

CODING REFERENCE 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 is an advanced, image-guided, surgical robotic system for use in minimally-invasive urologic surgery treating BPH. The AQUABEAM Robotic System employs a single-use disposable handpiece to deliver Aquablation therapy, which combines real-time, multidimensional imaging, personalized treatment planning, automated robotics and heat-free waterjet ablation for targeted and rapid removal of prostate tissue.

The codes and coding options in this reference guide are commonly used codes for Aquablation therapy and are not intended to be an all-inclusive list. We recommend consulting your relevant manuals for appropriate coding options.

Physician Coding

	Codes	Descriptions
CPT® Code	0421T	Transurethral waterjet ab ation 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)
ICD-10-CM Diagnosis Code	N40.1	Benigh Prostatic Hyperplasia with Lower Urinary Tract Symptoms
		Note: Underlying condition(s) should also be coded. Consult an ICD-10-CM manual for a complete list of diagnosis codes.

Hospital Outpatient Coding

	Codes	Descriptions
CPT Code	0421T	Transurethral waterjet ab ation 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)
HCPCS Code	C2596	Probe, mage-Guided, Robotic, Waterjet Ablation
ICD-10-CM Diagnosis Code	N40.1	Benign Prostatic Hyperolasia with Lower Urinary Tract Symptoms Note: Underlying condition(s) should also be coded. Consult an ICD-10-CM manual for a complete list of diagnosis codes.
Applicable Revenue Codes	0272	Medical/Surgica Supplies; Sterile Supplies
	0278	Medical/Surgica Supplies and Devices; Other Implants
Ambulatory Payment Classification (APC)	5376	Level 6 Uro ogy and Related Services
PROCEPT Device Reference Number	HP2000	AQUABEAM Handbiece Note: AQUABEAM Handpiece should be reported with HCPCS Code C2596.

Hospital Inpatient Coding

	Codes	Descriptions
ICD-10-CM Diagnosis Code	N40.1	Benigh Prostatic Hyperplasia with Lower Urinary Tract Symptoms Note: Underlying condition(s) should also be coded. Consult an ICD-10-CM manual for a complete list of diagnosis codes.
ICD-10-PCS Procedure Code	XV508A4	Destruction of Prostate using Robotic Waterjet Ablation, Via Natura or Artificia Opening Endoscopic Note: ICD-10-PCS procedure codes are used specifically by hospitals to describe services and procedures provided during an inpatient admission.
Possible MS-DRG Assignment	<i>7</i> 13	ransurethral Prostatectomy with CC/MCC
	714	Transurethral prostatectomy without CC/MCC
Applicable Revenue Codes	0272	Medical/Surgica Supplies; Sterile Supplies
	0278	Medical/Surgica Supplies and Devices; Other Implants
PROCEPT Device Reference Number	HP2000	AQUABEAM Handbiece Note: AquaBram Handpiece should be reported with HCPCS Code C2596.

For additional coding and reimbursement information, contact your local Aquablation Field Reimbursement Manager: Phone: 650-232-7000 Email: reimbursement.resource@procept-biorobotics.com

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