Treatment Devices

CPT Codes: 77332, 77333, 77334, 77338

Original Date: April, 2011
Last Reviewed Date: November 2015
Last Revised Date: November, 2015
Implementation Date: January, 2016

Treatment Devices (77332, 77333 & 77334)

Professional and Technical

There are two types of treatment devices. The first is immobilization devices which assist in establishing and maintaining a reproducible treatment position for the patient undergoing radiation therapy treatments. These may include Aquaplast® masks, Alpha Cradles®, Vac-Lok™, etc. The second is beam-modifying devices, which assists in creating the shape of the treatment portal and protects critical structures near or within the area receiving radiation. Examples of beam modifying devices include blocking designed with multileaf collimators, wedges, tissue compensators etc.

77332  Treatment devices, design and construction; simple (simple block, simple bolus).
77333  Treatment devices, design and construction; intermediate (multiple hand blocks, stents, bite blocks, special bolus)
77334  Treatment devices, design and construction; complex (irregular blocks, special shields, compensators, wedges, molds or casts).

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<th>Intermediate 77333</th>
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<td>Prone pillows</td>
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<td>Rectal balloon</td>
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Custom is defined as any item molded or created for a particular patient, which cannot be utilized for another patient’s treatment. Custom devices may have the ability to be redesigned for another patient later (i.e. vacuum bags).

Multiple beam modification devices per port of entry are not billable. Only one treatment device is billable per port. For example, a MLC, wedge and bolus all modifying a single port is billable as a quantity of one (1).

Mirrored devices are those in which a custom device was created for a patient and the technical staff simply “flipped” or “mirrored” the device to a treatment portal 180 degrees from the custom-made device.

1National Imaging Associates, Inc. is a subsidiary of Magellan Healthcare, Inc.
The mirrored field is not custom designed; instead, it is the exact same field only from an opposite direction. A mirrored pair of devices is billable as one device, regardless of whether the code is billed by a physician or facility.

Multiple immobilization devices are allowed as billable on the same day of service. For example, a breast board and a Vac-Lok™ are two devices that are both billable, the Vac-Lok™ at complex 77334 and the breast board is simple at 77332. Another example, an Aquaplast® mask (CPT® 77334) and a bite block (CPT® 77333) may be billed on the same date of service.

A rectal balloon is billable as a complex device but only as a quantity of one (1) per course of therapy. Although a new rectal balloon may be utilized daily, only one balloon is billable as a complex device.

Complex treatment devices (CPT® 77334) are billable per individually documented IMRT compensator utilized for treatment. CPT® 77334 is not billable for IMRT devices produced by MLC. MLC based IMRT devices are billable as CPT® 77338 and is allowed in a quantity of one (1) per IMRT plan.

**Standards for CPT® 77332, 77333 and 77334**

- **Immobilization devices** are billable as many times as they are created, but only once per device.
- One (1) complex treatment device (CPT® 77334) may be approved for each external beam course of therapy for an immobilization device created during simulation. If an immobilization device is not created by the provider, the authorization must not be utilized.
- For brachytherapy, one (1) treatment device can be approved for each placement. Per ASTRO, a device that is left in place for more than one fraction is billed only once.
- One (1) complex treatment device (CPT® 77334) may be approved for each prostate external beam course of therapy for a rectal balloon. If a rectal balloon is not utilized for treatment, the authorization must not be utilized.
- **Beam-modifying devices**: only one device is billable per port/field.
- Mirrored portal pair of devices is billable as a quantity of one (1).
- For dosimetry/planning services, beam-modifying treatment devices may be approved up to the maximum number below per phase of treatment and documentation is present to support each device.
  - 2D, 3D and IMRT Compensator Based treatment deliveries is nine (9)
  - Proton is nine (9)
  - SBRT is ten (10)
  - LDR Brachytherapy is one (1) per placement/insertion
  - HDR Brachytherapy is one (1) per placement/insertion
- Additional services may be requested and will be reviewed for medical necessity based on individual patient circumstances.

**IMRT Treatment Device (77338)**

*Professional and Technical*

**77338** Multileaf collimator (MLC) device(s) for intensity modulated radiation therapy (IMRT), design and construction per IMRT plan

The IMRT device code was developed to account for the work and practice expense unique to the design and construction of a multileaf collimator device used for intensity modulated radiation therapy (IMRT). This code is to be billed only once per MLC-based IMRT plan, regardless of the number of ports constructed for the plan. An IMRT device (CPT® 77338) may be billed for a boost plan even if the IMRT plan (CPT® 77301) is not billable. For compensator based IMRT courses, each compensator is billed using the complex treatment device code (CPT® 77334).
Standards for CPT® 77338

- CPT® 77338 is billable as a quantity of one (1) only.
- CPT® 77338 may only be billed one (1) time per IMRT plan created.
- CPT® 77338 is billable in conjunction with an IMRT plan (CPT® 77301) only and not with any other type of isodose planning. In the event of an IMRT boost, the treatment device is allowed even though the additional plan may not be allowed. This code is reserved for MLC based IMRT devices only.
- One (1) IMRT treatment devices (CPT® 77338) may be approved per phase of medically necessary, MLC-based IMRT treatment.

Sources:
The Magellan Healthcare Coding Standards are created and maintained by Magellan Healthcare and our contracted coding expert, Revenue Cycle Inc. based on our understanding of:
- American Medical Association (AMA) HCPCS definitions and intended use as noted within theAMA’s published CodeManager® products
- Local and National Medicare Coverage Determinations (LCDs and NCDs)
- Office of the Inspector General (OIG) compliance standards
- National Correct Coding Initiative (NCCI) edits
- Centers for Medicare and Medicaid Services (CMS) Internet Only Manuals (IOM).
Magellan Healthcare incorporated input from Revenue Cycle Inc. about accepted standards of care in radiation oncology,–based on their review of sources such as the American Society of Therapeutic Radiation Oncology (ASTRO) coding guidelines and American College of Radiation Oncology (ACRO) practice management guide.