

2020 ENB PROCEDURE MEDICARE REIMBURSEMENT CODING GUIDE

Effective January 1, 2020

Medicare National Average Rates and Allowables

Providers may choose to perform multiple procedures at the same surgical encounter. When this occurs the payment may be subject to packaging rules, multiple procedure reduction or a complexity adjustment

CPT CODE ¹	CODE DESCRIPTION	PHYSICIAN ²		HOSPITAL OUTPATIENT ³		ASC ³
		MEDICARE NAT'L AVG	WORK RVUs	STATUS INDICATOR ⁵	MEDICARE NAT'L AVG	MEDICARE NAT'L AVG
BRONCHOSCOPY PROCEDURES						
31628	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with transbronchial lung biopsy(s), single lobe	\$182.61	3.55	J1	\$2,936.91	\$1,237.71
31623	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with brushing or protected brushings	\$137.86	2.63	J1	\$1,430.61	\$611.69
31629	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with transbronchial needle aspiration biopsy(s) trachea, main stem and/or lobar bronchus	\$193.80	3.75	J1	\$2,936.91	\$1,237.71
31624	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with bronchial alveolar lavage	\$139.67	2.63	J1	\$1,430.61	\$611.69
PLACEMENT OF FIDUCIAL OR DYE MARKERS						
31626	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with placement of fiducial markers, single or multiple	\$205.71	3.91	J1	\$5,440.36	\$1,895.89
ELECTROMAGNETIC NAVIGATION BRONCHOSCOPY PROCEDURE						
+31627 ⁵	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with computer-assisted, image-guided navigation (List separately in addition to code for primary procedure[s])	\$100.33	2.00	N	N/A	N/A

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Other Codes That May Be Used With the ENB Procedure

CPT CODE ¹	CODE DESCRIPTION	PHYSICIAN ²		HOSPITAL OUTPATIENT ³		ASC ³
		MEDICARE NAT'L AVG	WORK RVUs	STATUS INDICATOR ⁴	MEDICARE NAT'L AVG	MEDICARE NAT'L AVG
EBUS						
31652	Bronchoscopy with EBUS guided transtracheal and/or transbronchial sampling, one or more mediastinal and/or lymph node stations or structures	\$230.25	4.46	J1	\$2,936.91	\$1,237.71
31653	Bronchoscopy with EBUS guided transtracheal and/or transbronchial sampling, three or more mediastinal and/or lymph node stations or structures	\$255.51	4.96	J1	\$2,936.91	\$1,237.71
+31654	Bronchoscopy with transendoscopic EBUS during bronchoscopy diagnostic or therapeutic intervention for peripheral lesions. (List separately in addition to code for primary procedure[s])	\$70.01	1.40	N	N/A	N/A
PERCUTANEOUS BIOPSY (TTNA)						
32405	Biopsy, lung or mediastinum, percutaneous needle	\$93.47	1.68	J1	\$1,372.60	\$576.39
CONTOURING CODE						
32701	Thoracic target(s) delineation for stereotactic body radiation therapy (SRS/SBRT), (photon or particle beam), entire course of treatment	\$223.39	4.18	B	N/A	N/A
CORECATH						
31641	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with destruction of tumor or relief of stenosis by any method other than excision (eg, laser therapy, cryotherapy)	\$265.98	5.02	J1	\$2,936.91	\$1,237.71
MULTIPLE LOBES						
+31632	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with transbronchial lung biopsy(s), each additional lobe (List separately in addition to code for primary procedure)	\$51.61	1.03	N	N/A	N/A
+31633	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with transbronchial needle aspiration biopsy(s), each additional lobe (List separately in addition to code for primary procedure)	\$65.68	1.32	N	N/A	N/A
SUPPLY CODES						
A4648	Tissue market, implantable, any type, each	N/A	N/A	N	N/A	N/A

References:

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2. Centers for Medicare & Medicaid Services. Medicare Program; CY 2020 Revisions to Payment Policies under the Physician Fee Schedule and Other Changes to Part B Payment Policies; Medicare Shared Savings Program Requirements; Medicaid Promoting Interoperability Program Requirements for Eligible Professionals; Establishment of an Ambulance Data Collection System; Updates to the Quality Payment Program; Medicare Enrollment of Opioid Treatment Programs and Enhancements to Provider Enrollment Regulations Concerning Improper Prescribing and Patient Harm; and Amendments to Physician Self-Referral Law Advisory Opinion Regulations Final Rule; and Coding and Payment for Evaluation and Management, Observation and Provision of Self-Administered Esketamine Interim Final Rule; Final Rule, Federal Register (84 Fed. Reg. No. 221 (62568-63563) 42 CFR Parts 403, 409, 410, 411, 414, 415, 416, 418, 424, 425, 489 and 498. (<https://www.federalregister.gov/documents/2019/11/15/2019-24086/medicare-program-cy-2020-revisions-to-payment-policies-under-the-physician-fee-schedule-and-other>) Published November 15, 2019.
3. Centers for Medicare & Medicaid Services. Medicare Program: Changes to Hospital Outpatient Prospective Payment and Ambulatory Surgical Center Payment Systems and Quality Reporting Programs; Revisions of Organ Procurement Organizations Conditions of Coverage; Prior Authorization Process and Requirements for Certain Covered Outpatient Department Services; Potential Changes to the Laboratory Date of Service Policy; Changes to Grandfathered Children's Hospitals-Within-Hospitals; Notice of Closure of Two Teaching Hospitals and Opportunity To Apply for Available Slots. Final Rule, Federal Register (84 Fed. Reg. No. 218 61142 - 61492) 42 CFR Parts 405, 410, 412, 414, 416, 419, and 486. <https://www.govinfo.gov/content/pkg/FR-2019-11-12/pdf/2019-24138.pdf>. Published November 12, 2019. Addendum B, AA, D1. See also correction notice CMS-1717-CN; Addendum B, AA. <https://federalregister.gov/d/2019-28364>. Published January 3, 2020.
4. Status Indicator J1 - Paid under OPPTS; all covered Part B services on the claim are packaged with the primary service for the claim, except services with OPPTS SI=F, G, H, L and U. Status Indicator N and B- Items and Services Packaged into APC Rates. Payment is packaged into payment for other services. Therefore, there is no separate APC payment.
5. CPT code 31627 includes 3D reconstruction. Do not report 31627 in conjunction with 76376 and 76377. Use 31627 in conjunction with 31615, 31622-31626, 31628-31631, 31635, 31636, 31638-31643. CPT code 31627 is an add on code.

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