

2009 CODING & PAYMENT QUICK REFERENCE

MEDICARE PHYSICIAN, HOSPITAL OUTPATIENT and ASC PAYMENTS

CPT® Code ¹	Code Description	Physician ²		Facility ³	
		MD Payment In-office	MD Payment In-facility	Hospital Outpatient Payment	ASC Payment
Hot Biopsy					
43250	Upper gastrointestinal endoscopy; with removal of tumor(s), polyp(s), or other lesion(s) by hot biopsy forceps or bipolar cautery	NA*	\$181	\$572	\$392
44365	Small intestinal endoscopy; with removal of tumor(s), polyp(s), or other lesion(s) by hot biopsy forceps or bipolar cautery	NA*	\$190	\$632	\$411
44392	Colonoscopy through stoma; with removal of tumor(s), polyp(s), or other lesion(s) by hot biopsy forceps or bipolar cautery	\$401	\$210	\$594	\$344
45308	Proctosigmoidoscopy, rigid; with removal of single tumor, polyp, or other lesion by hot biopsy forceps or bipolar cautery	\$161	\$75	\$603	\$347
45333	Sigmoidoscopy, flexible; with removal of tumor(s), polyp(s), or other lesion(s) by hot biopsy forceps or bipolar cautery	\$263	\$105	\$603	\$347
45384	Colonoscopy; with removal of tumor(s), polyp(s), or other lesion(s) by hot biopsy forceps or bipolar cautery	\$435	\$260	\$594	\$399
Snare					
43217	Esophagoscopy, rigid or flexible; with removal of tumor(s), polyp(s), or other lesion(s) by snare technique	\$349	\$163	\$572	\$337
43251	Upper gastrointestinal endoscopy; with removal of tumor(s), polyp(s), or other lesion(s) by snare technique	NA*	\$211	\$572	\$392
44364	Small intestinal endoscopy; with removal of tumor(s), polyp(s) or other lesion(s) by snare technique	NA*	\$214	\$632	\$411
44394	Colonoscopy through stoma; with removal of tumor(s), polyp(s), or other lesion(s) by snare technique	\$470	\$247	\$594	\$344
45309	Proctosigmoidoscopy, rigid; with removal of single tumor, polyp, or other lesion by snare technique	\$182	\$89	\$603	\$347
45338	Sigmoidoscopy, flexible; with removal of tumor(s), polyp(s), or other lesion(s) by snare technique	\$294	\$136	\$603	\$347
45385	Colonoscopy; with removal of tumor(s), polyp(s), or other lesion(s) by snare technique	\$500	\$298	\$594	\$399
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	\$195	\$100	\$603	\$347
Other					
43228	Esophagoscopy, rigid or flexible; with ablation of tumor(s), polyp(s), or other lesion(s), not amenable to removal by hot biopsy forceps, bipolar cautery or snare technique	NA*	\$216	\$1,676	\$730

MEDICARE HOSPITAL INPATIENT

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

* NA = Medicare has not developed a rate for the In-Office setting as the procedure is typically performed in the hospital setting. If the contractor determines the service can be performed in-office, it will be paid at the MD In-facility rate.

¹Source: Beebe et al. (2008). *CPT®2009 Professional Edition*. Chicago: American Medical Association. CPT® is a registered trademark of American Medical Association. All Rights Reserved.

²Source: November 19, 2008 Federal Register. MD payments calculated using the 2009 conversion factor of \$36.066.

³Source: November 18, 2008 Federal Register.

Important - Please Note: Reimbursement information provided by Boston Scientific Corporation (BSC) is gathered from third-party sources and is presented for illustrative purposes only. This information does not constitute reimbursement or legal advice, and BSC makes no representation or warranty regarding this information or its completeness, accuracy or timeliness. Laws, regulations and payer policies concerning reimbursement are complex and change frequently, and service providers are responsible for all decisions relating to coding and reimbursement submissions. Accordingly, BSC strongly recommends that you consult with your payers, reimbursement specialist and/or legal counsel regarding coding, coverage and reimbursement matters.