2014 Coding & Payment Quick Reference

Select Polypectomy Procedures

Boston Scientific

GuidePoint

Simplifying Reimbursement

Endoscopy

Payer policies will vary and should be verified prior to treatment for limitations on diagnosis, coding or site of service requirements. The coding options listed within this guide are commonly used codes and are not intended to be an all-inclusive list. We recommend consulting your relevant manuals for appropriate coding options.

Rates referenced in these guides do not reflect Sequestration, automatic reductions in federal spending that will result in a 2% across-the-board reduction to ALL Medicare rates on January 1, 2014, unless Congress passes legislation to stop the sequester.

Medicare Physician, Hospital Outpatient, and ASC Payments

		Physician[1,2]		Facility[3]	
CPT® Code[1]	Code Description	MD Payment In-Office	MD Payment In-Facility	Hospital Outpatient Payment	ASC Facility Payment
Hot Biopsy					
43250	Esophagogastroduodenoscopy, flexible, transoral; with removal of tumor(s), polyp(s), or other lesion(s) by hot biopsy forceps or bipolar cautery	$466	$187	$1,013	$560
44365	Small intestinal endoscopy, enteroscopy beyond second portion of duodenum, not including ileum; with removal of tumor(s), polyp(s), or other lesion(s) by hot biopsy forceps or bipolar cautery	$200	$200	$1,233	$681
44392	Colonoscopy through stoma; with removal of tumor(s), polyp(s), or other lesion(s) by hot biopsy forceps or bipolar cautery	$446	$226	$737	$407
45308	Proctosigmoidoscopy, rigid; with removal of single tumor, polyp, or other lesion by hot biopsy forceps or bipolar cautery	$221	$90	$779	$431
45333	Sigmoidoscopy, flexible; with removal of tumor(s), polyp(s), or other lesion(s) by hot biopsy forceps or bipolar cautery	$301	$113	$461	$255
45384	Colonoscopy, flexible, proximal to splenic flexure; with removal of tumor(s), polyp(s), or other lesion(s) by hot biopsy forceps or bipolar cautery	$471	$277	$737	$407

See important information about the uses and limitations of this document on page 3.

CPT Copyright 2013 American Medical Association. All rights reserved. CPT is a registered trademark of the American Medical Association

CPT® Code[1]	Code Description	Physician[†2] MD Payment In-Office	Physician[†2] MD Payment In-Facility	Facility[3] Hospital Outpatient Payment	Facility[3] ASC Facility Payment
Snare					
43217	Esophagoscopy, flexible, transoral; with removal of tumor(s), polyp(s), or other lesion(s) by snare technique	$456	$178	$1,013	$560
43251	Esophagogastroduodenoscopy, flexible, transoral; with removal of tumor(s), polyp(s), or other lesion(s) by snare technique	$513	$216	$1,013	$560
44364	Small intestinal endoscopy, enteroscopy beyond second portion of duodenum, not including ileum; with removal of tumor(s), polyp(s), or other lesion(s) by snare technique	$225	$225	$1,233	$681
44394	Colonoscopy through stoma; with removal of tumor(s), polyp(s), or other lesion(s) by snare technique	$504	$263	$737	$407
45309	Proctosigmoidoscopy, rigid; with removal of single tumor, polyp, or other lesion by snare technique	$227	$95	$779	$431
45338	Sigmoidoscopy, flexible; with removal of tumor(s), polyp(s), or other lesion(s) by snare technique	$323	$145	$779	$431
45385	Colonoscopy, flexible, proximal to splenic flexure; with removal of tumor(s), polyp(s), or other lesion(s) by snare technique	$531	$315	$737	$407
Hot Biopsy or Snare					
45315	Proctosigmoidoscopy, rigid; with removal of multiple tumors, polyps, or other lesions by hot biopsy forceps, bipolar cautery or snare technique	$234	$115	$779	$431
Other					
43229	Esophagoscopy, flexible, transoral; with ablation of tumor(s), polyp(s), or other lesion(s) (includes pre- and post-dilation and guide wire passage, when performed)	$739	$215	$1,969	$1,088
Foreign Body Removal					
43215	Esophagoscopy, flexible, transoral; with removal of foreign body	$413	$154	$1,013	$560
43247	Esophagogastroduodenoscopy, flexible, transoral; with removal of foreign body	$414	$193	$670	$370
44363	Small intestinal endoscopy, enteroscopy beyond second portion of duodenum, not including ileum; with removal of foreign body	$211	$211	$837	$462
45307	Proctosigmoidoscopy, rigid; with removal of foreign body	$234	$107	$1,657	$915
45332	Sigmoidoscopy, flexible; with removal of foreign body	$296	$114	$779	$431
45379	Colonoscopy, flexible, proximal to splenic flexure; with removal of foreign body	$508	$278	$737	$407
43194	Esophagoscopy, rigid, transoral; with removal of foreign body	$168	$168	$1,013	$560
Endoscopic Mucosal Resection					
43211	Esophagoscopy, flexible, transoral; with endoscopic mucosal resection	$253	$253	$670	$370
43254	Esophagogastroduodenoscopy, flexible, transoral; with endoscopic mucosal resection	$291	$291	$670	$370

See important information about the uses and limitations of this document on page 3.

Medicare Hospital Inpatient Payment

Inpatient payment information not shown because the polypectomy procedure will rarely, if ever, be the primary reason for a hospital admission.

C-Code Information: For all C-Code information, please reference the C-Code Reference Guide:

www.bostonscientific.com/reimbursement

ǂ The 2014 National Average Medicare physician payment rates have been calculated using a 2014 conversion factor of $35.8228 which reflects the 0.5 percent update for January 1, 2014 through March 31, 2014.

[1]CPT Copyright 2013 American Medical Association. All rights reserved. CPT is a registered trademark of the American Medical Association. Applicable FARS/DFARS Restrictions Apply to Government Use. Fee schedules, relative value units, conversion factors and/or related components are not assigned by the AMA, are not part of CPT, and the AMA is not recommending their use. The AMA does not directly or indirectly practice medicine or dispense medical services. The AMA assumes no liability for data contained or not contained herein.

[2] PFS Relative Value File Source: CMS Physician Fee Schedule – December 27, 2013 revised release, RVU14A file. http://cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeeSched/PFS-Relative-Value-Files-Items/RVU14A.html

[3] Source: November 27, 2013 Federal Register CMS-1601-FC.

Health economic and reimbursement information provided by Boston Scientific Corporation is gathered from third-party sources and is subject to change without notice as a result of complex and frequently changing laws, regulations, rules and policies. This information is presented for illustrative purposes only and does not constitute reimbursement or legal advice. Boston Scientific encourages providers to submit accurate and appropriate claims for services. It is always the provider's responsibility to determine medical necessity, the proper site for delivery of any services and to submit appropriate codes, charges, and modifiers for services that are rendered. Boston Scientific recommends that you consult with your payers, reimbursement specialists and/or legal counsel regarding coding, coverage and reimbursement matters. Boston Scientific does not promote the use of its products outside their FDA-approved label.

© 2014 Boston Scientific Corporation or its affiliates. All rights reserved