

## Part B Insider (Multispecialty) Coding Alert

### UROLOGY: Reader Question--Turn To 2 Codes For Repeat TURPs

**Question:** Our urologist recently saw a patient who had a prostatic fossa with regrown prostatic tissue from prostate cancer. The doctor performed a cystoscopy and evacuation of multiple obstructing clots, followed by a transurethral resection of the prostate (TURP). I'm confused about which codes to report because the patient had a prior TURP procedure eight months before.

Georgia Subscriber

**Answer:** When your urologist performs a TURP on a patient who has had a previous TURP, you'll need to report either code 52620 (Transurethral resection; of residual obstructive tissue after 90 days postoperative) or 52630 (... of regrowth of obstructive tissue longer than one year postoperative)--instead of 52601 (Transurethral electro-surgical resection of prostate...).

"Code 52620 is for patients who have had a previous TURP over 90 days ago but less than one year ago, by any provider," says **Morgan Hause, CCS, CCS-P**, privacy and compliance officer for Urology of Indiana LLC, a 31-urologist practice in Indianapolis.

**Do this:** In the case above, you would report 52001 (Cystourethroscopy with irrigation and evacuation of multiple obstructing clots) for the cystoscopy and for the evacuation of clots. For the TURP procedure, which falls within one year of the patient's first TURP, you would use 52620 and you would list it first because it is the primary procedure. You then append modifier 59 (Distinct procedural service) to 52001 to unbundle it from 52620.

**Important:** Use 52001 only if the cystoscopy and clot removal were for multiple and obstructing clots, meaning that the patient was in clot retention and the evacuation of clots required sufficient time and effort to accomplish.

**Note:** Because CMS allows you to report 52601 (Transurethral electro-surgical resection of prostate...) only once in a patient's lifetime, you should not use that code even if a patient's prior TURP was several years ago or performed by another physician. You can't report 52601 for any TURP procedure conducted more than one year after the first; you need to use 52630.