

# 2021 CODING & PAYMENT GUIDE

## DIALYSIS CIRCUIT INTERVENTIONS

The procedure codes listed below are applicable to dialysis circuit interventions.

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.

Claims must contain the appropriate CPT/HCPCS/ICD-10 code(s) for the specific site of service to indicate the items and services that are furnished. The tables below contain a list of possible CPT/HCPCS codes that may be used to bill for dialysis circuit interventions. Providers should select the most appropriate code(s) and modifier(s) with the highest level of detail to describe the service(s) actually rendered.

### PHYSICIAN SERVICES & REIMBURSEMENT

CPT®	Abbreviated Description	In-Office/OBL <sup>1</sup>
36901	Diagnostic Evaluation	\$756
36902	Diag Eval + PTBA Peripheral Segment	\$1,359
36903	Diag Eval + Stent & PTBA Peripheral Segment	\$5,152
36904	Thrombectomy and/or Thrombolysis + Diag Eval	\$1,998
36905	Thrombectomy and/or Thrombolysis + Diag Eval + PTBA Peripheral Segment	\$2,553
36906	Thrombectomy and/or Thrombolysis + Diag Eval + Stent & PTBA Peripheral Segment	\$6,456
+36907	PTBA Central Segment	\$690
+36908	Stent & PTBA Central Segment	\$1,898
+36909	Embolization (Main Circuit or Accessory Veins)	\$2,155

(+ symbol denotes add-on code)

**CPT codes 36904, 36905 and 36906** include percutaneous transluminal mechanical thrombectomy and/or infusion for thrombolysis within the dialysis circuit.

## AMBULATORY SURGICAL CENTER (ASC) CODING & REIMBURSEMENT

CPT®	Abbreviated Description	ASC Payment <sup>2</sup>	Physician Facility Payment <sup>1</sup>
36901	Diagnostic Evaluation	\$548	\$171
36902	Diag Eval + PTBA Peripheral Segment	\$2,167	\$243
36903	Diag Eval + Stent & PTBA Peripheral Segment	\$6,458	\$320
36904	Thrombectomy and/or Thrombolysis + Diag Eval	\$2,167	\$373
36905	Thrombectomy and/or Thrombolysis + Diag Eval + PTBA Peripheral Segment	\$4,285	\$450
36906	Thrombectomy and/or Thrombolysis + Diag Eval + Stent & PTBA Peripheral Segment	\$10,679	\$518
+36907	PTBA Central Segment	Status N1. Pkgd; No Separate Payment.	\$149
+36908	Stent & PTBA Central Segment		\$210
+36909	Embolization (Main Circuit or Accessory Veins)		\$204

(+ symbol denotes add-on code)

## HOSPITAL OUTPATIENT CODING & REIMBURSEMENT

CPT®	Abbreviated Description	APC	Hospital OP Payment <sup>3</sup>	Physician Facility Payment <sup>1</sup>
36901	Diagnostic Evaluation	5182	\$1,406	\$171
36902	Diag Eval + PTBA Peripheral Segment	5192	\$4,957	\$243
36903	Diag Eval + Stent & PTBA Peripheral Segment	5193	\$10,043	\$320
36904	Thrombectomy and/or Thrombolysis + Diag Eval	5192	\$4,957	\$373
36905	Thrombectomy and/or Thrombolysis + Diag Eval + PTBA Peripheral Segment	5193	\$10,043	\$450
36906	Thrombectomy and/or Thrombolysis + Diag Eval + Stent & PTBA Peripheral Segment	5194	\$16,064	\$518
+36907	PTBA Central Segment	N/A	Status N. Pkgd; No Separate Payment.	\$149
+36908	Stent & PTBA Central Segment	N/A		\$210
+36909	Embolization (Main Circuit or Accessory Veins)	N/A		\$204

(+ symbol denotes add-on code)

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.

1. 2021 Physician Fee Schedule. CMS-1734-F. <https://www.cms.gov/medicare/medicare-fee-service-payment/physicianfeeschedpfs-federal-regulation-notices/cms-1734-f> 2021 Conversion Factor of \$34.8931.
2. 2021 ASC Payment. CMS-1736-FC ASC. <https://www.cms.gov/medicare/medicare-fee-service-payment/ascpaymentasc-regulations-and-notices/cms-1736-fc>
3. 2021 OPPS Payment. CMS-1736-FC. <https://www.cms.gov/medicare/medicare-fee-service-payment/hospitaloutpatientpps/hospital-outpatient-regulations-and-notices/cms-1736-fc>

## CPT® Codes

CPT®	Description
36901	Introduction of needle(s) and/or catheter(s), dialysis circuit, with diagnostic angiography of the dialysis circuit, including all direct puncture(s) and catheter placement(s), injection(s) of contrast, all necessary imaging from the arterial anastomosis and adjacent artery through entire venous outflow including the inferior or superior vena cava, fluoroscopic guidance, radiological supervision and interpretation and image documentation and report
36902	Introduction of needle(s) and/or catheter(s), dialysis circuit, with diagnostic angiography of the dialysis circuit, including all direct puncture(s) and catheter placement(s), injection(s) of contrast, all necessary imaging from the arterial anastomosis and adjacent artery through entire venous outflow including the inferior or superior vena cava, fluoroscopic guidance, radiological supervision and interpretation and image documentation and report; with transluminal balloon angioplasty, peripheral dialysis segment, including all imaging and radiological supervision and interpretation necessary to perform the angioplasty
36903	Introduction of needle(s) and/or catheter(s), dialysis circuit, with diagnostic angiography of the dialysis circuit, including all direct puncture(s) and catheter placement(s), injection(s) of contrast, all necessary imaging from the arterial anastomosis and adjacent artery through entire venous outflow including the inferior or superior vena cava, fluoroscopic guidance, radiological supervision and interpretation and image documentation and report; with transcatheter placement of intravascular stent(s) peripheral dialysis segment, including all imaging and radiological supervision and interpretation necessary to perform the stenting, and all angioplasty within the peripheral dialysis segment
36904	Percutaneous transluminal mechanical thrombectomy and/or infusion for thrombolysis, dialysis circuit, any method, including all imaging and radiological supervision and interpretation, diagnostic angiography, fluoroscopic guidance, catheter placement(s), and intraprocedural pharmacological thrombolytic injection(s)
36905	Percutaneous transluminal mechanical thrombectomy and/or infusion for thrombolysis, dialysis circuit, any method, including all imaging and radiological supervision and interpretation, diagnostic angiography, fluoroscopic guidance, catheter placement(s), and intraprocedural pharmacological thrombolytic injection(s); with transluminal balloon angioplasty, peripheral dialysis segment, including all imaging and radiological supervision and interpretation necessary to perform the angioplasty
36906	Percutaneous transluminal mechanical thrombectomy and/or infusion for thrombolysis, dialysis circuit, any method, including all imaging and radiological supervision and interpretation, diagnostic angiography, fluoroscopic guidance, catheter placement(s), and intraprocedural pharmacological thrombolytic injection(s); with transcatheter placement of an intravascular stent(s), peripheral dialysis segment, including all imaging and radiological supervision and interpretation necessary to perform the stenting, and all angioplasty within the peripheral dialysis circuit
+36907	Transluminal balloon angioplasty, central dialysis segment, performed through dialysis circuit, including all imaging and radiological supervision and interpretation required to perform the angioplasty (List separately in addition to code for primary procedure)
+36908	Transcatheter placement of an intravascular stent(s), central dialysis segment, performed through dialysis circuit, including all imaging radiological supervision and interpretation required to perform the stenting, and all angioplasty in the central dialysis segment (List separately in addition to code for primary procedure)
+36909	Dialysis circuit permanent vascular embolization or occlusion (including main circuit or any accessory veins), endovascular, including all imaging and radiological supervision and interpretation necessary to complete the intervention (List separately in addition to code for primary procedure)

(+ symbol denotes add-on code)

See the CPT® 2021 Professional Edition Codebook for important instructions regarding the use of the codes shown above.

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.

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**Peripheral Interventions**

One Scimed Place

Maple Grove, MN 55311-1566

<https://www.bostonscientific.com/reimbursement>

**Medical Professionals:**

[PIReimbursement@bsci.com](mailto:PIReimbursement@bsci.com)

(844) 201-2203

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