Avoidance of Overuse of Bone Scan for Staging Low-Risk Prostate Cancer Patients

Coding Specifications

Codes required to document patient has prostate cancer and is receiving interstitial prostate brachytherapy, external beam radiotherapy to the prostate, radical prostatectomy, or cryotherapy:

An ICD-9-CM diagnosis code for prostate cancer and a CPT code are required to identify patients to be included in this measure.

All measure specific coding should be reported on the claim(s) representing the eligible encounter.

Prostate cancer ICD-9-CM diagnosis codes

■ 185 (malignant neoplasm of prostate)

AND

CPT codes

- **5**5810, 55812, 55815
- **5**5840, 55842, 55845
- **5**5866
- **5**5873
- 77427
- 77776, 77777, 77778
- **77787**

Quality codes for this measure:

CPT II Code descriptors

(Data collection sheet should be used to determine appropriate code or combination of codes.)

- CPT II 3271F: Low risk of recurrence, prostate cancer
- *CPT II 3272F:* Intermediate risk of recurrence, prostate cancer
- *CPT II 3273F*: High risk of recurrence, prostate cancer
- *CPT II 3274F*: Prostate cancer risk of recurrence not determined or neither low, intermediate nor high
- *CPT II 3270F:* Bone scan not performed prior to initiation of treatment nor at any time since diagnosis of prostate cancer
- CPT II 3269F-1P: Documentation of medical reason(s) for performing a bone scan (including documented pain, salvage therapy, other medical reasons)
- *CPT II 3269F-3P:* Documentation of system reason(s) for performing a bone scan (including bone scan ordered by someone other than reporting physician)
- *CPT II 3269F*: Bone scan performed prior to initiation of treatment or at any time since diagnosis of prostate cancer

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