

# Physician/Surgeon Services – Breast Biopsy

## 2008 CODING & REIMBURSEMENT GUIDE

Rates effective January 1, 2008 – June 30, 2008

### Breast Biopsy

CPT® CODE <sup>1</sup>	DESCRIPTION	2008 NATIONAL PAYMENT AVERAGE <sup>2</sup>
19102	Percutaneous, needle core biopsy using imaging guidance Professional payment in office Professional payment in hospital/ASC Hospital payment (outpatient) ASC payment	\$211.38 \$97.88 \$453.00 \$254.00
19103	Percutaneous, automated vacuum assisted or rotating biopsy device using imaging guidance Professional payment in office Professional payment in hospital/ASC Hospital payment (outpatient) ASC payment	\$546.55 \$181.29 \$865.00 \$437.00
19295	Image guided placement, metallic localization clip, percutaneous, during breast biopsy Professional payment in office Professional payment in hospital/ASC Hospital payment (outpatient) ASC payment	\$95.22 \$95.22 Packaged Packaged
77055	Mammography, unilateral	\$82.65
77058-26	Magnetic resonance imaging, breast without and/or with contrast material(s); unilateral (Professional payment)	\$78.46
77059-26	Magnetic resonance imaging, breast, bilateral (Professional payment)	\$78.46
77031-26	Stereotactic localization guidance for breast biopsy or needle placement, each lesion, radiological supervision and interpretation (Professional payment)	\$76.94
76098-26	Radiological examination, surgical specimen (Professional payment)	\$7.62
77021-26	Magnetic resonance guidance for needle placement (e.g for biopsy, needle aspiration, injection, or placement of localization device) radiological supervision and interpretation (Professional payment)	\$73.13
76377-26	Requiring image post processing on an independent work station (Professional payment)	\$39.99
76645-26	Ultrasound, breast(s), real time with image documentation (Professional payment)	\$25.90
76942-26	Ultrasonic guidance for needle placement (e.g., biopsy, aspiration, injection, localization device), image supervision and interpretation (Professional payment)	\$32.37

### Evaluation & Management (E/M) – Established Patient

CPT® CODE <sup>1</sup>	DESCRIPTION	RVU <sup>3</sup>	2008 NATIONAL AVERAGE MEDICARE RATE <sup>2</sup>
99213	Office or other outpatient visit	1.57	\$59.80
99214	Office or other outpatient visit	2.36	\$89.89
99215	Office or other outpatient visit	3.19	\$121.50

### Place of Service CMS-1500 Claim Form: Field 24B

PLACE OF SERVICE CODE	PLACE OF SERVICE NAME	PLACE OF SERVICE DESCRIPTION
11	Office	Location, other than a hospital, skilled nursing facility (SNF), military treatment facility, community health center, State or local public health clinic or intermediate care facility (ICF), where the health professional routinely provides health examinations, diagnosis and treatment of illness or injury on an ambulatory basis
22	Outpatient Hospital	A portion of a hospital that provides diagnostic, therapeutic (both surgical and nonsurgical) and rehabilitation services to sick or injured persons who do not require hospitalization or institutionalization

### Modifier Information<sup>4</sup>

58	Distinct Procedural Service	Staged or related procedure of service by the same physician during the postoperative period planned prospectively at the time of the original procedure (staged); or more extensive than the original procedure, or for therapy following a diagnostic surgical procedure
78	Distinct Procedural Service	Return to the operating room for a related procedure during the postoperative period
79	Distinct Procedural Service	Unrelated procedure or service by the same physician during the postoperative period

1. American Medical Association, CPT® 2007, Professional Edition and HCPCS 2007, Nineteenth edition.

2. Refer to information concerning status indicator taken from on the Medicare 2008 Outpatient Final rule published in the Federal Register, November 27, 2007.

3. Physician relative value units (RVUs) are based on the Medicare 2008 Physician Fee Schedule Final rule published in the Federal Register, November 27, 2007. National average Medicare rates, rounded to the nearest dollar, are based on these RVUs and account for the work RVU adjustment completed by CMS for Medicare budget neutrality purposes. The 2008 conversion factor is \$38.087. Actual payment to a physician will vary based on geographic location. Payment for a given procedure in a given locality is available in the Medicare Physician Fee Schedule Look-up file posted in the Physician Center of the CMS website.

4. Modifier information provided by, Coding with Modifiers, A Guide to Correct CPT® and HCPCS Level II Modifier Usage, 2004 American Medical Association, Second Printing, July 2004, Third Printing, February 2005.

Current Procedural Terminology (CPT) is copyright 2006 American Medical Association. All Rights Reserved. CPT® is a trademark of the AMA. No fee schedules, basic units, relative values or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS Restrictions Apply for Government Use.

Hologic Inc., provides this coding guide for informational purposes only. This guide is not an affirmative instruction as to which CPT®/HCPCS codes and modifiers to use for a particular service, supply, procedure or treatment. It is the provider's responsibility to determine and submit the appropriate codes and modifiers for any service, supply, procedure or treatment rendered. Actual codes and/or modifiers used are at the sole discretion of the treating physician and/or facility. Contact your local carrier and payer organizations for specific coding guidelines. Hologic cannot guarantee medical benefit coverage or reimbursement with the codes listed in this guide. Any payment rates listed are Medicare averages that may be subject to change without notice. Reimbursement may differ based on geographic regional variance and/or policies and fee schedules outlined as terms in your health plan, payer and/or carrier contracts.

If you require additional information please contact The Pinnacle Health Group, at (866) 369-9290 or by email, at: mammomste@thepinnaclehealthgroup.com.