

Mammography Coding & Reimbursement Information

| CPT | Procedure Description | Physician Fee ¹ | | APC ² | | ASC Payment ³ |
|--|--|----------------------------|----------|------------------|------------|--------------------------|
| | | Non-Facility | Facility | Code | Payment | |
| Breast Biopsy & Breast Localization | | | | | | |
| 19081 | Biopsy, breast, with placement of breast localization device(s) (eg, clip, metallic pellet), when performed, and imaging of the biopsy specimen, when performed, percutaneous; first lesion, including stereotactic guidance | \$625.79 | \$173.95 | 5072 | \$1,372.60 | \$576.39 |
| +19082 | Biopsy, breast, with placement of breast localization device(s) (eg, clip, metallic pellet), when performed, and imaging of the biopsy specimen, when performed, percutaneous; each additional lesion, including stereotactic guidance | \$504.53 | \$87.34 | N/A | N/A | Packaged |
| 19083 | Biopsy, breast, with placement of breast localization device(s) (eg, clip, metallic pellet), when performed, and imaging of the biopsy specimen, when performed, percutaneous; first lesion, including ultrasound guidance | \$619.30 | \$164.57 | 5072 | \$1,372.60 | \$576.39 |
| 19084 | Biopsy, breast, with placement of breast localization device(s) (eg, clip, metallic pellet), when performed, and imaging of the biopsy specimen, when performed, percutaneous; each additional lesion, including ultrasound guidance | \$490.82 | \$81.20 | N/A | N/A | Packaged |
| 19085 | Biopsy, breast, with placement of breast localization device(s) (eg, clip, metallic pellet), when performed, and imaging of the biopsy specimen, when performed, percutaneous; first lesion, including magnetic resonance guidance | \$944.83 | \$190.55 | 5072 | \$1,372.60 | \$576.39 |
| 19086 | Biopsy, breast, with placement of breast localization device(s) (eg, clip, metallic pellet), when performed, and imaging of the biopsy specimen, when performed, percutaneous; each additional lesion, including magnetic resonance guidance | \$751.02 | \$94.92 | N/A | N/A | Packaged |
| Breast Localization Device | | | | | | |
| 19281 | Placement of breast localization device(s) (eg, clip, metallic pellet, wire/needle, radioactive seeds), percutaneous; first lesion, including mammographic guidance | \$251.54 | \$104.66 | 5071 | \$53.77 | Packaged |
| 19282 | Placement of breast localization device(s) (eg, clip, metallic pellet, wire/needle, radioactive seeds), percutaneous; each additional lesion, including mammographic guidance | \$177.56 | \$52.69 | N/A | N/A | Packaged |
| 19283 | Placement of breast localization device(s) (eg, clip, metallic pellet, wire/needle, radioactive seeds), percutaneous; first lesion, including stereotactic guidance | \$279.33 | \$105.74 | 5071 | \$53.77 | Packaged |
| 19284 | Placement of breast localization device(s) (eg, clip, metallic pellet, wire/needle, radioactive seeds), percutaneous; each additional lesion, including stereotactic guidance | \$212.93 | \$53.77 | N/A | N/A | Packaged |
| 19285 | Placement of breast localization device(s) (eg, clip, metallic pellet, wire/needle, radioactive seeds), percutaneous; first lesion, including ultrasound guidance | \$468.44 | \$89.86 | 5071 | \$53.77 | Packaged |
| 19286 | Placement of breast localization device(s) (eg, clip, metallic pellet, wire/needle, radioactive seeds), percutaneous; each additional lesion, including ultrasound guidance | \$399.87 | \$45.47 | N/A | N/A | Packaged |
| 19287 | Placement of breast localization device(s) (eg clip, metallic pellet, wire/needle, radioactive seeds), percutaneous; first lesion, including Magnetic Resonance guidance | \$797.58 | \$134.25 | 5071 | \$53.77 | Packaged |
| 19288 | Placement of breast localization device(s) (eg clip, metallic pellet, wire/needle, radioactive seeds), percutaneous; each additional lesion, including Magnetic Resonance guidance | \$634.46 | \$67.49 | N/A | N/A | Packaged |

| ICD-10-PCS ⁴ | Description |
|-------------------------|--|
| 0HBT3ZX | Excision of Breast, Right, Percutaneous Approach, Diagnostic |
| 0HBT3ZZ | Excision of Breast, Right, Percutaneous Approach |
| 0HBU3ZX | Excision of Breast, Left, Percutaneous Approach, Diagnostic |
| 0HBU3ZZ | Excision of Breast, Left, Percutaneous Approach |
| 0HBV3ZX | Excision of Breast, Bilateral, Percutaneous Approach, Diagnostic |
| 0HBV3ZZ | Excision of Breast, Bilateral, Percutaneous Approach |
| 0HJT3ZZ | Inspection of Breast, Right, Percutaneous Approach |
| 0HJU3ZZ | Inspection of Breast, Left, Percutaneous Approach |

| MS-DRG ⁵ | Description |
|---------------------|--|
| 584 | Breast Biopsy, Local Excision and Other Breast Procedures with CC/MCC |
| 585 | Breast Biopsy, Local Excision and Other Breast Procedures without CC/MCC |

| C-Code ⁵ | Description |
|---------------------|--|
| C1819 | Surgical tissue localization and excision device (implantable) |