

Hystero­graphy With and Without Endometrial Biopsy

2018 CODING AND REIMBURSEMENT GUIDE

Coverage, coding and payment for medical procedures and devices can be confusing. This guide was developed to assist you in correctly reporting and identifying Medicare reimbursement for hystero­graphy and associated endometrial biopsy. If you have any questions, please contact our reimbursement team at 800.468.1379 or by e-mail at reimbursement@cookmedical.com.

Coverage

Medicare carriers may issue local coverage decisions (LCDs) listing criteria that must be met prior to coverage. Physicians are urged to review these policies (www.cms.hhs.gov/mcd/search.asp) and contact their carriers' medical directors (www.cms.hhs.gov/apps/contacts) or commercial insurers to determine if a procedure is covered.

Coding

Catheterization

58340	Catheterization and introduction of saline or contrast material for saline infusion sonohystero­graphy (SIS) or hysterosalpingo­graphy
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Gynecological Imaging

76831	Saline infusion sonohystero­graphy (SIS), including color flow Doppler, when performed
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Endometrial Biopsy

58100	Endometrial sampling (biopsy) with or without endocervical sampling (biopsy), without cervical dilation, any method (separate procedure)
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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.

Payment

2018 Medicare Reimbursement for Hysterography With and Without Endometrial Biopsy

Code	Procedure Description	Ambulatory Surgery Center		Outpatient Hospital		Physician Services	
		Facility Payment (National Medicare Avg ¹)	APC	Facility Payment (National Medicare Avg ²)	APC	Fee When Procedure Is Performed in Hospital or ASC (National Medicare Avg ³)	Fee When Procedure Is Performed in Office (National Medicare Avg ³)
58340	Catheterization and introduction of saline or contrast material for saline infusion sonohysterography (SIS) or hysterosalpingography	Packaged service; no separate payment		Service packaged into APC		\$29.88*	\$122.40
76831	Saline infusion sonohysterography (SIS), including color flow Doppler, when performed	\$84.60	5523	\$245.22		\$37.80	\$122.76
58100	Endometrial sampling (biopsy) with or without endocervical sampling (biopsy), without cervical dilation, any method (separate procedure)	\$48.96	5411	\$160.69		\$89.28	\$55.44*
Total:		\$133.56		\$405.91		\$156.96	\$300.60

*Note: Medicare's multiple procedure reductions have been applied.

¹ 2018 Medicare Ambulatory Surgery Center Fee Schedule

² 2018 Medicare Hospital Outpatient Prospective Payment System (OPPS) Fee Schedule

³ 2018 Medicare Physician Fee Schedule

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2018 physician fees for your local area can be found at the following CMS link:

<https://www.cms.gov/apps/physician-fee-schedule/overview.aspx>

or

<https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeeSched/index.html>



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