Empire BlueCross BlueShield
Professional Reimbursement Policy

Subject: Surgical Pathology and Related Prostate Needle Biopsy

NY Policy: 0044  Effective: 01/01/2015 – 01/31/2016

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DESCRIPTION
Surgical pathology involves the gross and microscopic examination by surgical (e.g., dermatologists) and non-surgical providers (e.g., pathologists) of surgical or biopsy specimens.

The practice of surgical pathology allows for definitive diagnosis of disease (or lack thereof) in cases where tissue is surgically removed from a patient. This is usually performed by a combination of gross (i.e., macroscopic) and histologic (i.e., microscopic) examination of the tissue, and may involve evaluations of molecular properties of the tissue by immunohistochemistry or other laboratory tests.

This policy applies to all professional providers billing Current Procedural Terminology (CPT®) or Healthcare Common Procedure Coding System (HCPCS Level II) codes on a Form CMS-1500 for multiple surgical pathology services for prostate needle biopsy.

POLICY
A prostate needle biopsy commonly occurs based on the detection of elevated prostate-specific antigen (PSA) performed as part of prostate cancer screening. Typically, the initial biopsy consists of a small number of core specimens taken of the prostate. Individuals with an elevated PSA level but with a normal initial biopsy often undergo repeat biopsy evaluation.

Prostate saturation biopsy, also referred to as prostate saturation needle biopsy, involves taking numerous samples of prostate tissue, typically 20 to 40 cores, in order to increase the likelihood of detecting prostate cancer in a subgroup of high-risk individuals in whom previous conventional prostate biopsies have been negative.

CPT code 88305 describes level IV surgical pathology, gross and microscopic examination. When the operating provider or pathologist examines multiple, separate tissue samples on the same date of service for the same patient, the procedure code is reported using either multiple units or line items and may include any appropriate modifier(s). In addition to CPT coding for prostate needle biopsy, the Centers for Medicare & Medicaid Services (CMS) lists HCPCS code G0416 for gross and microscopic examinations, for prostate needle biopsy, any method.
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The Health Plan applies a frequency limit of nine units per date of service for CPT code 88305 when reported with a prostate diagnosis. Therefore, when CPT code 88305 is reported in excess of nine units on the same date of service for the same patient by the same provider with a prostate diagnosis, the code will not be eligible for reimbursement. For prostate needle biopsy specimens greater than nine units report HCPCS code G0416 with one unit regardless of the number of specimens.

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