

# Reporting New Procedures for Hyperthermic Intraperitoneal Chemotherapy

**CPT® Assistant.**

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For the CPT 2024 code set, two new codes (96547, 96548) have been established in the Chemotherapy and Other Highly Complex Drug or Highly Complex Biologic Agent Administration subsection of the Medicine section to describe hyperthermic intraperitoneal chemotherapy (HIPEC). This procedure includes intraoperative perfusion of a heated chemotherapy agent into the abdominal cavity through catheters. In addition, code 96446 has been revised, and guidelines and parentheticals added. This article provides an overview of these new codes and their appropriate usage.

## **New Guidelines**

New guidelines have been added to this subsection to clarify and describe the work that is and is not included in the HIPEC procedure when performed. The introductory language provides information that is necessary to appropriately interpret and report the procedures.

## **Chemotherapy and Other Highly Complex Drug or Highly Complex Biologic Agent Administration**

### **Other Injection and Infusion Services**

Codes 96547, 96548 describe hyperthermic intraperitoneal chemotherapy (HIPEC) procedure that includes intraoperative perfusion of a heated

chemotherapy agent into the abdominal cavity through catheters. The HIPEC procedure is distinct from the primary procedure and may include chemotherapy agent selection, confirmation of perfusion equipment settings for chemotherapy agent delivery, additional incision(s) for catheter and temperature probe placement, perfusion supervision and manual agitation of the heated chemotherapy agent in the abdominal cavity during chemotherapy agent dwell time, irrigation of the chemotherapy agent, closure of wounds related to HIPEC, and documentation of the chemotherapy agent and HIPEC procedure in the medical record. Codes 96547, 96548 are add-on codes and do not include the typical preoperative, intraoperative, and postoperative work related to the primary procedure. Code 96547 is reported for the first 60 minutes of the HIPEC procedure and 96548 is reported for each additional 30 minutes. 

  **96547** Intraoperative hyperthermic intraperitoneal chemotherapy (HIPEC) procedure, including separate incision(s) and closure, when performed; first 60 minutes (List separately in addition to code for primary procedure)

  **96548** each additional 30 minutes (List separately in addition to code for primary procedure)

 (Use 96547, 96548 in conjunction with 38100, 38101, 38102, 38120, 43611, 43620, 43621, 43622, 43631, 43632, 43633, 43634, 44010, 44015, 44110, 44111, 44120, 44121, 44125, 44130, 44139, 44140, 44141, 44143, 44144, 44145, 44146, 44147, 44150, 44151, 44155, 44156, 44157, 44158, 44160, 44202, 44203, 44204, 44207, 44213, 44227, 47001, 47100, 48140, 48145, 48152, 48155, 49000, 49010, 49203, 49204, 49205, 49320, 58200, 58210, 58575, 58940, 58943, 58950, 58951, 58952, 58953, 58954, 58956, 58957, 58958, 58960) 

#### **Intent and Use of Add-on Codes 96547 and 96548**

The role of intraoperative HIPEC has become well accepted for the treatment of peritoneal, mesenteric, and retroperitoneal disease in properly selected patients with, for example, appendiceal neoplasms, colorectal cancer, and peritoneal mesothelioma. Therefore, HIPEC has sufficient utilization and literature to warrant Category I code assignment instead of utilizing an unlisted code or modifier 22, Increased Procedural Services, appended to a primary procedure code.

New add-on codes 96547 and 96548 have been established to report the total time of the HIPEC procedure. The introductory guidelines preceding codes 96547 and 96548 define the face-to-face and non-face-to-face work that is and is not included in the procedure when performed. Notably, these codes do not include the typical preoperative, intraoperative, and postoperative work related to the primary procedure(s) represented by the listed codes in the

parenthetical note following code 96548. Only the total time related to the HIPEC procedure as defined in the guidelines may be reported with codes 96547 and 96548.

Codes 96547 and 96548 are time-based codes and, therefore, may not be reported until the midpoint of the time increment in the code descriptors has been reached. Specifically, code 96547 may not be reported until at least 31 minutes have been reached, unless the procedure is discontinued (eg, the patient becomes unstable or has an allergic reaction to the chemotherapy agent), in which case modifier 53, Discontinued Procedure, should be appended to code 96547. In addition, code 96548 may only be reported after an additional 16 minutes of the HIPEC procedure above the initial 60 minutes reported with code 96547 is attained (ie, 76 minutes of total time).

### **Revised Code 96446**

The work described by the HIPEC procedure is different than the work described in code 96446 in which a port and a catheter are implanted for subsequent chemotherapy that is typically provided in an office/outpatient setting. To clarify this distinction, code 96446 has been revised to indicate that chemotherapy administration is via an “implanted” port or catheter.

**96446**      Chemotherapy administration into the peritoneal cavity via implanted port or catheter

Cross-reference parenthetical notes have also been added in the Radiology and Medicine sections following codes 77605 and 96446 to direct users to codes 96547 and 96548 for reporting HIPEC procedures.

The following clinical examples and procedural descriptions reflect typical clinical scenarios for which these new codes would be appropriately reported.

### **Clinical Example (96547)**

A HIPEC procedure that required 60 minutes is performed during the same operative session after the completion of a peritoneal tumor resection and cytoreduction. [Note: This is an add-on code. Only consider the additional work related to the first 60 minutes of the HIPEC procedure.]

### **Description of Procedure (96547)**

After completion of the resectional component of the primary procedure, place inflow and outflow catheters. Secure catheters to the skin with sutures.

Close the skin of the abdominal incision from the primary procedure over the viscera and catheters with monofilament sutures. Place patient on a cooling pad, connect the catheters to the infusion pump, and deliver heated chemotherapy into the peritoneal space. Constant external manual agitation is carried out by the surgeon throughout the chemotherapy dwell time. Additional chemotherapy is administered during this process as dictated by protocol.

Following completion of HIPEC and dwell time, reopen the abdomen by removing the abdominal closure sutures. Remove the abdominal infusion catheters. Thoroughly inspect the abdomen and viscera. Inspect each of the catheter insertion sites, and close the catheter skin incisions as appropriate. Patient then undergoes completion of the separately reported primary procedure.

**Clinical Example (96548)**

An additional 30 minutes of HIPEC is performed after a peritoneal tumor resection and cytoreduction and a 60-minute HIPEC procedure during the same operative session. [Note: This is an add-on code. Only consider the additional work related to the additional 30 minutes of HIPEC.]

**Description of Procedure (96548)**

Code 96548 is reported for each additional 30 minutes of procedure time for HIPEC after the first 60 minutes, which is separately reported with code 96547.