Magnetic Resonance Imaging with Transrectal Ultrasound Fusion-Guided Prostate Biopsy

CPT® Assistant.

July 2018; Volume 28: Issue 7

Magnetic Resonance Imaging with Transrectal Ultrasound Fusion-Guided Prostate Biopsy

A new technique for performing prostate biopsy(ies) uses pre-biopsy magnetic resonance images (MRI), which is also known as multiparametric MRI, that are uploaded to a computer with special software that fuses the MRI images to real-time transrectal ultrasound (TRUS) images to guide the prostate biopsy. There is no single CPT code for this new technique (MRI-TRUS fusion-guided prostate biopsy), which has resulted in concerns about inaccurate reporting. As proper coding for MRI-TRUS fusion-guided prostate biopsy remains a matter of some debate, the American Urological Association addresses the appropriate reporting for this procedure through this article.

TRUS-guided Prostate Biopsy

Currently, three CPT codes can be reported for a standard TRUS-guided prostate biopsy (ie, without MRI fusion-guided technology): 55700 in the Male System section; and 76872 and 76942 in the Radiology section. See below for each listing code descriptor.

Prostate

Incision

55700
Biopsy, prostate; needle or punch, single or multiple, any approach

Diagnostic Ultrasound

Genitalia

76872
Ultrasound, transrectal;

Ultrasonic Guidance Procedures

76942
Ultrasonic guidance for needle placement (eg, biopsy, aspiration, injection, localization device), imaging supervision and interpretation

The procedure represented by code 76872 is performed as a diagnostic service to evaluate the size and symmetry of the prostate and/or to look for suspicious lesions. The procedures described by codes 55700 and 76942 are performed together to obtain prostate tissue for pathologic evaluation to determine if prostate cancer is present. Additional documentation is necessary to report codes 76872 and 76942, including a permanent image and written report in the medical record. A written report for the procedure represented by code 76942 must include a description of the prostate biopsy procedure. The diagnostic ultrasound (76872) should be a separate report, but the prostate biopsy and ultrasonic guidance for the biopsy can be combined into a single report. Note that in July 2016, the Centers for Medicare & Medicaid Services (CMS) determined that codes 76872 and 76942 can no longer be reported together for Medicare patients due to a Medicare National Correct Coding Initiative (NCCI) bundling edit.

MRI-TRUS Fusion-guided Prostate Biopsy

When an MRI is performed at a separate patient encounter, it is reported separately with code 72195, Magnetic resonance (eg, proton) imaging, pelvis; without contrast material(s); 72196, Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s); or 72197, Magnetic resonance (eg, proton) imaging, pelvis; without contrast material(s), followed by contrast material(s) and further sequences. The selected choice of the MRI code is based on whether contrast material is administered.

An MRI-TRUS fusion-guided prostate biopsy may require additional physician work compared to that of a standard TRUS-guided prostate biopsy. This includes building the three-dimensional model of the prostate via ultrasound, performing the targeted biopsies using the MRI image of the targets as a guide, or performing virtual biopsies in order to limit the number of real biopsies needed to hit the targets and complete a good set of template random biopsies.

There is no specific CPT code to report the software fusion of ultrasound and MRI images to identify the biopsy target(s). Given this, the correct CPT code to report this procedure is either code 76999, Unlisted ultrasound procedure (eg, diagnostic, interventional), or 76498, Unlisted magnetic resonance procedure, (eg, diagnostic, interventional), for the

additional work of fusing MRI and ultrasound images. Currently, only the codes for a standard TRUS-guided biopsy based on Medicare or commercial payers' guidance may be reported. Contact your third-party payer for specific reporting needs of MRI and ultrasound imaging fusion. It would not be correct to report either code 76376, 3D rendering with interpretation and reporting of computed tomography, magnetic resonance imaging, ultrasound, or other tomographic modality with image postprocessing under concurrent supervision; not requiring image postprocessing on an independent workstation, or 76377, 3D rendering with interpretation and reporting of computed tomography, magnetic resonance imaging, ultrasound, or other tomographic modality with image postprocessing under concurrent supervision; requiring image postprocessing on an independent workstation, for the fusion of ultrasound and MRI images.

Code 77021, Magnetic resonance guidance for needle placement (eg, for biopsy, needle aspiration, injection, or placement of localization device) radiological supervision and interpretation, is reported for an "in-bore" (in the MRI machine) needle placement. Therefore, code 77021 may not be reported as part of an MRI TRUS fusion-guided prostate biopsy procedure. Physicians should not report code 77021, even if there is an MRI equipment in the urology practice, unless they personally perform the "in-bore" needle placement. Additional information is also available at https://community.auanet.org/blogs/policy-brief/2017/10/18/what-is-mri-with-transrectal-ultrasound-fusion-guided-prostate-biopsy-and-how-is-it-coded.

