

Coding Guide: AQUABEAM[®] Robotic System and Aquablation[®] Therapy

Indications for Use

The AQUABEAM Robotic System is intended for the resection and removal of prostate tissue in males suffering from lower urinary tract symptoms due to benign prostatic hyperplasia.

Device Description

The AQUABEAM Robotic System is intended for use in patients suffering from lower urinary tract symptoms resulting from benign prostatic hyperplasia (BPH). The AQUABEAM Robotic System utilizes a high-velocity sterile saline waterjet to ablate prostate tissue during a minimally invasive surgical procedure called Aquablation therapy.



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CODING

The following tables list codes that may be relevant to the use of the AQUABEAM® Robotic System and the Aquablation procedure. It is the provider’s responsibility to determine and submit appropriate codes, charges, and modifiers for services that are rendered. The inclusion of codes in this document is not intended to provide examples of potential uses for the listed devices or to be an all-inclusive list.

Current Procedural Terminology (CPT®) Code and Payment: Physician and Hospital Outpatient

Aquablation Procedure Using the AquaBeam® Robotic System				
CPT Code	Description	CY 2018 Physician Payment	CY 2018 Medicare Hospital Outpatient National Base Payment	
			APC	Payment
0421T*	Transurethral waterjet ablation of prostate, including control of post-operative bleeding, including ultrasound guidance, complete (vasectomy, meatotomy, cystourethroscopy, urethral calibration and/or dilation, and internal urethrotomy are included when performed)	Contractor priced	5375 Level 5 Urology and Related Services Status Indicator-J1**	\$3,706

* Please refer to the 2018 Current Procedural Terminology (CPT) Manual.

** Hospital Part B services paid through a comprehensive APC paid under OPPI; all covered Part B services on the claim are packaged with the primary J1 service for the claim.

Hospital Inpatient ICD-10-PCS Procedure Code

Code	Description
XV508A4	Destruction of prostate using robotic waterjet ablation, via natural or artificial opening, new technology group 4

Please refer to 2019 ICD-10-PCS Codebook.

Hospital Inpatient MS-DRGs

MS-DRG	Description	FY 2019 Medicare Inpatient National Base Payment
713	Transurethral prostatectomy w cc/mcc	\$8,940
714	Transurethral prostatectomy w/o cc/mcc	\$5,562

New Technology Add-on Payment (NTAP)

Medicare approved the NTAP for the AQUABEAM Robotic System for FY 2019 - 2021, allowing for up to an additional \$1,250 incremental payment on top of the DRG value.



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ICD-10-CM Diagnosis Codes

Code	Description
N31.-	Neuromuscular dysfunction of bladder, not elsewhere classified
N32.-	Other disorders of the bladder
N33.-	Bladder disorders in diseases classified elsewhere
N35.-	Urethral stricture
N36.-	Other disorders of the urethra
N37.-	Urethral disorders in disease classified elsewhere
N40.-	Benign prostatic hyperplasia
R30.-	Pain associated with micturition
R31.-	Hematuria
R32.-	Unspecified urinary incontinence
R33.-	Retention of urine
R34.-	Anuria and oliguria
R35.-	Polyuria
R36.-	Urethral discharge
R37.-	Sexual dysfunction, unspecified
R39.-	Other and unspecified symptoms and signs involving the genitourinary system

* Please refer to the 2019 ICD-10-CM Codebook to select the complete codes and other diagnosis codes that may apply.

Sources

- CPT Copyright 2017 American Medical Association. All rights reserved. CPT is a registered trademark of the American Medical Association.
- 2018 Medicare Hospital Outpatient Prospective Payment System (CMS-1678-CN) Addendum B
- CMS-1694-F v36 FY2019 (Effective October 1, 2018)
- IPPS FY2019 Final Rule, Table 5 Final
- ICD-10-CM Codebook-2019
- ICD-10-PCS Codebook-2019

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