

Endoscopy Medicare Pass-through Codes (C-codes)

Endoscopy C-code Summary

Encourage your customers to add the following C-codes to their chargemasters:

C-code	C-code Description	Devices Impacted ¹
C1726	Catheter, balloon dilation, non-vascular	CRE™ single-use fixed wire balloon dilators
		CRE™ single-use pulmonary balloon dilators
		CRE™ single-use wire-guided esophageal/pyloric balloon dilators
		CRE™ single-use wire-guided esophageal/pyloric/colonic balloon dilators
		Hurricane® RX single-use biliary balloon dilatation catheters
		MaxForce™ single-use biliary dilatation balloon
		MaxForce™ single-use esophageal balloon dilators
		MaxForce™ TTS single-use balloon dilators
		Passage™ single-use biliary dilatation catheters
		Rigiflex® II single-use achalasia balloon dilators
C1769	Guide wire	All BSC guide wires used in GI procedures
		Hydratome™ RX cannulating sphincterotomes
		Jagtome® RX cannulating sphincterotomes
C1874	Stent, coated/covered, with delivery system	Polyflex® single-use esophageal stent system
		Polyflex® single-use self-expanding silicone airway stent system
		Ultraflex™ single-use covered esophageal NG stent system – proximal release
		Ultraflex™ single-use covered large esophageal NG stent system – proximal release
		Ultraflex™ single-use covered large esophageal NG stent system – distal release
		Ultraflex™ single-use covered tracheobronchial stent system – distal release
		WALLSTENT® RX single-use biliary endoprosthesis with Permalume® covering
		WALLSTENT® single-use esophageal II endoprosthesis with Permalume® covering and Unistep™ Plus delivery system
		WALLSTENT® single-use tracheobronchial endoprosthesis with Permalume® covering and Unistep® Plus delivery system

¹ For devices packaged in kits, hospitals may bill for the components of the kits that individually qualify under the new category pass-through C-codes. Facilities should bill for the estimated proportion of the kit that the C-code eligible device comprises.

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.

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ENDOSCOPY IMPACT (cont'd)

Encourage your customers to add the following C-codes to their chargemasters:

C-code	C-code Description	Devices Impacted¹
C1876	Stent, non-coated/non-covered, with delivery system	Ultraflex™ Diamond™ single-use biliary stent system
		Ultraflex™ Precision single-use colonic stent system
		Ultraflex™ single-use noncovered esophageal NG stent system – distal release
		Ultraflex™ single-use noncovered esophageal NG stent system – proximal release
		Ultraflex™ single-use noncovered tracheobronchial stent system – distal release
		Ultraflex™ single-use noncovered tracheobronchial stent system – proximal release
		WALLSTENT® RX single-use biliary endoprosthesis
		WALLSTENT® single-use biliary endoprosthesis
		WALLSTENT® single-use colonic and duodenal endoprosthesis with Unistep® Plus delivery system
C2617	Stent, non-coronary, temporary, without delivery system	C-Flex® single-use pigtail biliary stent
C2625	Stent, non-coronary, temporary, with delivery system	Flexima™ single-use biliary stent system
		Percuflex® Amsterdam single-use biliary stent with introducer kits
		RX single-use plastic biliary stents

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