deductible and co-insurance apply. LM Prasad MD SC, Colon and Rectal Surgery 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 was 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 LM Prasad MD SC, Colon and Rectal Surgery 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.

Date: \_\_\_\_\_ Patient Name: \_\_\_\_\_.

Patient Signature: \_\_\_\_\_.