

Bone Needle Biopsy Procedures

2012 CODING AND REIMBURSEMENT GUIDE

Coverage, coding and payment for medical procedures and devices can be confusing. This guide was developed to assist with Medicare reporting and reimbursement when using Cook bone biopsy needles.

Coverage

Medicare carriers may issue local coverage decisions (LCDs) listing criteria that must be met prior to coverage. Physicians are urged to review these policies (<http://www.cms.hhs.gov/mcd/search.asp?>) and encouraged to contact their local carrier medical directors (www.cms.hhs.gov/apps/contacts) or commercial insurers to determine if a procedure is covered.

Coding

Bone Needle Biopsy Procedures

20220	Biopsy, bone, trocar, or needle; superficial (e.g., ilium, sternum, spinous process, ribs)
20225	Biopsy, bone, trocar, or needle; deep (e.g., vertebral body, femur)

Imaging Guidance Procedures

77002	Fluoroscopic guidance for needle placement (e.g., biopsy, aspiration, injection, localization device)
77012	Computed tomography guidance for needle placement (e.g., biopsy, aspiration, injection, localization device), radiological supervision and interpretation
77021	Magnetic resonance guidance for needle placement (e.g., for biopsy, needle aspiration, injection, or placement of localization device), radiological supervision and interpretation



Disclaimer: The information provided herein reflects Cook's understanding of the procedure(s) and/or device(s) from sources that may include, but are not limited to, the CPT, ICD-9 and MS-DRG coding systems; Medicare payment systems; commercially available coding guides; professional societies; and research conducted by independent coding and reimbursement consultants. This information should not be construed as authoritative. The entity billing Medicare and/or third party payers is solely responsible for the accuracy of the codes assigned to the services and items in the medical record. Cook does not, and should not, have access to medical records, and therefore cannot recommend codes for specific cases. When you are making coding decisions, we encourage you to seek input from the AMA, AHA, relevant medical societies, CMS, your local Medicare Administrative Contractor and other health plans to which you submit claims. Cook does not promote the off-label use of its devices.

Payment

2012 Reimbursement for Bone Biopsy in the Outpatient Setting

		Ambulatory Surgery Center	Outpatient Hospital		Physician Services	
CPT® Code	Procedure Description	Facility Fee (National Medicare Avg¹)	APC	Facility Fee (National Medicare Avg²)	Fee When Procedure Is Performed in Hospital or ASC (National Medicare Avg³)	Fee When Procedure Is Performed in Office (National Medicare Avg³)
20220	Biopsy, bone, trocar, or needle; superficial (e.g., ilium, sternum, spinous process, ribs)	\$333.98	0020	\$578.84	\$72.84	\$166.44
20225	Biopsy, bone, trocar, or needle; deep (e.g., vertebral body, femur)	\$686.45	0021	\$1,189.74	\$111.30	\$586.47
77002	Fluoroscopic guidance for needle placement (e.g., biopsy, aspiration, injection, localization device)	Imaging is included in allowance for bone biopsy procedure		Imaging is included in allowance for bone biopsy procedure	\$27.23	\$78.29
77012	Computed tomography guidance for needle placement (e.g., biopsy, aspiration, injection, localization device), radiological supervision and interpretation	Imaging is included in allowance for bone biopsy procedure		Imaging is included in allowance for bone biopsy procedure	\$55.48	\$147.04
77021	Magnetic resonance guidance for needle placement (e.g., for biopsy, needle aspiration, injection, or placement of localization device), radiological supervision and interpretation	Imaging is included in allowance for bone biopsy procedure		Imaging is included in allowance for bone biopsy procedure	\$74.20	\$416.96

1. 2012 Medicare Ambulatory Surgery Center Fee Schedule
2. 2012 Medicare Hospital Outpatient Prospective Payment System Fee Schedule
3. 2012 Medicare Physician Fee Schedule

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2012 physician fees for your local area can be found at the following CMS links:

http://www.cms.hhs.gov/PFSlookup/02_PFSsearch.asp#TopOfPage

or

<http://www.cms.hhs.gov/PhysicianFeeSched/PFSNPAF/list.asp#TopOfPage>



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