

Coding for Robotic-Assisted Surgery

Introduction

Robotic-assisted surgery refers to technology that allows the surgeon to operate from a console, remote from the patient and not in sterility. Many hospitals have adopted this technology in the fields of: Urology, Gynecology (Oncology, Urogynecology and General Gynecology), and Colorectal Surgery.

In 2007, the American Medical Association (AMA) CPT Editorial Panel determined that there was no need for a new CPT code or unique modifier for surgical procedures performed using robotic assistance. Physicians are advised to use the CPT code that accurately describes the basic surgical procedure. Use of modifier 22 is not appropriate if the sole use of the modifier is to report and bill for the use of robotic assistance.

CPT codes and RVU table from 2018 National Physician Fee Schedule:

CPT Code	Description	Total RVU's (Work)	Total RVU's (Facility)
58541	Laparoscopic Supracervical Hysterectomy, uterus	12.29	20.24
58542	Laparoscopic Supracervical Hysterectomy with tubes/ ovaries, uterus < 250g	14.16	23.09
58543	Laparoscopic Supracervical Hysterectomy, uterus > 250g	14.39	23.37

Last Updated by the AUGS Coding and Reimbursement Committee in January 2018

Disclaimer: The Coding and Reimbursement Committee of the American Urogynecologic Society (AUGS) assists members with the application of governmental regulations and guidelines regarding terminology and CPT/ICD coding in urogynecologic practice. Such information is intended to assist with the coding process as required by governmental regulation and should not be construed as policy sanctioned by AUGS. AUGS disclaims liability for actions or consequences related to any of the information provided. AUGS does not endorse the diagnostic protocol or treatment plan designed by the provider.



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CPT Code	Description	Total RVU's (Work)	Total RVU's (Facility)
58544	Laparoscopic supracervical Hysterectomy with tubes/ovaries, uterus > 250g	15.60	25.43
58570	Total Laparoscopic hysterectomy, uterus < 250g	13.36	22.13
58571	Total Laparoscopic hysterectomy with tubes/ovaries, uterus < 250g	15.00	25.56
58572	Total Laparoscopic hysterectomy, uterus > 250g	17.71	29.11
58573	Total Laparoscopic hysterectomy with tubes/ovaries, uterus > 250g	20.79	34.70
51990	Laparoscopic Urethral suspension for stress incontinence (Burch)	13.36	21.71

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CPT Code	Description	Total RVU's (Work)	Total RVU's (Facility)
57426	Laparoscopic Revision (including removal) of prosthetic vaginal graft	14.30	23.77
57425	Laparoscopic Sacrocolpopexy	17.03	27.50
57423	Laparoscopic Paravaginal defect repair (including repair of cystocele, if performed)	16.08	25.85

Billing Tips:

Surgical procedures completed with robotic assistance should be billed using existing CPT codes for laparoscopic surgical procedures. Coverage policies for laparoscopic surgical procedures also apply.

Documentation:

HCPCS code S2900 – Surgical techniques requiring use of robotic surgical system (listed separately in addition to code for primary procedure), was effective July 2005 and can be used by your hospital to report the use of robotic assistance. However, it is a non-reimbursable code under Medicare and may not be recognized as a separately billable and payable service by a majority of leading commercial payers

Coding Pitfalls:

Providers need to be aware that, since there are no unique codes for robotic procedures, the additional time and effort that is spent setting up, docking and un-docking the robot are not reimbursed additionally.

Providers also need to be aware that recent NCCI edits have bundled cystoscopy and other procedures commonly performed concurrent gynecological laparoscopic procedures, and that these procedures are no longer separately reimbursable, even if they are clinically indicated.

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References :

- CPT is a registered trademark of the American Medical Association, Copyright 2018
- 2018 Medicare Physician Fee Schedule: <https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeeSched/PFS-Federal-Regulation-Notices-Items/CMS-1676-F.html>

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