

2010 PET Guided Breast Biopsy Reimbursement Fact Sheet

INSTRUCTIONS

Step 1

Find the location where the Mammotome Breast Biopsy System is used.

Step 2

Identify the billing information needed. For example, Facility Billing, Radiologist Billing or Surgeon Billing. Note the Table to use for that facility's billing information.

Step 3

Go to the Table that has the billing information you need.

Breast Center (Hospital-owned)

- Facility Billing: **Table 1**
- Radiologist Billing: **Table 2**

Imaging Center (Hospital-owned)

- Facility Billing: **Table 1**
- Radiologist Billing: **Table 2**

Surgery Department (Hospital Outpatient)

- Facility Billing: **Table 1**
- Surgeon Billing: **Table 2**

Imaging Center (Radiologist-owned):

- Radiologist Billing: **Table 3**

TABLE 1 - HOSPITAL OUTPATIENT DEPARTMENT (MEDICARE BILLING)^{1,2}

HCPCS/ CPT ³	DESCRIPTION	APC	STATUS INDICATOR	2010 PAYMENT ⁴
Diagnostic PET Breast Scan				
78811	Positron emission tomography (PET) imaging; limited area (eg, chest, head/neck)	308	S	\$1035
A9552	Fluorodeoxyglucose F-18 FDG, diagnostic, per study dose, up to 45 millicuries		N	\$0
Breast PET Guided Biopsy				
19103	Operating Room or Ambulatory Surgery or Clinic Services }	0037	T	\$1,042
19295	Tissue Marker (implantable)	-	N	\$0
78999	Unlisted misc procedure, diagnostic nuclear medicine	389		\$113
77055*	Unilateral Mammogram	-	A	\$48
AVERAGE PAYMENT Diagnostic PET Breast Scan				\$1035
AVERAGE PAYMENT Breast PET Guided Biopsy				\$1203

***NOTE:** Paid under 2010 MFS. If digital mammogram is performed, use code G0206: Diagnostic mammography, producing direct digital image, unilateral, all views .

Status Indicator:

- A Services furnished to a hospital outpatient that are paid under a fee schedule or payment system other than OPSS
- N Items and services packaged into APC rates
- S Significant procedure – not discounted when multiple
- T Significant procedure – multiple procedure reduction applies

TABLE 2 - RADIOLOGIST AND/OR SURGEON BILLING (PROCEDURE PERFORMED IN HOSPITAL OUTPATIENT DEPARTMENT, ASC OR IMAGING DEPARTMENT)

TABLE 2: CPT	DESCRIPTION	2010 MEDICARE FEE SCHEDULE PAYMENT ⁴
Diagnostic PET Breast Scan		
78811-26	Positron emission tomography (PET) imaging; limited area (eg, chest, head/neck)	\$82
Breast PET Guided Biopsy		
19103	Operating Room or Ambulatory Surgery or Clinic Services }	\$196
78999-26	Unlisted misc procedure, diagnostic nuclear medicine	\$0
77055-26*	Unilateral Mammogram	\$36
AVERAGE PAYMENT Diagnostic PET Breast Scan		\$82
AVERAGE PAYMENT Breast PET Guided Biopsy		\$232

***NOTE:** If digital mammogram is performed, use code G0206: Diagnostic mammography, producing direct digital image, unilateral, all views .

**TABLE 3 - RADIOLOGIST AND/OR SURGEON GLOBAL BILLING
(PROCEDURE PERFORMED IN PHYSICIAN-OWNED OFFICE, BREAST CENTER, IMAGING CENTER AND CLINIC)**

CPT	DESCRIPTION	2010 MEDICARE FEE SCHEDULE PAYMENT ³
	Diagnostic PET Breast Scan	
78811	Positron emission tomography (PET) imaging; limited area (eg, chest, head/neck)	\$82**
A9552	Fluorodeoxyglucose F-18 FDG, diagnostic, per study dose, up to 45 millicuries	\$0**
	Breast PET Guided Biopsy	
19103	Physician Office or Imaging Center or Clinic }	\$529
19295	Tissue Marker (implantable)	\$86
78999	Unlisted misc procedure, diagnostic nuclear medicine	\$0***
77055*	Unilateral Mammogram	\$84
	AVERAGE PAYMENT Diagnostic PET Breast Scan	\$82
	AVERAGE PAYMENT Breast PET Guided Biopsy	\$699
(Evaluation and Management Consultation & Subsequent Visit Codes may be used for office visits prior to & after breast biopsy.)		

***NOTE:** If digital mammogram is performed, use code G0206: Diagnostic mammography, producing direct digital image, unilateral, all views .

****NOTE:** National coverage decision is in place but payment is carrier specific and will vary .

*****NOTE:** Potential to crosswalk to 77021: Magnetic resonance guidance for needle placement radiological supervision and interpretation .

1 Federal Register, Vol. 74, No. 223, Friday, November 20, 2000/ Rules and Regulations; Hospital Outpatient Payment.

2 All Current Procedural Terminology (CPT) five-digit numeric codes, descriptions, numeric modifiers, instructions, guidelines and other material are copyright 2009 American Medical Association. All Rights Reserved.

3 Federal Register, November 24, 2006. Ambulatory Payment Classifications (APCs) are used by Medicare to pay hospital outpatient departments (eff. 1/1/07).

4 Federal Register, Vol. 74, No. 226, Wednesday, November 25, 2009/ Rules and Regulations. The 2010 Physician Reimbursement Conversion Factor = \$36.8729; Federal Register.

Physicians should refer to their Carrier Manual for their geographic payments.

The information contained in this document is provided to help you understand the reimbursement process. It is not intended to increase or maximize reimbursement by any payor. We strongly recommend that providers consult their payor organization with regard to local reimbursement policies. The information contained in this document is provided for information purposes only and represents no statement, promise or guarantee by Ethicon Endo-Surgery, Inc. concerning levels of reimbursement, payment or charge. Similarly, all CPT, HCPCS and ICD-9 codes are supplied for information purposes only and represent no statement, promise or guarantee by Ethicon Endo-Surgery, Inc. that these codes will be appropriate or that reimbursement will be made. ICD-9 is based on the official version of the World Health Organization's Ninth Revision, International Classification of Diseases. CPT codes and descriptions only are copyright 2009 American Medical Association. All Rights Reserved. CPT does not include fee schedules, relative values or related listings. The source for this information is the Centers for Medicare and Medicaid Services and various commercial payors. The content provided by the Centers for Medicare and Medicaid Services is updated frequently. It is the responsibility of the health services provider to confirm the appropriate coding required by their local Medicare carriers, fiscal intermediaries and commercial payors.