Procedures Utilizing the Entuit® Gastrostomy Feeding Tube Product Line

2024 CODING AND REIMBURSEMENT GUIDE

Coverage, coding and payment for medical procedures and devices can be confusing. This guide was developed to assist with Medicare reporting and reimbursement when using the Entuit® Gastrostomy Feeding Tube Product Line. If you have any questions, please contact our reimbursement team at 833.585.2688 or by e-mail at reimbursement@cookmedical.com

Coverage

Medicare carriers may issue Local Coverage Decisions (LCD's) listing criteria that must be met prior to coverage. Physicians are urged to review these policies (http://www.cms.hhs.gov/mcd/search.asp) and contact their carrier's local medical director (http://www.cms.hhs.gov/apps/contacts), or commercial insurers to determine if a procedure is covered.

Coding

Gastrostomy procedures are typically reported using the following Current Procedural Terminology (CPT) codes:

Placement

49440	Insertion of gastrostomy tube, percutaneous, under fluoroscopic guidance including contrast injection(s), image documentation and report *NOTE: It is not necessary to report 43752 for placement of a nasogastric (NG) or orogastric (OG) tube to insufflate the stomach prior to the procedure as it is considered integral to 49440.*

Replacement

43762	Replacement of gastrostomy tube, percutaneous, includes removal, when performed, without imaging or endoscopic guidance; not requiring revision of gastrostomy tract
43763	Replacement of gastrostomy tube, percutaneous, includes removal, when performed, without imaging or endoscopic guidance; requiring revision of gastrostomy tract
49450	Replacement of gastrostomy or cecostomy (or other colonic) tube, percutaneous, under fluoroscopic guidance including contrast injection(s), image documentation and report

Removal

The manual removal of a gastrostomy tube would be included in the Evaluation and Management Service provided on that date. If only the removal of the gastrostomy tube was provided (i.e. no other E/M effort was provided on that date), then the appropriate E/M code should be reported based on the key components performed to remove the gastrostomy tube on that date.[1]

Gastropexy

Do not report gastropexy separately when performed in conjunction with gastrostomy tube placement as it is included in the work of 49440.[2]

[1]CPT® Knowledge Base. American Medical Association. KB #5093. March 2007.
[2]CPT® Knowledge Base. American Medical Association. KB Vignette for 49440.

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Payment

2024 Medicare Reimbursement for Gastrostomy Procedures

		Ambulatory Surgery Center	*Outpatient Hospital*		*Physician Services*	
CPT® Code	Procedure Description	Facility Payment (National Medicare Avg[3])	APC	Facility Payment National Medicare Avg[4])	Fee When Procedure Is Performed In Hospital or ASC (National Medicare Avg[5])	Fee When Procedure Is Performed In Office (National Medicare Avg[5])
Insertion						
49440	Insertion of gastrostomy tube, percutaneous, under fluoroscopic guidance including contrast injection(s), image documentation and report	$831.84	5302	$1,814.88	$194.15	$801.48
Replacement						
43762	Replacement of gastrostomy tube, percutaneous, includes removal, when performed, without imaging or endoscopic guidance; not requiring revision of gastrostomy tract	$128.20	5371	$235.72	$36.34	$221.32
43763	Replacement of gastrostomy tube, percutaneous, includes removal, when performed, without imaging or endoscopic guidance; requiring revision of gastrostomy tract	$128.20	5371	$235.72	$85.45	$327.40
49450	Replacement of gastrostomy or cecostomy (or other colonic) tube, percutaneous, under fluoroscopic guidance including contrast injection(s), image documentation and report	$470.24	5301	$864.59	$62.53	$573.60

[3] 2024 Medicare Ambulatory Surgery Center Fee Schedule
[4] 2024 Medicare Hospital Outpatient Prospective Payment System (OPPS) Fee Schedule
[5] 2024 Medicare Physician Fee Schedule

2024 physician fees for your local area can be found at the following CMS links:

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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