

Part B Insider (Multispecialty) Coding Alert

CPT 2010: 3 New Codes, 2 Deletions Bring Big Changes to Your Urodynamics Coding

The new codes could also change your reimbursement

While CPT 2010 brings a record low number of coding changes, urology coding, unfortunately, doesn't escape changes. In fact, urodynamics coding -- and income -- will change drastically as of Jan. 1.

You will have three new urodynamics codes to learn starting Jan. 1. CPT 2010 adds the following codes:

- 51727 -- Complex cystometrogram (ie, calibrated electronic equipment); with urethral pressure profile studies (ie, urethral closure pressure profile), any technique
- 51728 -- ... with voiding pressure studies (ie, bladder voiding pressure), any technique
- 51729 -- ... with voiding pressure studies (ie, bladder voiding pressure) and urethral pressure profile studies (ie, urethral closure pressure profile), any technique.

To make room for these three new codes, the AMA deleted urodynamics codes 51772 (Urethral pressure profile studies) and 51795 (Bladder voiding pressure studies). "To reduce costs and payments, CPT combined several of the urodynamic codes into one of several new codes," says **Michael A. Ferragamo, MD, FACS**, clinical assistant professor of urology at the State University of New York in Stony Brook. "So doctors will not be able to bill each individual urodynamic procedure as they have in the past."

"They are taking two to three codes usually billed for as separate services in urodynamics and combining them into one code," confirms **Paul Arnold, MD**, of Bay Urology in Safety Harbor, Fla. Keep an eye on +51797: The AMA deleted 51795 but left add-on code +51797 (Voiding pressure studies, intra-abdominal [ie, rectal, gastric, intraperitoneal]), points out **Alice Kater, CPC, PCS**, coder for Urology Associates of South Bend, Ind. "I'm wondering if they will allow us to attach it to 51728 and 51729." A parenthetical reference after +51797 answers that very question. It states: "Use 51797 in conjunction with 51728, 51729."

Switch From 6 Codes to Just 4

You'll use the new "combination code" 51727 when your urologist performs a complex cystometrogram and a urethral pressure profile (UPP), or a Valsalva leak point pressure, VLPP, Ferragamo explains.

New code 51729 is the "big change," Ferragamo says, because most urologists do perform a complete urodynamics workup. This code includes the complex cystometrogram, the bladder voiding pressure, the UPP or Valsalva leak point pressure study.

Old way: In the past, when your urologist performed a complete urodynamic profile, you could report up to six separate codes based on the studies your urologist performed: 51726, 51741, 51784, 51795, 51797, and 51772. Payers would have reimbursed you individually for the full group of the codes, Ferragamo says.

New way: Now you'll report just four codes: 51729 for the complex cystometrogram, UPP or Valsalva leak point pressure, and bladder voiding pressure; 51741 (Complex uroflowmetry [e.g., calibrated electronic equipment]) for the complex uroflow;

51784 (Electromyography studies of anal or urethral sphincter, other than needle, any technique) for the EMG; and

+51797 (Voiding pressure studies; intra-abdominal voiding pressure [AP] [rectal, gastric, intraperitoneal]) for the rectal (abdominal) pressure.

Calculate payment changes:

When payers recalculate 51741, 51784, and +51797, the reimbursement for those codes is likely to go down. Experts are predicting that CMS will reduce the practice expense portion of the reimbursement for the urodynamics codes.

"Most likely, reimbursement for this single code will be substantially less than the codes billed separately," Arnold says. "Therefore, urodynamics will be less profitable, since the costs of the equipment and disposables will continue to increase."

"It was anticipated that urologists would have seen a 17 percent drop in payments if urodynamic coding had remained the same; now it looks like the reimbursement for urodynamics studies will be slashed in half from what they were last year," Ferragamo adds. "That's a huge loss for urology practices."