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Robotic Assisted Surgery Facility Policy

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DESCRIPTION:

Robotically assisted surgical (RAS) devices are one type of computer-assisted surgical system. RAS devices enable the surgeon to use computer and software technology to control and move surgical instruments through one or more tiny incisions in the patient's body (minimally invasive) for a variety of surgical procedures. The device is not actually a robot because it cannot perform surgery without direct human control.

RAS devices generally have several components, which may include:

- A console, where the surgeon sits during surgery. The console is the control center of the device and allows the surgeon to view the surgical field through a 3D endoscope and control movement of the surgical instruments.
- The bedside cart that includes three or four hinged mechanical arms, camera (endoscope) and surgical instruments that the surgeon controls during surgical procedures; and
- A separate cart that contains support hardware and software components, such as an electro-surgical unit (ESU), suction/irrigation pumps, and light source for the endoscope.

Most surgeons use multiple surgical instruments and accessories with the RAS device, such as scalpels, forceps, graspers, dissectors, cautery, scissors, retractors, and suction irrigators.

REIMBURSEMENT INFORMATION:

Robotic assisted surgery technique (HCPCS S2900) is considered included in the primary surgical procedure and is not separately reimbursable. For those procedures where computer-assisted technology is fundamental to a procedure's success, it is considered for the high intensity or complex surgical procedure's allowance. Where robotic assistance is not necessary for a procedure's success it

would be considered optional and not separately payable. In both situations, separately billed charges for the instrument, technique or approach used in a procedure will not be reimbursed. These charges are considered included in the primary surgery's reimbursement.

This policy applies to Florida Blue's commercial products and Medicare Advantage products.

BILLING AND CODING:

The following codes may be used to describe robotic assistance:

HCPCS Codes:

S2900	Surgical techniques requiring use of robotic surgical system (list separately in addition to code for primary procedure)
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ICD-10 PCS:

8E090CZ	Robotic Assisted Procedure of Head and Neck Region, Open Approach
8E093CZ	Robotic Assisted Procedure of Head and Neck Region, Percutaneous Approach
8E094CZ	Robotic Assisted Procedure of Head and Neck Region, Percutaneous Endoscopic Approach
8E097CZ	Robotic Assisted Procedure of Head and Neck Region, Via Natural or Artificial Opening
8E098CZ	Robotic Assisted Procedure of Head and Neck Region, Via Natural or Artificial Opening Endoscopic
8E09XCZ	Robotic Assisted Procedure of Head and Neck Region
8E0W0CZ	Robotic Assisted Procedure of Trunk Region, Open Approach
8E0W3CZ	Robotic Assisted Procedure of Trunk Region, Percutaneous Approach
8E0W4CZ	Robotic Assisted Procedure of Trunk Region, Percutaneous Endoscopic Approach
8E0W7CZ	Robotic Assisted Procedure of Trunk Region, Via Natural or Artificial Opening
8E0W8CZ	Robotic Assisted Procedure of Trunk Region, Via Natural or Artificial Opening Endoscopic
8E0WXCZ	Robotic Assisted Procedure of Trunk Region
8E0X0CZ	Robotic Assisted Procedure of Upper Extremity, Open Approach
8E0X3CZ	Robotic Assisted Procedure of Upper Extremity, Percutaneous Approach
8E0X4CZ	Robotic Assisted Procedure of Upper Extremity, Percutaneous Endoscopic Approach
8E0XXCZ	Robotic Assisted Procedure of Upper Extremity
8E0Y0CZ	Robotic Assisted Procedure of Lower Extremity, Open Approach

8E0Y3CZ	Robotic Assisted Procedure of Lower Extremity, Percutaneous Approach
8E0Y4CZ	Robotic Assisted Procedure of Lower Extremity, Percutaneous Endoscopic Approach
8E0YXCZ	Robotic Assisted Procedure of Lower Extremity

The use of an unlisted procedure code to separately indicate the robotic assisted technology would be considered inappropriate billing.

Increased operating room charge for the use of robotic assisted technology would be considered inappropriate billing.

REFERENCES:

1. Centers for Medicare and Medicaid Services (CMS) Healthcare Common Procedure Coding System (HCPCS); HCPCS Release and Code sets.
<http://www.cms.gov/HCPCSReleaseCodeSets/ANHCPCS/list.asp#TopOfPage>
2. International Classification of Diseases 10th Revision, Procedure Coding System 2023. American Academy of Professional Coders ©2016
3. Food and Drug Administration; Computer-Assisted Surgical Systems.
<https://www.fda.gov/MedicalDevices/ProductsandMedicalProcedures/SurgeryandLifeSupport/ComputerAssistedSurgicalSystems/default.htm>

GUIDELINE UPDATE INFORMATION:

11/09/2017	New Policy
11/08/2018	Annual Review; no changes
11/14/2019	Annual Review; no changes
04/09/2020	Annual Review, moving annual review to April
04/15/2021	Annual Review, no changes
04/15/2022	Annual Review, minor verbiage changes
04/15/2023	Annual Review, no changes
04/02/2024	Annual Review, no changes

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