

aScope™ Gastro

2023 Coding and Reimbursement Guide



Ambu

About the aScope™ Gastro

Ambu aScope Gastro is a sterile single-use endoscope used for a variety of endoscopic procedures. It offers a fast track to an efficient work scenario where endoscopes are available when you need them, provides consistent quality, and offers complete cost transparency.

HOSPITAL OUTPATIENT DEPARTMENT CODING AND PAYMENT

The following section provides an overview of potential billing and coding and Medicare national payment rates when aScope Gastro is used in the hospital outpatient department (HOPD) setting.

CPT Codes and 2023 Medicare National Payment Rates for Gastro Procedures

CPT Code ¹	Description ¹	Total RVUs (in Facility) ²	Physician Payment (in Facility) ²	HOPD Payment ²	APC ²
43233	Esophagogastroduodenoscopy, flexible, transoral; with dilation of esophagus with balloon (30 mm diameter or larger)	6.71	\$227.38	\$1,741.59	5302
43235	Esophagogastroduodenoscopy, flexible, transoral; diagnostic, including collection of specimen(s) by brushing or washing, when performed	3.60	\$121.99	\$825.51	5301
43236	Esophagogastroduodenoscopy, flexible, transoral; with directed submucosal injection(s), any substance	4.04	\$136.90	\$825.51	5301
43237	Esophagogastroduodenoscopy, flexible, transoral; with endoscopic ultrasound examination limited to the esophagus, stomach or duodenum, and adjacent structures	5.74	\$194.51	\$1,741.59	5302
43238	Esophagogastroduodenoscopy, flexible, transoral; with transendoscopic ultrasound-guided intramural or transmural fine-needle aspiration/biopsy(s)	6.80	\$230.43	\$1,741.59	5302
43239	Esophagogastroduodenoscopy, flexible, transoral; biopsy; single or multiple	4.06	\$137.58	\$825.51	5301
43240	Esophagogastroduodenoscopy, with transmural drainage of pseudocyst	11.46	\$388.35	\$5,240.72	5331
43241	Esophagogastroduodenoscopy, flexible, transoral; insertion of intraluminal tube or catheter	4.16	\$140.97	\$1,741.59	5302
43243	Esophagogastroduodenoscopy, flexible, transoral; injection sclerosis of esophageal/gastric	6.96	\$235.86	\$1,741.59	5302
43244	Esophagogastroduodenoscopy, flexible, transoral; band ligation of esophageal/gastric varices	7.18	\$243.31	\$1,741.59	5302
43245	Esophagogastroduodenoscopy, flexible, transoral; with dilation of gastric/duodenal stricture(s) (eg, balloon, bougie)	5.16	\$174.86	\$1,741.59	5302
43246	Esophagogastroduodenoscopy, flexible, transoral; with directed placement of percutaneous gastrostomy tube	5.89	\$199.60	\$1,741.59	5302
43247	Esophagogastroduodenoscopy, flexible, transoral; with removal of foreign body(s)	5.19	\$175.88	\$825.51	5301
43248	Esophagogastroduodenoscopy, flexible, transoral; insertion of guide wire followed by passage of dilator(s) through esophagus over guide	4.87	\$165.03	\$825.51	5301

CPT Code ¹	Description ¹	Total RVUs (in Facility) ²	Physician Payment (in Facility) ²	HOPD Payment ²	APC ²
43249	Esophagogastroduodenoscopy, flexible, transoral; transendoscopic balloon dilation of esophagus (<30 mm)	4.51	\$152.83	\$1,741.59	5302
43250	Esophagogastroduodenoscopy, flexible, transoral; with removal of tumor(s), polyp(s), or other lesion(s) by hot biopsy forceps	5.00	\$169.44	\$1,741.59	5302
43251	Esophagogastroduodenoscopy, flexible, transoral; with removal of tumor(s), polyp(s), or other lesion(s) by snare technique	5.75	\$194.85	\$1,741.59	5302
43255	Esophagogastroduodenoscopy, flexible, transoral; with control of bleeding, any method	5.87	\$198.92	\$1,741.59	5302
43266	Esophagogastroduodenoscopy, flexible, transoral; with placement of endoscopic stent	6.38	\$230.77	\$5,240.72	5331
43270	Esophagogastroduodenoscopy, flexible, transoral; with ablation of tumor(s), polyp(s), or other lesion(s) (includes pre- and post-dilation and guide wire passage, when performed)	6.57	\$222.64	\$1,741.59	5302
43279	Laparoscopy, surgical, esophagomy (Heller type), with fundoplasty, when performed	38.19	\$1,294.15	Medicare Inpatient only	
43280	Laparoscopy, surgical, esophagogastric fundoplasty (eg, Nissen, Toupet procedures)	32.16	\$1,089.81	\$9,087.30	5362
43281	Laparoscopy, surgical, repair of paraesophageal hernia, includes fundoplasty, when performed; without implantation of mesh	45.80	\$1,552.03	\$9,087.30	5362
43282	Laparoscopy, surgical, repair of paraesophageal hernia, includes fundoplasty, when performed; with implantation of mesh	51.51	\$1,745.53	\$9,087.30	5362
43284	Laparoscopy, surgical, esophageal sphincter augmentation procedure, placement of sphincter augmentation (ie, magnetic band), including cruroplasty when performed	19.53	\$661.82	\$9,087.30	5362
43285	Removal of esophageal sphincter augmentation device	20.10	\$681.13	\$5,212.15	5361
43497	Lower esophageal myotomy, transoral (IE, Peroral Endoscopic Myotomy [POEM])	23.52	\$797.03	\$3,260.69	5303
43499	Unlisted procedure, esophagus	0	Negotiated Reimbursement	\$825.51	5301
43620	Gastrectomy, total, with esophagoenterostomy	59.08	\$2,002.06	Medicare Inpatient Only	
43621	Gastrectomy, total, with esophagoenterostomy, with Roux-en-Y reconstruction	67.58	\$2,290.10	Medicare Inpatient Only	
43644	Laparoscopy, surgical, gastric restrictive procedure with gastric bypass and Roux-en-Y gastroenterostomy (roux limb 150 cm or less)	51.83	\$1,756.37	Medicare Inpatient Only	

CPT Code ¹	Description ¹	Total RVUs (in Facility) ²	Physician Payment (in Facility) ²	HOPD Payment ²	APC ²
43846	Gastric restrictive procedure, with gastric bypass, for morbid obesity; with short limb (less than 100 cm) Roux-en-Y gastroenterostomy	49.35	\$1,672.33		Medicare Inpatient Only
43847	Gastric restrictive procedure, with small intestine reconstruction to limit absorption; with long limb (>150 cm) Roux-en-Y	53.99	\$1,829.57		Medicare Inpatient Only

REFERENCES

1. American Medical Association, CPT 2023 Professional Edition (2023)
2. Centers for Medicare and Medicaid Services, 2023 Medicare Physician Fee Schedule, available at: <https://www.cms.gov/medicare/medicare-fee-for-service-payment/physicianfeesched>

INDICATIONS FOR USE

The aScope Gastro is a sterile, single-use, flexible gastroscope intended to be used for endoscopic access to and examination of the upper gastrointestinal anatomy. The aScope Gastro is intended to provide visualization via a compatible Ambu displaying unit and to be used with endotherapy accessories and other ancillary equipment.

DISCLAIMER

The reimbursement information provided in this guide was obtained from third-party sources and information that is publicly available on the internet. The reported Medicare national average payments are subject to change and may vary based on geographic location and other individual factors. Information in this guide is not legal advice, nor is it advice about how to code or complete claims for payment. It is the provider's responsibility to report the appropriate codes based on the procedures furnished to a specific patient and the patient's documented medical condition. Providers are also responsible for submitting claims for these services consistent with the specific payer billing requirements.

Payer billing, coding, and coverage requirements vary from payer to payer and are updated and change over time. Ambu encourages providers to verify current billing, coding and coverage policies and requirements with the specific payer if the provider has questions. Providers may also contact the American Gastroenterology Association (AGA), the American Society for Gastrointestinal Endoscopy (ASGE) and/or the American Medical Association (AMA).

Ambu does not promote the use of its products outside of the FDA cleared indications for use and labeling.

For more information, please contact (800) 262-8462, select option 7 or email us-reimbursement@ambu.com

For a customized cost analysis of reusable vs. single-use endoscopes, visit www.singleuseendoscopy.com/calculators or contact us-healthecon@ambu.com



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