

Excisional Breast Surgery/MammoSite Catheter Implant

2010 CODING & REIMBURSEMENT GUIDE

Physician Payment

Catheter Implant

CPT® CODE ³	DESCRIPTION	LOCATION	RVU ¹	2010 NATIONAL AVERAGE MEDICARE RATE ¹
19296	Placement of radiotherapy afterloading expandable catheter (single or multichannel) into the breast for interstitial radioelement application following partial mastectomy, includes imaging guidance; on date separate from partial mastectomy.	Office	99.9	\$3603.05
		Hospital/ASC	5.59	\$201.61
19297	Placement of radiotherapy afterloading expandable catheter (single or multichannel) into the breast for interstitial radioelement application following partial mastectomy, includes imaging guidance; concurrent with partial mastectomy (list separately in addition to code for primary procedure)	Office	NA	NA
		Hospital/ASC	2.53	\$91.25

Excisional Breast Surgery – Professional Payment

CPT® CODE ³	DESCRIPTION	RVU ¹	2010 NATIONAL AVERAGE MEDICARE RATE ¹
19125	Excision of breast lesion identified by preoperative placement of radiological marker, open; single lesion	11.63	\$419.45
19301	Mastectomy, partial (eg, lumpectomy, tylectomy, quadrantectomy, segmentectomy)	16.57	\$597.62
19302	Mastectomy, partial (eg, lumpectomy, tylectomy, quadrantectomy, segmentectomy); with axillary lymphadenectomy	23.02	\$830.25
19499	Unlisted procedure, breast (Placement of Cavity Evaluation Device)	Individual Consideration	Individual Consideration

Place of Service⁴

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
24	Ambulatory Surgery Center	A freestanding facility, other than a physician's office, where surgical and diagnostic services are provided on an ambulatory basis.

1. Physician relative value units (RVUs) are based on the Medicare 2010 Physician Fee Schedule Final rule published in the Federal Register, November 25, 2009. 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 2010 conversion factor is \$36.067. 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. The 2010 payment rates could be further revised if Congress were to enact legislation that would revise the conversion factor, which has typically occurred in recent years.

2. 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.

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

4. Place of service codes listed in CPT® 2007, Current Procedural Terminology, Professional Edition, 2006 American Medical Association.

MamoSite - Catheter Implant

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Facility Payment

Technical Component

CPT® CODE ²	DESCRIPTION	APC ¹ CATEGORY	LOCATION	2010 NATIONAL AVERAGE MEDICARE RATE ¹
19296	Placement of radiotherapy afterloading expandable catheter (single or multichannel) into the breast for interstitial radioelement application following partial mastectomy, includes imaging guidance; on date separate from partial mastectomy.	0648	Hospital	\$3,924.90
			ASC	\$2,069.71
19297	Placement of radiotherapy afterloading expandable catheter (single or multichannel) into the breast for interstitial radioelement application following partial mastectomy, includes imaging guidance; concurrent with partial mastectomy	0648	Hospital	\$3,924.90
			ASC	\$2,069.71
19499	Unlisted procedure breast (For potential use, placement of Cavity Evaluation Device)	0028	Hospital	\$1,668.41
A4550 or 99070	Supplies and materials (except spectacles), provided by the physician over and above those usually included with the office visit or other services rendered (list drugs, trays, supplies or materials provided)	Status Indicator: B		Not allowed or paid under OPFS. May be subject to review for payment by commercial payor/health plan.
C1728	Catheter, brachytherapy seed administration	Status Indicator: N		Services packaged into another service or APC group

Modifier Information²

CPT 19296 is typically performed during the post-operative period of a lumpectomy or partial mastectomy, therefore claim processing systems might deny a claim for CPT 19296 as related to the lumpectomy or partial mastectomy. To avoid this potential problem, it may be necessary to append a modifier² to CPT 19296 indicating special circumstance apply. Please contact your local carrier/health plan/payer organizations to obtain a list of approved modifiers. Modifiers that may be applicable include:

MODIFIER	DESCRIPTION	EXPLANATION
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
76	Distinct Procedural Service	Repeat procedure by same physician
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. Facility and Ambulatory Payment Classification (APC) rates are taken from the Medicare Hospital Outpatient Prospective Payment System final rule published in the Federal Register on October 31, 2009.