

Hysteroscopy Procedures

2017 CODING AND REIMBURSEMENT GUIDE

Cook Medical manufactures medical devices that may be used in different hysteroscopic procedures. The table below identifies a number of Cook Medical devices and the procedures in which they are intended to be used. Without a patient's actual medical record it is impossible to know exactly how a given device was used, or exactly what procedure was performed and, consequently, how the procedure should be coded. This table is not intended to suggest how any given procedure using one of these Cook Medical devices should be coded for billing purposes. If you have any questions, please contact our reimbursement team at 800.468.1379 or by e-mail at reimbursement@cookmedical.com.

CPT® Code	Description	Novy Cornual Cannulation Set	NCircle® Nitinol Hysteroscopic Polyp Snare	Hysteroscopic Polyp Snare	Cup Biopsy Forceps	Balloon Uterine Stent	Hysteroscopic Myoma Screw	Cook® Syringe Assist Device
58340	Catheterization and introduction of saline or contrast material for saline infusion sonohysterography (SIS) or hysterosalpingography (For radiological supervision and interpretation of saline infusion sonohysterography, use 76831) (For radiological supervision and interpretation of hysterosalpingography, use 74740)	X				‡		X
58555	Hysteroscopy, diagnostic (separate procedure)					‡		X
58558	Hysteroscopy, surgical; with sampling (biopsy) of endometrium and/or polypectomy, with or without D & C		X	X	X	‡		X
58559	... with lysis of intrauterine adhesions (any method)					‡		X
58560	... with division or resection of intrauterine septum (any method)					‡		X
58561	... with removal of leiomyomata			X		‡	X	X
58562	... with removal of impacted foreign body					‡		X
58563	... with endometrial ablation (eg, endometrial resection, electrosurgical ablation, thermoablation)					‡		X
58565	... with bilateral fallopian tube cannulation to induce occlusion by placement of permanent implants					‡		X

‡ The Balloon Uterine Stent is not separately reportable outside the underlying procedure.



Disclaimer: The information provided herein reflects Cook's understanding of the procedure(s) and/or device(s) from sources that may include, but are not limited to, the CPT coding system; Medicare payment systems; commercially available coding guides; professional societies; and research conducted by independent coding and reimbursement consultants. This information should not be construed as authoritative. The entity billing Medicare and/or third party payers is solely responsible for the accuracy of the codes assigned to the services and items in the medical record. Cook does not, and should not, have access to medical records, and therefore cannot recommend codes for specific cases. When you are making coding decisions, we encourage you to seek input from the AMA, relevant medical societies, CMS, your local Medicare Administrative Contractor and other health plans to which you submit claims. Cook does not promote the off-label use of its devices.

2017 Medicare Reimbursement for Hysteroscopy Procedures