

Outpatient Facility Coding Alert

CPT® 2014: Don't Miss These Changes to Breast Localization Procedure Coding

Here's your easy guide to knowing differences between guidance.

Accurately coding breast procedures in 2014 will require you to confirm the type of guidance your radiologist used when placing a localization device and to count each additional lesion. Read on for more instruction on the new codes and deletions for breast localization services.

Brush Up on Image Guidance

Having a handle on the types of imaging guidance used is a good first step to choosing the correct localization device code next year. **Kelly C. Loya, CPC-I, CHC, CPHT, CRMA**, Director of Reimbursement and Advisory Services, Altegra Health, Inc, shares a general explanation of each of these guidance techniques:

- Mammographic guidance: using radiation/X-ray image of breast tissue to verify the placement of the localization device near the targeted tissue.
- Stereotactic guidance: a special mammography machine using X-rays to help guide the provider's instruments to the site of the abnormal growth.
- Ultrasound guidance: high frequency sound waves (ultrasound) are sent and received by a machine, creating an image used to guide needle placement.
- Magnetic resonance guidance: use of powerful magnetic fields and radiofrequency pulses to create detailed images.

Count Each Additional Lesion

For an overview of the new CPT® codes describing the localization, number of lesions treated and guidance used, see the table below, provided by Loya:

Keep in mind: CPT® codes +19282, +19284, +19286 and +19288 are add-on codes and will only be reported in addition to the primary procedure code.

