# 2025 Superficial Venous Coding Guide



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Therapy	CPT <sup>®</sup>	Description		
Endovenous Polidocanol	36465	Injection of non-compounded foam sclerosant, single vein		
Microfoam (PEM)	36466	Injection of non-compounded foam sclerosant, multiple veins, same leg		
Sclerotherapy	36470	Injection of sclerosing solution, single vein		
	36471	Injection of sclerosing solution, multiple veins, same leg		
Endovenous	36473	Endovenous ablation, mechanochemical, 1 <sup>st</sup> vein		
Mechanochemical (MOCA)	+36474	Endovenous, ablation, mechanochemical, subsequent vein(s)		
Endovenous Radiofrequency (RF) Ablation	36475	Endovenous ablation, radiofrequency, 1 <sup>st</sup> vein		
	+36476	Endovenous ablation, radiofrequency, subsequent vein(s)		
Endovenous Laser	36478	Endovenous ablation, laser, 1 <sup>st</sup> vein		
	+36479	Endovenous ablation, laser, subsequent vein(s)		
Endovenous Cyanoacrylate	36482	Endovenous ablation, chemical adhesive, 1st vein		
Adhesive Ablation (CAA)	+36483	Endovenous ablation, chemical adhesive, subsequent vein(s)		
Stab Phlebectomy	37765	Stab phlebectomy, varicose veins, 1 extremity, 10-20 incisions		
	37766	Stab phlebectomy, varicose veins, 1 extremity, > 20 incisions		
Ultrasound Guidance	+76942	Ultrasound guidance for needle placement (eg, injection)		
Duplex Scans	93970	Duplex scan of extremity, complete bilateral study		
	93971	Duplex scan of extremity, limited or unilateral study		

#### **General Coding Notes**

- Use of CPT® codes must adhere to full CPT® code descriptor and any coding rules available in the CPT® book.
- The grouping of the codes above represents how the add-on codes (+) should be reported (e.g., 36476 can only be billed with 36475).
- Add-on codes +36474, +36476, +36479, and +36483 are for treatment of any and all subsequent veins of the single extremity via separate access sites.
- All endovenous ablation codes are used once per extremity. Append modifier -50 (or LT/ RT, or units=2) for bilateral procedures. The multiple procedure reduction will apply here to the physician reimbursement.
- If a stab phlebectomy or sclerotherapy is performed adjunctively with RF ablation, modifier -51 should be applied. The multiple procedure reduction will apply here to the physician reimbursement.
- Ultrasound guidance can be billed separately with sclerotherapy procedures 36470 and 36471.
- For further coding information please contact the Medtronic's <u>Cardiovascular Health Economics</u>, <u>Policy & Reimbursement team</u>.

#### Example Diagnosis Codes - Click here to access our Coding Corner Article on Diagnosis Codes

ICD-10-CM	Description	
183.0	Varicose veins, lower extremities with ulcer	
I83.1-	Varicose veins, lower extremities with inflammation	
183.2	Varicose veins, lower extremities with both ulcer and inflammation	
183.8	Varicose veins, lower extremities with other complications	
L97	Non-pressure chronic ulcer of lower limb	

Notes: The examples above are not an inclusive list of all applicable diagnosis codes. Payers may not approve claims that include unspecified codes. Codes in these ranges have additional digits to identify the anatomic site. The complete code must be assigned for specificity and to pass edits. An additional code for severity of ulcer L97.-- is assigned with I83.0-- and I83.2--.

### Example Place of Service Codes - Click here to access our C-Code Finder & C-Code List

11	Physician Office	22	On-Campus Outpatient Hospital
19	Off-Campus Outpatient Hospital	24	Ambulatory Surgical Center

# **Example HCPCS Codes**

C1769	Guide wire	
C1888	Endovascular non-cardiac ablation catheter	
C1894	Introducer/sheath, non-laser	

Note: Not every component of these procedures has a separate C-code. For components without a specific C-code, CMS advises hospitals include all costs of the kit and all device components in an appropriate line-item charge. That is, hospitals may report the total charge for the whole kit with the associated device/device category HCPCS code. Link (pages 30-31).

# **Example Modifiers**

Modifier	Description	Modifier	Description
26	Professional component	TC	Technical component
50	Bilateral procedure	51	Multiple procedures (50% reduction)
52	Reduced procedure	53	Discontinued procedure
59	Distinct procedural service		
-XE	Distinct service - separate encounter	-XP	Distinct service - different practitioner
-XS	Distinct service - separate organ/structure	-XU	Distinct service - unusual (eg, non-overlapping)

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Cardiovascular coding, coverage, and reimbursement resources are available online at **www.medtronic.com/cvreimbursement**.
For questions or more information, contact Medtronic Vascular Health Economics, Policy & Payment at (866) 260-3987 or **rs.cardiovascularhealtheconomics@medtronic.com**.

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