

# Deciphering Brachytherapy Coding and Documentation

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# Disclaimer

This presentation was prepared as a tool to assist attendees in learning about documentation, charge capture and billing processes. It is not intended to affect clinical treatment patterns. While reasonable efforts have been made to assure the accuracy of the information within these pages, the responsibility for correct documentation and correct submission of claims and response to remittance advice lies with the provider of the services. The material provided is for informational purposes only.

Efforts have been made to ensure the information within this document was accurate on the date of presentation. Reimbursement policies vary from insurer to insurer and the policies of the same payor may vary within different U.S. regions. All policies should be verified to ensure compliance.

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# Objectives of this Presentation

- Discuss the Process of Care for Brachytherapy
- Educate Regarding Proper Coding Including Recent Coding Changes
- Provide Guidance on Appropriate Documentation
- Emphasize Utilization of Current Reference Materials
- Outline Common Brachytherapy Processes



# Authoritative Guidance



- Federal Register
- Centers for Medicare & Medicaid Services (CMS)
  - National & Local Coverage Determinations (NCDs & LCDs)
  - Manuals & Transmittals
  - National Correct Coding Initiative (NCCI)
- American Medical Association & CPT<sup>®</sup> Manual
- OIG Compliance Standards
- Commercial Payor Policies



# Retired Brachytherapy LCDs

- Policies remain active when there is evidence of significant problems with performance, billing and/or coding
- Correct claims submission is expected with or without an active LCD



## Why are LCDs Retired?

LCDs are retired due to lack of evidence of current problems, or in some cases because the material is addressed by a National Coverage Determination (NCD), a coverage provision in a CMS interpretative manual or an article. Most LCDs are not retired because they are incorrect. The guidance in the retired LCD may be helpful in assessing medical necessity. Where providers have adjusted their billing and coding practices to correspond to the guidance in LCDs, they will want to be very careful in departing from these practices just because the LCD is retired.



# Brachytherapy Reminders

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## For All Brachytherapy Procedures

Practice patterns differ from physician to physician

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Process of care differs from each treatment site

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Billing templates are NOT recommended

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Bill only for work performed & documented

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Codes vary from HDR & LDR

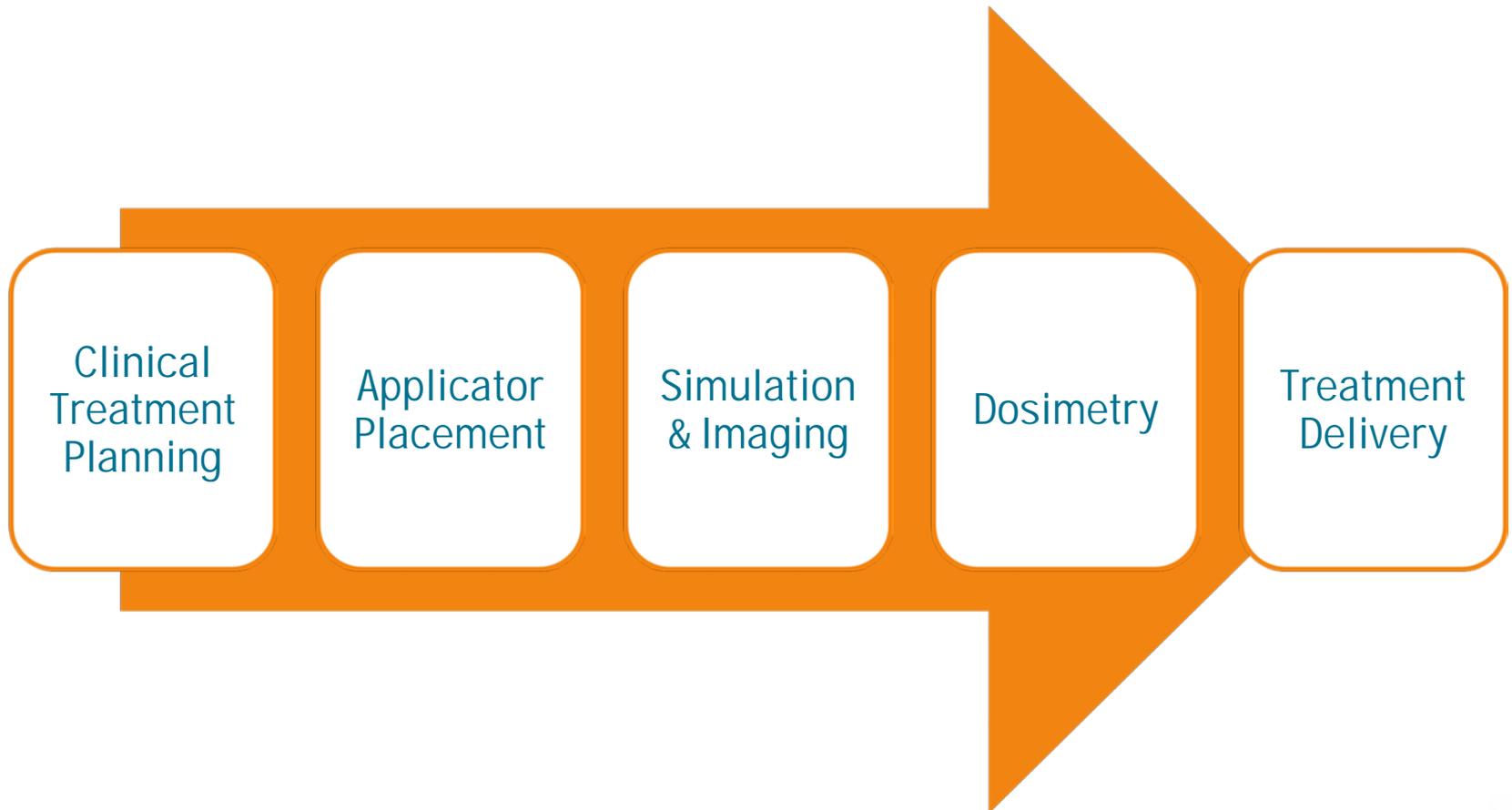
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A "Procedure Note" or an "Operative Note" is necessary for all brachytherapy procedures

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# Brachytherapy Process of Care



# Clinical Treatment Planning



## Professional only

- **77261** Simple planning requires a single treatment area of interest encompassed in a single port or simple parallel opposed ports with simple or no blocking.
- **77262** Intermediate planning requires three or more converging ports, two separate treatment areas, multiple blocks, or special time dose constraints.
- **77263** Complex planning requires highly complex blocking, custom shielding blocks, tangential ports, special wedges or compensators, three or more separate treatment areas, rotational or special beam considerations, combination of therapeutic modalities.



# Utilization Guidelines

- Billable once per course
- May be billable more than once if performed by a separate physician at a different location
- Applicable for all treatment techniques
- Documentation must support date of service and complexity

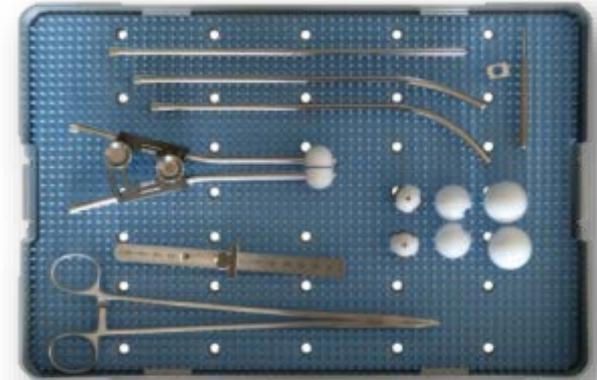


- **Treatment planning (CPT code 77263)**

Brachytherapy (other than coronary, which is discussed in another policy) is routinely designated complex (77263) because it requires complex treatment volume design, dose levels near normal tissue tolerance, analysis or special tests, complex fractionation, or delivery concurrent with other therapeutic modalities or treatment of previously irradiated tissues. If brachytherapy is used as an adjunct to external beam therapy, a single complex treatment planning code is used to encompass both modalities, unless provided by a different provider in a different place of service.



# Applicator Placement



Brachytherapy may be performed concomitantly with surgical resection or in conjunction with procedures such as endoscopy or angioplasty, which are required to achieve access to the site of the disease. There are two distinct phases required to complete the process known as brachytherapy:

1. The insertion or placement of non-radioactive applicators or conduits that receive or transmit the radioactive material into the body, and
2. The loading of the radioactive material (the active or therapeutic agent) into the conduits or directly into tissue.

*May be performed by the radiation oncologist or in collaboration with another physician*



# Placement Codes

Code	Descriptor
19296	Placement of radiotherapy after loading balloon catheter into the breast for interstitial radioelement application following partial mastectomy, includes image guidance; on date separate from partial mastectomy
19297	concurrent with partial mastectomy
19298	Placement of radiotherapy after loading brachytherapy catheters (multiple tube & button type) into the breast for interstitial radioelement application following (at the time of or subsequent to) partial mastectomy, includes image guidance
20555	Placement of needles or catheters into muscle &/or soft tissue for subsequent interstitial radioelement application (at the time of or subsequent to the procedure)
31643	Bronchoscopy with placement of catheter(s) for intracavitary radioelement application
41019	Placement of needles, catheters, or other device(s) into the head and/or neck region (percutaneous, transoral, or transnasal) for subsequent interstitial radioelement application

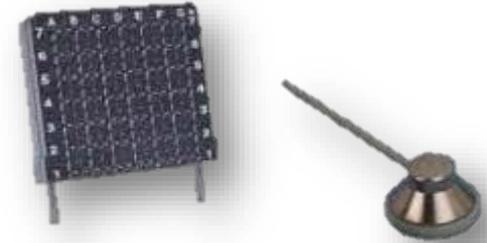


# Placement Codes Cont.

Code	Descriptor
43241	Endoscopy with transendoscopic intraluminal tube or catheter placement
55875	Transperineal placement of needles or catheters into prostate for interstitial radioelement application, with or without cystoscopy
55920	Placement of needles or catheters into pelvic organs &/or genitalia (except prostate) for subsequent interstitial radioelement application
57155	Insertion of uterine tandem and/or ovoids for clinical brachytherapy
57156	Insertion of a vaginal radiation afterloading apparatus for clinical brachytherapy
58346	Insertion of Heyman capsules for clinical brachytherapy
C9725	Placement of endorectal Intracavitary application for high intensity brachytherapy
0190T	Placement of intraocular source



# Treatment Devices



- Billable once per course
- Typically billed as simple (CPT<sup>®</sup> 77332); however, there are instances where complex would be appropriate
- Vaginal cylinder and Tandem & Ovoid (Ring) included in placement code PE for MPFS

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## • Treatment devices (77332-77334)

Treatment devices may include the use of certain templates, molds, or other apparatus that may be required for specific clinical circumstances. Pre-manufactured, commercially available devices are simple devices.



# Brachytherapy Simulations

- Typically performed for:
  - Acquisition of imaging and planning information
  - Verification of source placement
  - Confirmation of applicator placement prior to treatment

Coding guidelines vary depending on the procedure performed



# Simulation

## Professional & Technical

**77280** Simple simulation of a single treatment area

**77285** Intermediate simulation two separate treatment areas

**77290** Complex simulation of three or more treatment areas, particle beam, rotation or arc therapy, complex or custom blocking, brachytherapy simulation, hyperthermia probe verification, or any use of contrast material



# CPT<sup>®</sup> Assistant

*"The process of measuring the anatomy and placing marks on the skin or immobilization device to help the team direct the radiation safely and exactly to the intended location is called "simulation." For example, in code 77290, brachytherapy simulation is the complex process of making position adjustments and for performing dose calculations (code 77290). Nonradioactive "dummy" sources are used to geographically define the "eventual position" of the radioactive sources in temporary implant devices. Code 77280 is used to report the simple simulation for subsequent "check" verification simulations during the course of radiotherapy with temporary implants to confirm or correct applicator position."*



# NCCI Policy Manual

## Chapter 9

9. Partial breast high dose rate brachytherapy may be performed two times a day. The first therapeutic radiology simulation for the course of therapy may be complex and reported as CPT code 77290. However, subsequent simulations during the course of therapy should be reported as CPT code 77280.

<https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Internet-Only-Manuals-IOMs-Items/CMS018912.html?DLPage=1&DLSort=0&DLSortDir=ascending>



# Brachytherapy Isodose Planning

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Professional  
and  
Technical

**77316** Brachytherapy isodose plan; simple (calculation(s) made from 1 to 4 sources, or remote afterloading brachytherapy, 1 channel), **includes basic dosimetry calculation(s)**

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**77317** Intermediate (calculation(s) made from 5 to 10 sources, or remote afterloading brachytherapy, 2-12 channels), **includes basic dosimetry calculation(s)**

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**77318** Complex (calculation(s) made from over 10 sources, or remote afterloading brachytherapy, over 12 channels), **includes basic dosimetry calculation(s)**

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# 3D Plan CPT® 77295

- 3D planning may be applicable based on the plan performed
  - Standard requirements apply
  - Billed instead of the brachytherapy isodose plan

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## • Simulation (77280-77295)

For brachytherapy, simulation may require the use of imaging examinations of the implanted sources or applicator(s) containing dummy (i.e., non-radioactive) sources. These films of the implanted sources are used to develop isodose curves and other dosimetry, and may be billed separately, when appropriate. CPT code 77295 may be billed as part of the brachytherapy process when the needed parameters are included (i.e. 3D volume reconstruction with dose volume histogram for target and normal tissues, etc). Code 77295 precludes the use of codes 77316-77318 for the same treatment volume.



# Treatment Delivery (LDR)



Professional and Technical



# Code Revision

- **77778** Interstitial radiation source application, complex, includes supervision, handling, loading of radiation source, when performed
  - Includes the work of CPT<sup>®</sup> code 77790; therefore, not separately reportable
  - Use CPT<sup>®</sup> code 77799 (Unlisted procedure, clinical brachytherapy) to report interstitial LDR procedures that do not meet the level requirement for 77778, previously reported with codes 77776 and 77777



# Treatment Delivery (HDR)

Professional and Technical

HCPCS Code	Descriptor
77767	Remote afterloading high dose rate radionuclide skin surface brachytherapy, includes basic dosimetry, when performed; lesion diameter up to 2.0 cm or 1 channel
77768	Remote afterloading high dose rate radionuclide skin surface brachytherapy, includes basic dosimetry, when performed; lesion diameter over 2.0 cm and 2 or more channels, or multiple lesions
77770	Remote afterloading high dose rate radionuclide interstitial or intracavitary brachytherapy, includes basic dosimetry, when performed; 1 channel
77771	Remote afterloading high dose rate radionuclide interstitial or intracavitary brachytherapy, includes basic dosimetry, when performed; 2-12 channels
77772	Remote afterloading high dose rate radionuclide interstitial or intracavitary brachytherapy, includes basic dosimetry, when performed; over 12 channels



# Electronic Brachytherapy

## Technical Only

- **0394T** High dose rate electronic brachytherapy, **skin surface application**, per fraction, includes basic dosimetry, when performed
- **0395T** High dose rate electronic brachytherapy, **interstitial or intracavitary treatment**, per fraction, includes basic dosimetry, when performed

When reporting codes 0394T or 0395T the following codes cannot also be reported: 77261-77263, 77300, 77306 – 77307, 77316 – 77318, 77332 – 77334, 77336, 77427, 77431, 77432, 77435, 77469, 77470, 77499, 77761 – 77763, 77770 – 77772, 77778 and 77789



Code	Brachytherapy Source (or Radiopharmaceutical)
C1716	Gold 198, per source
C1717	High dose rate iridium 192, per source
C1719	Non-high dose rate iridium 192, per source
C2616	Non-stranded, Yttrium-90, per source
C2634	Non-stranded, high activity, Iodine 125, >1.01 mCi, per source
C2635	Non-stranded, high activity, palladium-103, >2.2 mCi, per source
C2636	Linear source, non-stranded, palladium-103, per 1mm
C2637	Non-stranded, ytterbium-169, per source
C2638	Stranded, Iodine-125, per source
C2639	Non-stranded, Iodine-125, per source
C2640	Stranded, palladium-103, per source
C2641	Non-stranded, palladium-103, per source
C2642	Stranded, Cesium-131, per source
C2643	Non-stranded, Cesium-131, per source
C2644	Brachytherapy source, cesium-131 chloride solution, per millicurie
C2698	Brachytherapy source, stranded, not otherwise specified, per source
C2699	Brachytherapy src, non-stranded, not otherwise specified, per src



# Supplies & Miscellaneous

Code	Descriptor
C1715	Brachytherapy needle
C1728	Catheter, brachytherapy seed administration
Q3001	Radioelement for brachytherapy; any type, each
19499	Unlisted procedure, breast
53899	Unlisted procedure, urinary system
55899	Unlisted procedure, male genital system
58999	Unlisted procedure, female genital system (non-obstetrical)
77799	Unlisted procedure, clinical brachytherapy



# Physics Services



## Medical Physics Services (77336, 77370 and 77331)

CPT code 77336 is a "weekly code;" however, for radiation therapy treatment that is not administered in five weekly fractions (such as brachytherapy) or for a course of radiation therapy consisting of one or two fractions, code 77336 may be reported.

CPT code 77370 may be justified for the complex interrelationships of electron and photon ports and complex dosimetric considerations in brachytherapy, including high dose rate remote afterloader applications, intravascular brachytherapy treatments, and interstitial radioactive seed implantation.

CPT code 77331 is Special dosimetry (e.g. TLD, microdosimetry) when prescribed by a physician. In some instances, measurement of the delivered radiation dose may be used to guide and determine the dose to selected positions within or around the implant treatment volume. (This can be very helpful, especially in difficult case such as retreatment using brachytherapy in previously irradiated areas.)



# Continuing Medical Physics

Technical Only

**77336** Continuing medical physics consultation, including assessment of treatment parameters, quality assurance of dose delivery, and review of patient treatment documentation in support of the radiation oncologist, reported per week of therapy

Utilization Guidelines:

- Billable once per five fraction period
- During final treatment week three or more fractions are required
- Documentation required to support physics review and parameters checked



# Special Physics Consult

Technical Only

**77370** Special medical radiation physics consultation

Utilization Guidelines:

- Must be ordered by a physician for a specific reason
- Report by the physicist addressing the specific request
- Physician signature on the report is required
- Billed on the date of the report



# Physician Management

## NCCI Policy Manual Chapter 9

4. Brachytherapy (CPT codes 77750-77790) includes radiation treatment management (CPT codes 77427 and 77431) and continuing medical physics consultation (CPT code 77336). CPT codes 77427, 77431, and 77336 should not in general be reported separately with brachytherapy services. However, if a patient receives external beam radiation treatment and brachytherapy treatment during the same time period, radiation treatment management and continuing medical physics consultation may be reported for the external beam radiation treatments. Additionally, if a patient has multi-step brachytherapy, it may be appropriate to separately report continuing medical physics consultation with the brachytherapy.



# Documentation Requirements

- Detailed procedure note for each fraction
  - Site
  - Applicator placement
  - Imaging and data acquired
  - Planning
  - Dose, treatment time, number of channels, needles or sources
  - Completion and discharge

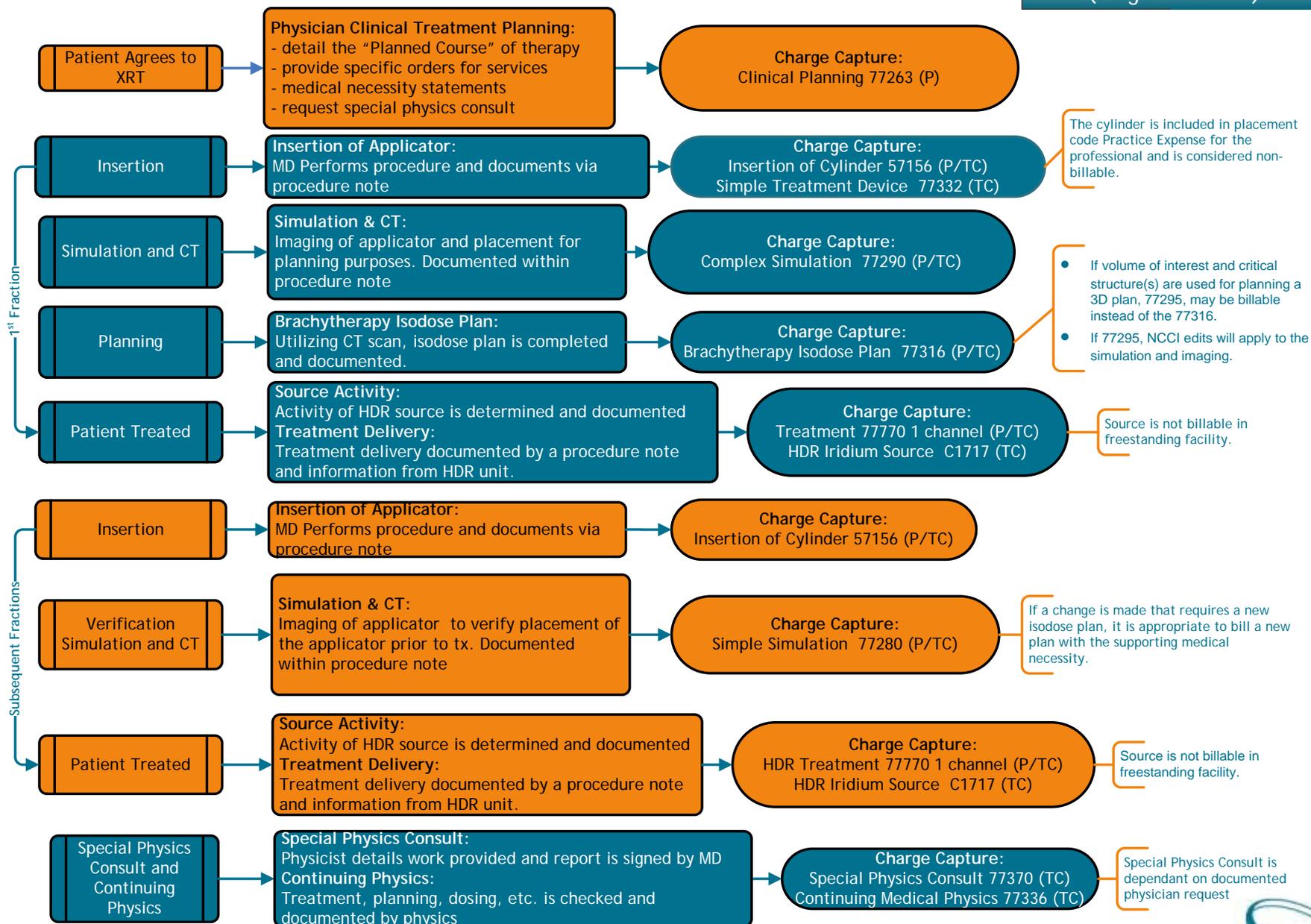


# Brachytherapy Diagrams

- Examples include:
  - HDR Cylinder
  - HDR Accelerated Partial Breast Irradiation (APBI)
  - LDR Prostate Seed Implant
- Intended to demonstrate coding differences and required documentation for common brachytherapy techniques
- Additional codes may apply based on practice patterns, setting, supporting documentation and medical necessity

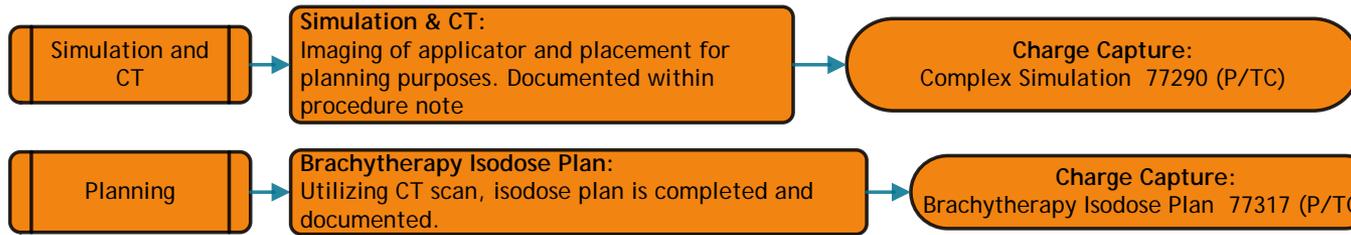


# GYN Cylinder HDR (Single Channel)



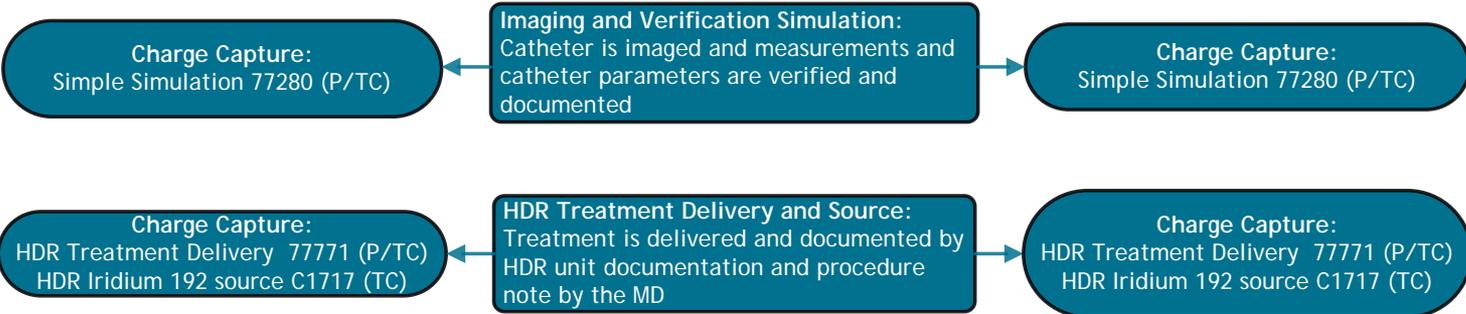


Applicator Insertion



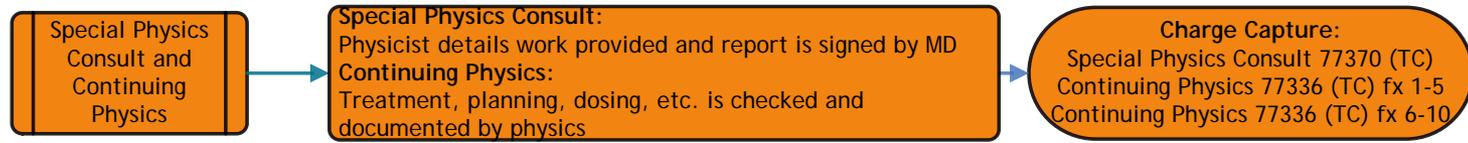
- If volume of interest and critical structure(s) are used for planning a 3D plan, 77295, may be billable instead of the 77317.
- If 77295, NCCI edits will apply to the simulation.
- If planning and treatment completed on same date, additional NCCI edits will apply.

AM Fractions 1-10 PM



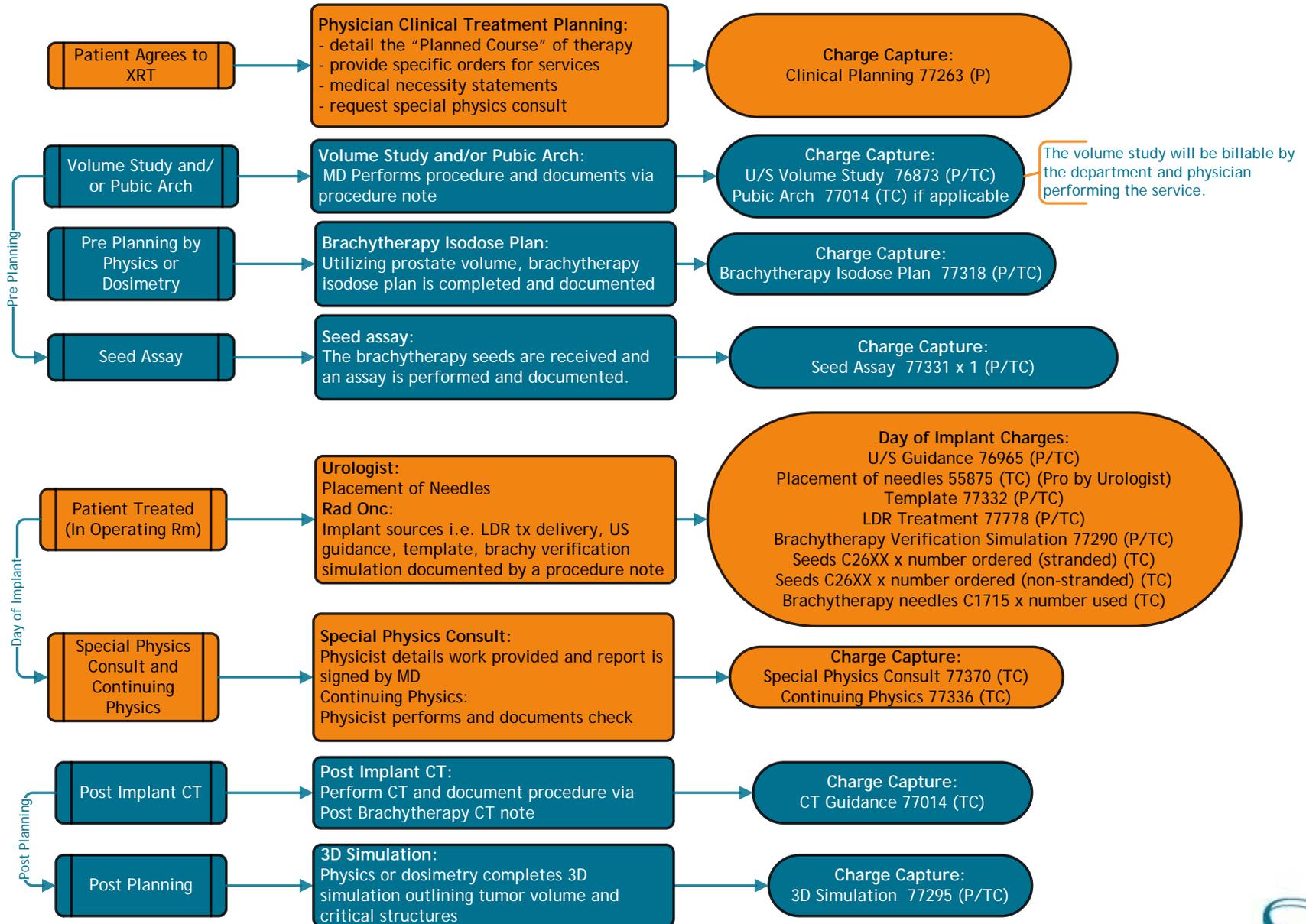
Source is not billable in freestanding facility.

Additional Codes



Special Physics Consult is dependant on documented physician request





# QUESTIONS

