Codify
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Part B Insider (Multispecialty) Coding Alert

Part B Coding Coach: Update Your UroLift® Coding or Face 2015 Denials

New codes 52441, +52442 will be your go-to answers.

You haven't had a code to accurately describe the work your urologist does when he uses the UroLift® system to treat a patient with benign prostatic hyperplasia (BPH) – that is, until now. You have two new codes for the insertion of permanent adjustable transprostatic implants. Experts agree that those codes are your UroLift® coding solution.

Read on to solidify your UroLift® coding know-how so you won't face denials or lost reimbursement now that the New Year has begun.

Focus on the Codes

On January 1, CPT® 2015 implemented the following two endoscopic codes for urology:

- 52441 – Cystourethroscopy, with insertion of permanent adjustable transprostatic implant; single implant
- +52442 – ... each additional permanent adjustable transprostatic implant (list separately in addition to code for primary procedure).

According to a press release on the NeoTract Website, "CPT® codes 52441 and +52442 were approved by the American Medical Association (AMA) to describe the UroLift transprostatic implant procedure, also known as Prostatic Urethral Lift (PUL)."

You will use 52441 for the first implant your urologist places, explains **Michael A. Ferragamo, MD, FACS**, clinical assistant professor of urology at the State University of New York at Stony Brook. "Then, use +52441 as an add-on code along with 52441 for any additional implants the urologist places," he adds.

Old way: Prior to Jan. 1, 2015, you would report this procedure using the unlisted code: 53899 (Unlisted procedure, urinary system). If your urologist performed the UroLift® procedure in a facility, the facility (for payment for the implants) reported C9739 (Cystourethroscopy, with insertion of transprostatic implant; 1 to 3 implants) for the first one to three implants and C9740 (... 4 or more implants) for any implants over three. In the office, you reported L8699 (Prosthetic implant, not otherwise specified) for the implants, Ferragamo says.

New way: Now, instead of 53899, if your urologist performs the procedure in the office, you will report 52441 and +52442 for the urologist's professional fee and for the cost of the implants. If your urologist performs the procedure in a facility, such as an ambulatory surgical center (ASC) or in a hospital as an inpatient or outpatient, you will use 52441 and +52442 for the professional fee, while the facility still bills for the implants using codes C9739 and C9740.

Note: You won't face an extended global surgical package with either 52441 or +52442. "Because of the minimally invasive nature of the treatment, the new codes have been assigned a zero-day global period," according to NeoTract.

Get to Know the Procedure

"When a patient has an enlarged prostate and BPH, and medications have failed, urologists often turn to surgical options. One option is the UroLift® system treatment.

The procedure is minimally invasive with no cutting or prostatic tissue removal, so it can typically be done under local anesthesia in the office or outpatient setting," Ferragamo explains.

During the procedure, the urologist inserts the UroLift® delivery device under cystoscopic visual control through the prostatic urethra. Using the device, the physician is able to place prostatic implants that pull open the prostatic urethra, reducing prostatic obstruction.

Tip: The procedure "does not involve the placement of a urethral stent, but it may involve placement of a postoperative Foley catheter for postoperative drainage in about a third of the cases," Ferragamo says.