

**National Coverage Determination**  
**Procedure Code: 84153**  
**Prostate Specific Antigen**  
**CMS Policy Number: 190.31**  
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**Description:** Prostate Specific Antigen (PSA), a tumor marker for adenocarcinoma of the prostate, can predict residual tumor in the post-operative phase of prostate cancer. Three to 6 months after radical prostatectomy, PSA is reported to provide a sensitive indicator of persistent disease. Six months following introduction of antiandrogen therapy, PSA is reported of distinguishing patients with favorable response from those in whom limited response is anticipated.

PSA when used in conjunction with other prostate cancer tests, such as digital rectal examination, may assist in the decision-making process for diagnosing prostate cancer. PSA also, serves as a marker in following the progress of most prostate tumors once a diagnosis has been established. This test is also an aid in the management of prostate cancer patients and in detecting metastatic or persistent disease in patients following treatment.

**Indications:**

PSA is of proven value in differentiating benign from malignant disease in men with lower urinary tract signs & symptoms (e.g., hematuria, slow urine stream, hesitancy, urgency, frequency, nocturia & incontinence) as well as with patients with palpably abnormal prostate glands on physician exam, and in patients with other laboratory or imaging studies that suggest the possibility of a malignant prostate disorder. PSA is also a marker used to follow the progress of prostate cancer once a diagnosis has been established, such as detecting metastatic or persistent disease in patients who may require additional treatment. PSA testing may also be useful in the differential diagnosis of men presenting with as yet undiagnosed disseminated metastatic disease.

**Limitations:**

Generally, for patients with lower urinary tract signs or symptoms, the test is performed only once per year unless there is a change in the patient's medical condition.

Testing with a diagnosis of in situ carcinoma is not reasonably done more frequently than once, unless the result is abnormal, in which case the test may be repeated once.

**Frequency Limitations:** For patients with lower urinary tract signs or symptoms, total PSA is performed only once per year unless there is a change in the patient's medical condition. Medicare covers a screening total PSA test one each year for men over 50 years of age.

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To review all requirements of this policy, please see: [CMS NCD listing by Chapter](#)

**Covered ICD-10 Codes.**

ICD-10	Descriptor
<a href="#">C61</a>	Malignant neoplasm of prostate
<a href="#">C67.5</a>	Malignant neoplasm of bladder neck
<a href="#">C77.4</a>	Sec and unsp malig neoplasm of inguinal and lower limb nodes
<a href="#">C77.5</a>	Secondary and unsp malignant neoplasm of intrapelv nodes
<a href="#">C77.8</a>	Sec and unsp malig neoplasm of nodes of multiple regions
<a href="#">C79.51</a>	Secondary malignant neoplasm of bone
<a href="#">C79.52</a>	Secondary malignant neoplasm of bone marrow
<a href="#">C79.82</a>	Secondary malignant neoplasm of genital organs
<a href="#">D07.5</a>	Carcinoma in situ of prostate
<a href="#">D40.0</a>	Neoplasm of uncertain behavior of prostate
<a href="#">D49.511</a>	Neoplasm of unspecified behavior of right kidney
<a href="#">D49.512</a>	Neoplasm of unspecified behavior of left kidney
<a href="#">D49.519</a>	Neoplasm of unspecified behavior of unspecified kidney
<a href="#">D49.59</a>	Neoplasm of unspecified behavior of other GU organ
<a href="#">M33.03</a>	Juvenile dermatomyositis without myopathy
<a href="#">M33.13</a>	Other dermatomyositis without myopathy
<a href="#">M33.93</a>	Dermatopolymyositis, unspecified without myopathy
<a href="#">N13.9</a>	Obstructive and reflux uropathy, unspecified
<a href="#">N32.0</a>	Bladder-neck obstruction
<a href="#">N40.0</a>	Benign prostatic hyperplasia without lower urinary tract symp
<a href="#">N40.1</a>	Benign prostatic hyperplasia with lower urinary tract symp
<a href="#">N40.2</a>	Nodular prostate without lower urinary tract symptoms
<a href="#">N40.3</a>	Nodular prostate with lower urinary tract symptoms
<a href="#">N41.9</a>	Inflammatory disease of prostate, unspecified
<a href="#">N42.9</a>	Disorder of prostate, unspecified
<a href="#">R31.0</a>	Gross hematuria
<a href="#">R31.1</a>	Benign essential microscopic hematuria
<a href="#">R31.21</a>	Asymptomatic microscopic hematuria
<a href="#">R31.29</a>	Other microscopic hematuria
<a href="#">R31.9</a>	Hematuria, unspecified

<a href="#">R32</a>	Unspecified urinary incontinence
<a href="#">R33.9</a>	Retention of urine, unspecified
<a href="#">R35.0</a>	Frequency of micturition
<a href="#">R35.1</a>	Nocturia
<a href="#">R39.11</a>	Hesitancy of micturition
<a href="#">R39.12</a>	Poor urinary stream
<a href="#">R39.14</a>	Feeling of incomplete bladder emptying
<a href="#">R39.15</a>	Urgency of urination
<a href="#">R39.16</a>	Straining to void
<a href="#">R93.5</a>	Abn findings on dx imaging of abd regions, inc retroperiton
<a href="#">R93.6</a>	Abnormal findings on diagnostic imaging of limbs
<a href="#">R93.7</a>	Abnormal findings on diagnostic imaging of prt ms sys
<a href="#">R94.8</a>	Abnormal results of function studies of organs and systems
<a href="#">R97.20</a>	Elevated prostate specific antigen [PSA]
<a href="#">R97.21</a>	Rising PSA fol treatment for malignant neoplasm of prostate
<a href="#">Z85.46</a>	Personal history of malignant neoplasm of prostate

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