

ALABAMA QUALITY ASSURANCE FOUNDATION

**PRO GENERAL MEMORANDUM NO. 96/99-03
FOR IMMEDIATE DISTRIBUTION TO YOUR MEDICAL
RECORDS DEPARTMENT AND CODING STAFF**

TO: ADMINISTRATORS AND CHIEFS OF STAFF - All Alabama
Hospitals, Out-Patient Departments, and Ambulatory Surgery Centers

FROM: H. Terrell Lindsey
President and Chief Executive Officer

DATE: December 10, 1996

SUBJECT: American Medical Association CPT Coding Clarifications

I. PURPOSE

This General Memorandum is to inform hospitals and ambulatory surgery centers of CPT coding clarifications from the American Medical Association.

II. CPT CLARIFICATIONS IN THIS UPDATE INCLUDE:

- A. Insertion/endoscopic removal of ureteral stents
- B. Placement of breast lesion localization wires.
- C. Breast implant replacements/periprosthetic capsulectomies.
- D. Paravertebral facet joint nerve injections.
- E. Stereotactic breast biopsies.

III. DISCUSSION

A. Insertion/endoscopic removal of ureteral stents.

On page 191 of CPT 1996, an instructional note is given which reads "The insertion of a stent is included in 52320-52339 when done and should not be reported separately." This note applies only to TEMPORARY ureteral stents. In CPT 1997, this note has been revised to state that it applies to temporary stents only. If a "self-retaining" or indwelling ureteral stent (i.e. Double J) is inserted, an additional code of 52332 should be reported.

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Endoscopic removal of an indwelling stent is assigned to code 52310 or 52315 if the removal is complicated.

B. Placement of Breast Lesion Localization Wires.

Codes 19290 “preoperative placement of needle localization wire, breast” and 19291 “each additional lesion” should be reported in addition to code 19125 “Excision of breast lesion identified by radiologic marker” and code 19126 “excision of each additional lesion,” if the localization wire (needle, marker) is placed at the time of surgery.

C. Breast Implant Replacements/Capsulectomies.

QUESTION: What are the appropriate codes for periprosthetic capsulectomy and breast implant replacement?

ANSWER: Two codes are assigned, 19371 and 19342. Code 219371, “ periprosthetic capsulectomy,” includes the removal of the breast implant. Code 19342 is assigned for the breast implant replacement.

D. Paravertebral Facet Joint Nerve Injections.

Paravertebral facet joint nerve injections of an anesthetic are assigned to codes 64442 “injection, anesthetic agent paravertebral facet joint nerve, lumbar single level” and 64443 “each additional level.” There are two facet joints at each level (i.e. left and right). Code 64442 is used to report facet joint injections at a single level. Multiple level injections may be performed (i.e. L3-L4). Codes 64442 and 64443 are assigned for this procedure. (Note this would include 4 facet joints).

There is no specific CPT code for facet injection of a substance which is not an anesthetic. Code 64999 “Unlisted procedure of nervous system” is assigned.

E. Stereotactic Breast Biopsy.

Stereotactic breast biopsy is a relatively new procedure. Mammograms are taken at different angles to identify the lesion. A core needle is then introduced into the lesion to obtain the biopsy.

Code 19100 “Biopsy of breast; needle core” is assigned for stereotactic breast biopsy. An additional; code of 76095 may be assigned to identify the radiological supervision and interpretation.

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Please refer your questions regarding this memo to Lisa Thompson, ART, Ext 3218, or Anita Meyers, ART, Ext 3217, at (205) 970-1600 or 1-800-760-4550.

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