

2022 Billing and Coding Guidelines Eleview™ submucosal injectable composition

Eleview™ submucosal injectable composition is intended for use in gastrointestinal endoscopic procedures for submucosal lift of polyps, adenomas, early-stage cancers, or other gastrointestinal mucosal lesions, prior to excision with a snare or endoscopic device.

There is no dedicated HCPCS®¹ code for Eleview™ submucosal injectable composition. Payment for its use will be included in the associated procedure code(s) reported. This guide provides general coding information for gastrointestinal endoscopic procedures involving Eleview™ submucosal injectable composition. Such procedures include endoscopic mucosal resection (EMR), endoscopic submucosal dissection (ESD), and other related procedures. This guide is not exhaustive of all the coding options for procedures involving Eleview™ submucosal injectable composition.

Endoscopic Submucosal Resection (EMR) includes three clinical components 1) submucosal injection to lift the lesion; 2) demarcation of the lesion, often by creating a pseudo polyp out of tissue; and 3) endoscopic snare resection. All components must be completed and documented to report an EMR CPT®² code. If all are not completed and documented, the submucosal injection and snare polypectomy are reported rather than EMR.

All rates provided are for the Medicare national unadjusted average rounded to the nearest whole number for 2022 and do not represent adjustment specific to the provider's location or facility.

CPT® Code	Description	Physician ³	Ambulatory Surgery Center ⁴	Hospital Outpatient Department ⁴
Endoscopic Submucosal Resection (EMR)				
43211	Esophagoscopy, flexible, transoral; with endoscopic mucosal resection	HOPD/ASC:\$237 Work RVUs* 4.2	\$707	\$1,659
43254	Esophagogastroduodenoscopy, flexible, transoral; with endoscopic mucosal resection	HOPD/ASC:\$274 Work RVUs* 4.87	\$707	\$1,659
45349	Sigmoidoscopy, flexible; with endoscopic mucosal resection	HOPD/ASC:\$201 Work RVUs*3.52	\$1,176	\$2,495

CPT® Code	Description	Physician ³	Ambulatory Surgery Center ⁴	Hospital Outpatient Department ⁴
45390	Colonoscopy, flexible; with endoscopic mucosal resection	HOPD/ASC:\$336 Work RVUs* 6.04	\$1,176	\$2,495
44403	Colonoscopy through stoma; with endoscopic mucosal resection	HOPD/ASC:\$307 Work RVUs*5.5	\$537	\$1,059
When all 3 required components of EMR are not met, report procedures separately:				
44404	Colonoscopy through stoma; with directed submucosal injection(s), any substance	HOPD/ASC:\$174 Work RVUs*3.02	\$537	\$1,059
45381**	Colonoscopy, flexible; with directed submucosal injection(s), any substance	HOPD/ASC:\$203 Work RVUs*3.56	\$537	\$1,059
45385**	Colonoscopy, flexible; with removal of tumor(s), polyp(s), or other lesion(s) by snare technique	HOPD/ASC:\$258 Work RVUs* 4.57	\$537	\$1,059

*RVU = Relative Value Unit

**Both 45381 and 45385 should be reported for colonoscopy with submucosal injection and snare polypectomy. NCCI (National Correct Coding Initiative) does not currently require the use of a multiple procedure modifier. Multiple procedure reduction payment rules apply.

Endoscopic Submucosal Dissection (ESD) does not currently have CPT coding assignment and should be reported through the unlisted procedure code based on the anatomic location of the procedure. The payer may require documentation to justify use, coverage, and payment for the unlisted code. The visualization should be reported separately. Depending on the specific code combination, NCCI may require the use of a multiple procedure modifier. Multiple procedure reduction payment rules may also apply. Effective 10/1/2021, hospitals may utilize the newly assigned HCPCS code C9779 for reporting to Medicare. Facilities are encouraged to verify with their commercial carriers if the HCPCS code is recognized.

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CPT® Code	Description	Physician ³	Ambulatory Surgery Center ⁴	Hospital Outpatient Department ⁴
C9779	Endoscopic submucosal dissection (ESD), including endoscopy or colonoscopy, mucosal closure, when performed	NA	NA	\$2,495
43499	Unlisted procedure of esophagus	Carrier Priced	Carrier Priced	\$826
43999	Unlisted procedure of stomach	Carrier Priced	Carrier Priced	\$826
44799	Unlisted procedure of small intestine	Carrier Priced	Carrier Priced	\$826
45399	Unlisted procedure of colon	Carrier Priced	Carrier Priced	\$810
45999	Unlisted procedure of rectum	Carrier Priced	Carrier Priced	\$810
43192	Esophagoscopy, rigid, transoral; with directed submucosal injection(s), any substance	HOPD/ASC:\$172 Work RVUs*2.79	\$707	\$1,659
43201	Esophagoscopy, flexible, transoral; with directed submucosal injection(s), any substance	HOPD/ASC:\$105 Work RVUs* 1.72	\$707	\$1,659
43236	Esophagogastroduodenoscopy, flexible, transoral; with directed submucosal injection(s), any substance	HOPD/ASC:\$139 Work RVUs*2.39	\$419	\$826
45335	Sigmoidoscopy, flexible; with directed submucosal injection(s), any substance	HOPD/ASC:\$67 Work RVUs* 1.04	\$411	\$810
44404	Colonoscopy through stoma; with directed submucosal injection(s), any substance	HOPD/ASC:\$174 Work RVUs*3.02	\$537	\$1,059
45381	Colonoscopy, flexible; with directed submucosal injection(s), any substance	HOPD/ASC:\$203 Work RVUs*3.56	\$537	\$1,059

Unlisted procedure codes are not included in the Medicare Physician Fee Schedule or Ambulatory Surgical Center fee scheduled. If covered, the payment rate will be determined at the time of claim processing by the carrier.

Providers may choose to provide multiple procedures on the same date of service. Bundling rules may apply, which may affect reimbursement. Please consult your internal coding guidelines.

For information related to medical policy for this product, please contact your Medtronic Reimbursement support team at 888-389-5200, option 1 or contact us via email at Rs.MedtronicGlreimbursement@medtronic.com. Additional support materials are available at <http://www.medtronic.com/covidien/en-us/support/gastrointestinal-reimbursement.html>.

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²CPT Assistant January 2017 Volume 27 Issue 1 page 6.

³Centers for Medicare and Medicaid Services. Medicare Program; CY 2022 Payment Policies Under the Physician Fee Schedule and Other Changes to Part B Payment Policies; Federal Register (86 Fed. Reg. No. 221 64996-66031) <https://www.govinfo.gov/content/pkg/FR-2021-11-19/pdf/2021-23972.pdf> Published November 19, 2021. Physician Fee Schedule - January 2022 Release. <https://www.cms.gov/medicare/medicare-fee-service-payment/physicianfeeschedpfs-relative-value-files/rvu22a>.

⁴Centers for Medicare and Medicaid Services. Medicare Program: Hospital Outpatient Prospective Payment and Ambulatory Surgical Center Payment Systems; Final Rule, Federal Register (86 Fed. Reg. No.218 63458-63477), <https://www.govinfo.gov/content/pkg/FR-2021-11-16/pdf/2021-24011.pdf> Published November 16, 2021. ASC Payment Rates - Addenda January 2022 ASC Approved HCPCS Code and Payment Rates-Updated January 4, 2022. https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/ASCPayment/11_Addenda_Updates

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