

# MammoSite - Catheter Implant

## 2009 CODING & REIMBURSEMENT GUIDE

**Facility Payment**  
Location: Hospital Outpatient

### Outpatient Hospital

CPT® CODE <sup>2</sup>	DESCRIPTION	APC' CATEGORY	2009 NATIONAL AVERAGE MEDICARE RATE <sup>1</sup>
19296	Placement of radiotherapy afterloading expandable catheter (single or multichannel) into the breast for interstitial radioelement application following partial mastectomy, includes imaging guidance; on date separate from partial mastectomy.	0648	\$3,971.24
19297	Placement of radiotherapy afterloading expandable catheter(single or multichannel) into the breast for interstitial radioelement application following partial mastectomy, includes imaging guidance; concurrent with partial mastectomy	0648	\$3,971.24
19499	Unlisted procedure breast (For potential use, placement of Cavity Evaluation Device)	0028	\$1,419.28

### Ambulatory Surgery Center

CPT® CODE <sup>2</sup>	DESCRIPTION	APC' CATEGORY	2009 NATIONAL AVERAGE MEDICARE RATE <sup>1</sup>
19296	Placement of radiotherapy afterloading expandable catheter (single or multichannel) into the breast for interstitial radioelement application following partial mastectomy, includes imaging guidance; on date separate from partial mastectomy.	0648	\$1,866.05
19297	Placement of radiotherapy afterloading expandable catheter (single or multichannel) into the breast for interstitial radioelement application following partial mastectomy, includes imaging guidance; concurrent with partial mastectomy	0648	\$1,866.05

### Medical and Surgical Supplies

CPT® CODE <sup>2</sup>	DESCRIPTION	APC'	2009 NATIONAL AVERAGE MEDICARE RATE <sup>1</sup>
A4550 or 99070	Supplies and materials (except spectacles), provided by the physician over and above those usually included with the office visit or other services rendered (list drugs, trays, supplies or materials provided)	Status Indicator: B	Not allowed or paid under OPPS. May be subject to review for payment by commercial payor/health plan.

### Outpatient Devices

CPT® CODE <sup>2</sup>	DESCRIPTION	APC'	2009 NATIONAL AVERAGE MEDICARE RATE <sup>1</sup>
C1728	Catheter, brachytherapy seed administration	Status Indicator: N	Services packaged into another service or APC group

1. Ambulatory Payment Classification (APC) and the Ambulatory Surgical Center payment rates are taken from the Medicare Hospital Outpatient Prospective Payment System final rule published in the Federal Register on October 30, 2008.

2. American Medical Association, CPT® 2007, Professional Edition and HCPCS 2007, Nineteenth edition.

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