

aScope 4 Broncho &  
aScope 5 Broncho HD

# 2025 Bronchoscopy Coding and Reimbursement Guide

Ambu® aScope™ Broncho Portfolio



**Ambu**

# Exploring aScope 4 Broncho & aScope 5 Broncho HD

The aScope 5 Broncho is a single-use, sterile, flexible bronchoscope that offers an intuitive, lightweight design with similar functionality to reusable bronchoscopes. The aScope 5 Broncho HD is available in 2 sizes (5.0/2.2 and 5.6/2.8) and aScope 5 Broncho is available in Thin and Ultrathin sizes (4.2/2.2 and 2.7/1.2). Additionally, the single-use Ambu aScope 5 Broncho HD qualifies for incremental reimbursement under the Transitional Pass-Through code.

The single-use Ambu aScope 4 Broncho is a family of single-use, sterile bronchoscopes that can be used for a variety of procedures including intubations, airway management, thoracic anesthesia and routine bronchoscopy. Both aScope 5 Broncho and aScope 4 Broncho families deliver a no-hassle, sterile solution for all your needs.

Note: The HCPCS code for the aScope 5 Broncho HD is C1601. Code C1601 should be reported on applicable claims in order to receive additional reimbursement through the TPT program. This code is valid until December 31st, 2026.



## Product Specifications & Indications for Use:

- [aScope 4 Broncho](#)
- [aScope 5 Broncho HD](#)
- [aScope 5 Broncho 2.7/1.2 & 4.2/2.2](#)

For clinical and economic information on aScope 4 Broncho and aScope 5 Broncho HD, please visit our product page: [Supporting Evidence - aScope 4 Broncho](#)

# Hospital Outpatient, Ambulatory Surgical Center, and Physician Office Coding and Payment: National

The table below provides an overview of potential procedural codes and the associated Medicare national payment rates when aScope Broncho endoscopes are used in hospital outpatient departments, ambulatory surgical centers, and physician offices.

## CPT Codes and 2025 Medicare National Payment Rates for Bronchoscopy Procedures

CPT® Code <sup>1</sup>	Descriptor	Physician Payment <sup>2</sup>		Facility Payment <sup>3</sup>		
		Non-Facility	Facility	APC	HOPD	ASC
31615	Tracheobronchoscopy through established tracheostomy incision	\$165.61	\$112.57	5162	\$509.25	\$273.04
31622	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with cell washing	\$243.25	\$126.15	5153	\$1,724.47	\$792.14
31623	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with brushing or protected brushings	\$264.59	\$125.50	5153	\$1,724.47	\$792.14
31624	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with bronchial alveolar lavage	\$247.45	\$127.45	5153	\$1,724.47	\$792.14
31625	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with bronchial or endobronchial biopsy(s), single or multiple sites	\$334.14	\$148.15	5153	\$1,724.47	\$792.14
31626	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with placement of fiducial markers, single or multiple	\$739.12	\$188.90	5155	\$6,922.47	\$2,425.84
31628	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with transbronchial lung biopsy(s), single lobe	\$355.16	\$166.58	5154	\$3,686.95	\$1,610.31
31629	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with transbronchial needle aspiration biopsy(s). Trachea, main stem and/or lobar bronchus(i)	\$430.21	\$177.58	5154	\$3,686.95	\$1,610.31
31630	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with tracheal/bronchial dilation or closed reduction of fracture	n/a	\$189.23	5154	\$3,686.95	\$1,610.31
31631	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with placement of tracheal stent(s) (includes tracheal/bronchial dilation as required)	n/a	\$215.75	5155	\$6,922.47	\$2,425.84
31632	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with transbronchial lung biopsy(s), each additional lobe (list separately in addition to code for primary procedure)	\$62.11	\$45.93	n/a	\$0.00	\$0.00
31633	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with transbronchial needle aspiration biopsy(s), each additional lobe (list separately in addition to code for primary procedure)	\$77.96	\$59.84	n/a	\$0.00	\$0.00

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## CPT Codes and 2025 Medicare National Payment Rates for Bronchoscopy Procedures

CPT® Code¹	Descriptor	Physician Payment²		Facility Payment³		
		Non-Facility	Facility	APC	HOPD	ASC
31634	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with balloon occlusion, with assessment of air leak, with administration of occlusive substance (eg, fibrin glue), if performed	\$1,357.58	\$179.52	5155	\$6,922.47	\$2,425.84
31635	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with removal of foreign body	\$283.68	\$166.91	5153	\$1,724.47	\$792.14
31636	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with placement of bronchial stent(s)(includes tracheal/bronchial dilation as required), initial bronchus	n/a	\$207.02	5155	\$6,922.47	\$3,442.82
31637	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, each additional major bronchus stented (list separately in addition to code for primary procedure)	n/a	\$72.13	n/a	\$0.00	\$0.00
31638	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with revision of tracheal or bronchial stent inserted at previous session (includes tracheal/bronchial dilation as required)	n/a	\$234.19	5155	\$6,922.47	\$2,425.84
31640	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with excision of tumor	n/a	\$234.19	5154	\$3,686.95	\$1,610.31
31641	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with destruction of tumor or relief of stenosis by any method other than excision (eg laser therapy, cryotherapy)	n/a	\$240.01	5154	\$3,686.95	\$1,610.31
31643	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with placement of catheter(s) for intracavitary radioelement application	n/a	\$161.09	5153	\$1,724.47	\$792.14
31645	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with therapeutic aspiration of tracheobronchial tree, initial	\$265.89	\$140.06	5153	\$1,724.47	\$792.14
31646	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with therapeutic aspiration of tracheobronchial tree, subsequent, same hospital stay	n/a	\$135.86	5152	\$388.31	\$208.71
31647	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with balloon occlusion, when performed, assessment of air leak, airway sizing, and insertion of bronchial valve(s), initial lobe	n/a	\$195.05	5155	\$6,922.47	\$3,343.62
31648	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with removal of bronchial valve(s), initial lobe	n/a	\$186.96	5154	\$3,686.95	\$1,610.31
31649	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with removal of bronchial valve(s), each additional lobe (list separately in addition to code for primary procedure)	\$65.66	\$65.66	5153	\$1,724.47	\$792.14
31652	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with endobronchial ultrasound (EBUS) guided transtracheal and/or transbronchial sampling (eg, aspiration(s)/ biopsy[ies]), one or two mediastinal and/or hilar lymph node stations or structures	\$1,155.09	\$209.61	5154	\$3,686.95	\$1,610.31

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## CPT Codes and 2025 Medicare National Payment Rates for Bronchoscopy Procedures

CPT® Code <sup>1</sup>	Descriptor	Physician Payment <sup>2</sup>		Facility Payment <sup>3</sup>		
		Non-Facility	Facility	APC	HOPD	ASC
31653	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with endobronchial ultrasound (EBUS) guided transtracheal and/or transbronchial sampling (eg, aspiration(s)/ biopsy[ies]), 3 or more mediastinal and/or hilar lymph node stations or structures	\$1,197.47	\$232.25	5154	\$3,686.95	\$1,610.31
31654	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with endobronchial ultrasound (EBUS) during bronchoscopic diagnostic or therapeutic intervention(s) for peripheral lesion(s)	\$115.48	\$63.40	n/a	n/a	\$0.00
31660	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with bronchial thermoplasty, 1 lobe	n/a	\$178.88	5155	\$6,922.47	n/a
31661	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with bronchial thermoplasty, 2 or more lobes	n/a	\$189.55	5155	\$6,922.47	n/a
31785	Excision of tracheal tumor or carcinoma; cervical	n/a	\$1,044.79	5165	\$5,915.66	n/a
31627	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with computer-assisted, image-guided navigation	\$978.16	\$91.22	n/a	n/a	\$0.00
31632	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with transbronchial lung biopsy(s), each additional lobe (list separately in addition to code for primary procedure)	\$62.11	\$45.93	n/a	n/a	\$0.00
31633	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with transbronchial needle aspiration biopsy(s), each additional lobe (list separately in addition to code for primary procedure)	\$77.96	\$59.84	n/a	n/a	\$0.00
31637	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, each additional major bronchus stented (list separately in addition to code for primary procedure)	n/a	\$72.13	n/a	n/a	\$0.00
31780	Excision tracheal stenosis and anastomosis; cervical	n/a	\$1,167.71	n/a	n/a	n/a
31781	Excision tracheal stenosis and anastomosis; cervicothoracic	n/a	\$1,397.37	n/a	n/a	n/a
31786	Excision of tracheal tumor or carcinoma; thoracic	n/a	\$1,383.14	n/a	\$0.00	n/a
32815	Open closure of major bronchial fistula	n/a	\$2,680.23	n/a	n/a	n/a



# Transitional Pass-Through Payment: A Medicare Program<sup>4</sup>

Transitional Pass-Through Payment (TPT) was awarded by Medicare to single-use bronchoscopes effective 01/01/2024. These payments are in addition to the procedure payment and are intended to facilitate Medicare beneficiary access to the benefits of new and innovative medical devices, drugs, and biologicals that demonstrate a substantial clinical improvement over existing technology.<sup>4</sup> TPT for aScope 5 Broncho HD will remain in effect until 12/31/2026.

For further information about TPT, visit our aScope 5 Broncho HD TPT page at <https://www.ambuusa.com/ascope5-broncho-tpt-payments>

To report the use of aScope 5 Broncho HD, report the following code in addition to the applicable procedure (CPT) code:

HCPCS	Descriptor
C1601	Endoscope, single-use (i.e., disposable), pulmonary, imaging/illumination device (insertable)

Note: Some Medicare Administrative Contractors may require an invoice to be submitted with the claim.

## Revenue Code

Revenue Codes	Descriptor
272	Sterile Supplies
278 <sup>6</sup>	Medical/surgical supplies and implants; other implants

## aScope 5 Broncho HD Device Offset Amounts:

A device offset is the part of the APC payment for a procedure that is associated with the cost of the pass-through device. Each CPT code will have a specific device offset amount which will be used to calculate the TPT payment. This amount will be deducted from any TPT payment for the use of the device. In the event that the offset is more than the cost of the device, no additional payment will be made by CMS. Device offset amounts for each CPT code are set by CMS. The full list of offsets for C1601 can be found in the offset table below.

Broncho	Descriptor	HOPD	ASC
31615	Tracheobronchoscopy through established tracheostomy incision	\$0.51	\$0.03
31622	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with cell washing	\$11.73	\$2.53
31623	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with brushing or protected brushings	\$11.73	\$1.19
31624	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with bronchial alveolar lavage	\$11.73	\$1.35
31625	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with bronchial or endobronchial biopsy(s), single or multiple sites	\$11.73	\$6.26
31626	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with placement of fiducial markers, single or multiple	\$520.57	\$318.76
31628	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with transbronchial lung biopsy(s), single lobe	\$105.08	\$25.44
31629	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with transbronchial needle aspiration biopsy(s). Trachea, main stem and/or lobar bronchus(i)	\$105.08	\$26.89
31630	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with tracheal/ bronchial dilation or closed reduction of fracture	\$105.08	\$247.34

Broncho	Descriptor	HOPD	ASC
31631	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with placement of tracheal stent(s) (includes tracheal/bronchial dilation as required)	\$520.57	\$381.83
31634	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with balloon occlusion, with assessment of air leak, with administration of occlusive substance (eg, fibrin glue), if performed	\$520.57	\$394.20
31635	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with removal of foreign body	\$11.73	\$14.89
31636	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with placement of bronchial stent(s) (includes tracheal/bronchial dilation as required), initial bronchus	\$520.57	\$2,195.70
31638	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with revision of tracheal or bronchial stent inserted at previous session (includes tracheal/bronchial dilation as required)	\$520.57	\$336.95
31640	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with excision of tumor	\$105.08	\$36.23
31641	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with destruction of tumor or relief of stenosis by any method other than excision (eg laser therapy, cryotherapy)	\$105.08	\$117.23
31643	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with placement of catheter(s) for intracavitary radioelement application	\$11.73	\$9.03
31645	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with therapeutic aspiration of tracheobronchial tree, initial	\$11.73	\$6.81
31646	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with therapeutic aspiration of tracheobronchial tree, subsequent, same hospital stay	\$0.08	\$11.06
31647	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with balloon occlusion, when performed, assessment of air leak, airway sizing, and insertion of bronchial valve(s), initial lobe	\$520.57	\$1,981.51
31648	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with removal of bronchial valve(s), initial lobe	\$105.08	\$24.15
31652	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with endobronchial ultrasound (EBUS) guided transtracheal and/or transbronchial sampling (eg, aspiration(s)/ biopsy[ies]), one or two mediastinal and/or hilar lymph node stations or structures	\$105.08	\$15.14
31653	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with endobronchial ultrasound (EBUS) guided transtracheal and/or transbronchial sampling (eg, aspiration(s)/ biopsy[ies]), 3 or more mediastinal and/or hilar lymph node stations or structures	\$105.08	\$11.43
31660	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with bronchial thermoplasty, 1 lobe	\$520.57	n/a
31661	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with bronchial thermoplasty, 2 or more lobes	\$520.57	n/a
31785	Excision of tracheal tumor or carcinoma; cervical	\$291.05	n/a
31627	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with computer- assisted, image-guided navigation	n/a	\$0.00
31632	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with transbronchial lung biopsy(s), each additional lobe (list separately in addition to code for primary procedure)	n/a	\$0.00
31633	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with transbronchial needle aspiration biopsy(s), each additional lobe (list separately in addition to code for primary procedure)	n/a	\$0.00
31637	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, each additional major bronchus stented (list separately in addition to code for primary procedure)	n/a	\$0.00
31649	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with removal of bronchial valve(s), each additional lobe (list separately in addition to code for primary procedure)	\$11.73	\$0.00

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Broncho	Descriptor	HOPD	ASC
31651	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with balloon occlusion, when performed, assessment of air leak, airway sizing, and insertion of bronchial valve(s), each additional lobe (List separately in addition to code for primary procedure[s])	n/a	\$0.00
31654	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with endobronchial ultrasound (EBUS) during bronchoscopic diagnostic or therapeutic intervention(s) for peripheral lesion(s)	n/a	\$0.00
31780	Excision tracheal stenosis and anastomosis; cervical	n/a	n/a
31781	Excision tracheal stenosis and anastomosis; cervicothoracic	n/a	n/a
31786	Excision of tracheal tumor or carcinoma; thoracic	n/a	n/a
31800	Suture of tracheal wound or injury; cervical	n/a	n/a
31805	Suture of tracheal wound or injury; intrathoracic	n/a	n/a
32815	Open closure of major bronchial fistula	n/a	n/a





# Physician Relative Value Units (RVUs)

## 2025 Physician Relative Value Units (RVUs)<sup>5</sup>

Conversion Factor: \$32.3465

CPT Code	Descriptor	Non-Facility	Facility
31615	Tracheobronchoscopy through established tracheostomy incision	5.12	3.48
31622	Bronchoscopy, rigid or flexible, including fluroscopic guidance, when performed; diagnostic, with cell washing	7.52	3.9
31623	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with brushing or protected brushings	8.18	3.88
31624	Bronchoscopy, rigid or flexible, including fluroscopic guidance, when performed; diagnostic, with broncheal alveolar lavage	7.65	3.94
31625	Bronchoscopy, rigid or flexible, including fluroscopic guidance, when performed; diagnostic, with bronchial or endobronchial biopsy(s), single or multiple sites	10.33	4.58
31626	Bronchoscopy, rigid or flexible, including fluroscopic guidance, when performed; diagnostic, with placement of fiducial markers, single or multiple	22.85	5.84
31628	Bronchoscopy, rigid or flexible, including fluroscopic guidance, when performed; diagnostic, with transbronchial lung biopsy(s), single lobe	10.98	5.15
31629	Bronchoscopy, rigid or flexible, including fluroscopic guidance, when performed; diagnostic, with transbronchial needle aspiration biopsy(s). Trachea, main stem and/or lobar bronchus(i)	13.3	5.49
31630	Bronchoscopy, rigid or flexible, including fluroscopic guidance, when performed; diagnostic, with tracheal/ bronchial dilation or closed reduction of fracture	n/a	5.85
31631	Bronchoscopy, rigid or flexible, including fluroscopic guidance, when performed; diagnostic, with placement of tracheal stent(s) (includes tracheal/bronchial dilation as required)	n/a	6.67
31632	Bronchoscopy, rigid or flexible, including fluroscopic guidance, when performed; diagnostic, with transbronchial lung biopsy(s), each additional lobe (list separately in addition to code for primary procedure)	1.92	1.42
31633	Bronchoscopy, rigid or flexible, including fluroscopic guidance, when performed; diagnostic, with transbronchial needle aspiration biopsy(s), each additional lobe (list separately in addition to code for primary procedure)	2.41	1.85
31634	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with balloon occlusion, with assessment of air leak, with administration of occlusive substance (eg, fibrin glue), if performed	41.97	5.55
31635	Bronchoscopy, rigid or flexible, including fluroscopic guidance, when performed; diagnostic, with removal of foreign body	8.77	5.16
31636	Bronchoscopy, rigid or flexible, including fluroscopic guidance, when performed; diagnostic, with placement of bronchial stent(s)(includes tracheal/bronchial dilation as required), initial bronchus	n/a	6.4
31637	Bronchoscopy, rigid or flexible, including fluroscopic guidance, when performed; diagnostic, each additional major bronchus stented (list separately in addition to code for primary procedure)	n/a	2.23
31638	Bronchoscopy, rigid or flexible, including fluroscopic guidance, when performed; diagnostic, with revision of tracheal or bronchial stent insreted at previous session (includes tracheal/ bronchial dilation as required)	n/a	7.24
31640	Bronchoscopy, rigid or flexible, including fluroscopic guidance, when performed; diagnostic, with excision of tumor	n/a	7.24
31641	Bronchoscopy, rigid or flexible, including fluroscopic guidance, when performed; diagnostic, with destruction of tumor or relief of stenosis by any method other than excision (eg laser therapy, cryotherapy)	n/a	7.42
31643	Bronchoscopy, rigid or flexible, including fluroscopic guidance, when performed; diagnostic, with placement of catheter(s) for intracavitary radioelement application	n/a	4.98

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## 2025 Physician Relative Value Units (RVUs)<sup>5</sup>

Conversion Factor: \$32.3465

CPT Code	Descriptor	Non-Facility	Facility
31645	Bronchoscopy, rigid or flexible, including fluroscopic guidance, when performed; diagnostic, with therapeutic aspiration of tracheobronchial tree, initial	8.22	4.33
31646	Bronchoscopy, rigid or flexible, including fluroscopic guidance, when performed; diagnostic, with therapeutic aspiration of tracheobronchial tree, subsequent, sams hospital stay	n/a	4.2
31647	Bronchoscopy, rigid or flexible, including fluroscopic guidance, when performed; diagnostic, with balloon occlusion, when performed, assessment of air leak, airway sizing, and insertion of bronchial valve(s), initial lobe	n/a	6.03
31648	Bronchoscopy, rigid or flexible, including fluroscopic guidance, when performed; diagnostic, with removal of bronchial valve(s), initial lobe	n/a	5.78
31649	Bronchoscopy, rigid or flexible, including fluroscopic guidance, when performed; diagnostic, with removal of bronchial valve(s), each additional lobe (list separately in addition to code for primary procedure)	2.03	2.03
31651	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with balloon occlusion, when performed, assessment of air leak, airway sizing, and insertion of bronchial valve(s), each additional lobe (List separately in addition to code for primary procedure[s])	2.22	2.22
31652	Bronchoscopy, rigid or flexible, including fluroscopic guidance, when performed; diagnostic, with endobronchial ultrasound (EBUS) guided transtracheal and/or transbronchial sampling (eg, aspiration(s)/ biopsy[ies]), one or two mediastinal and/or hilar lymph node stations or structures	35.71	6.48
31653	Bronchoscopy, rigid or flexible, including fluroscopic guidance, when performed; diagnostic, with endobronchial ultrasound (EBUS) guided transtracheal and/or transbronchial sampling (eg, aspiration(s)/ biopsy[ies]), 3 or more mediastinal and/or hilar lymph node stations or structures	37.02	7.18
31653	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with endobronchial ultrasound (EBUS) guided transtracheal and/or transbronchial sampling (eg, aspiration[s]/biopsy[ies]), 3 or more mediastinal and/or hilar lymph node stations or structures	37.02	7.18
31660	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with bronchial thermoplasty, 1 lobe	n/a	5.53
52332	With insertion of indwelling ureteral stent (e.g., Gibbons or double-J type)	11.21	4.64
52334	With insertion of ureteral guide wire through kidney to establish a percutaneous nephrostomy, retrograde	n/a	5.46
31660	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with bronchial thermoplasty, 1 lobe	n/a	5.53
31661	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with bronchial thermoplasty, 2 or more lobes	n/a	5.86
31780	Excision tracheal stenosis and anastomosis; cervical	n/a	36.1
31781	Excision tracheal stenosis and anastomosis; cervicothoracic	n/a	43.2
31785	Excision of tracheal tumor or carcinoma; cervical	n/a	32.3
31786	Excision of tracheal tumor or carcinoma; thoracic	n/a	42.76
31800	Suture of tracheal wound or injury; cervical	n/a	21.2
31805	Suture of tracheal wound or injury; intrathoracic	n/a	24.45
32815	Open closure of major bronchial fistula	n/a	n/a

# Medicare Hospital Inpatient Coding: ICD-10-PCS

MS-DRG <sup>6</sup>	Descriptor
0B9F8ZX	Drainage of Right Lower Lung Lobe, Via Natural or Artificial Opening Endoscopic, Diagnostic
0B9J8ZX	Drainage of Left Lower Lung Lobe, Via Natural or Artificial Opening Endoscopic, Diagnostic
0B9D8ZX	Drainage of Right Middle Lung Lobe, Via Natural or Artificial Opening Endoscopic, Diagnostic
0B9C8ZX	Drainage of Right Upper Lung Lobe, Via Natural or Artificial Opening Endoscopic, Diagnostic
07B74ZX	Excision of Thorax Lymphatic, Percutaneous Endoscopic Approach, Diagnostic
0B9G8ZX	Drainage of Left Upper Lung Lobe, Via Natural or Artificial Opening Endoscopic, Diagnostic
0B9H8ZX	Drainage of Lung Lingula, Via Natural or Artificial Opening Endoscopic, Diagnostic
0B9M8ZX	Drainage of Bilateral Lungs, Via Natural or Artificial Opening Endoscopic, Diagnostic
0BBF8ZX	Excision of Right Lower Lung Lobe, Via Natural or Artificial Opening Endoscopic, Diagnostic
0BBC8ZX	Excision of Right Upper Lung Lobe, Via Natural or Artificial Opening Endoscopic, Diagnostic
0BBJ8ZX	Excision of Left Lower Lung Lobe, Via Natural or Artificial Opening Endoscopic, Diagnostic
0BBG8ZX	Excision of Left Upper Lung Lobe, Via Natural or Artificial Opening Endoscopic, Diagnostic
0B9L8ZX	Drainage of Left Lung, Via Natural or Artificial Opening Endoscopic, Diagnostic
0B9K8ZX	Drainage of Right Lung, Via Natural or Artificial Opening Endoscopic, Diagnostic
0BBD8ZX	Excision of Right Middle Lung Lobe, Via Natural or Artificial Opening Endoscopic, Diagnostic
0WHQ7YZ	Insertion of Other Device into Respiratory Tract, Via Natural or Artificial Opening
0BBH8ZX	Excision of Lung Lingula, Via Natural or Artificial Opening Endoscopic, Diagnostic
0BBK8ZX	Excision of Right Lung, Via Natural or Artificial Opening Endoscopic, Diagnostic
0BBL8ZX	Excision of Left Lung, Via Natural or Artificial Opening Endoscopic, Diagnostic
0BBM8ZX	Excision of Bilateral Lungs, Via Natural or Artificial Opening Endoscopic, Diagnostic
0BBG7ZX	Excision of Left Upper Lung Lobe, Via Natural or Artificial Opening, Diagnostic
0BBF7ZX	Excision of Right Lower Lung Lobe, Via Natural or Artificial Opening, Diagnostic
0BBC7ZX	Excision of Right Upper Lung Lobe, Via Natural or Artificial Opening, Diagnostic
0BBJ7ZX	Excision of Left Lower Lung Lobe, Via Natural or Artificial Opening, Diagnostic
0BBM4ZX	Excision of Bilateral Lungs, Percutaneous Endoscopic Approach, Diagnostic
0BH073Z	Insertion of Infusion Device into Tracheobronchial Tree, Via Natural or Artificial Opening
0BH07DZ	Insertion of Intraluminal Device into Tracheobronchial Tree, Via Natural or Artificial Opening
0BBM7ZX	Excision of Bilateral Lungs, Via Natural or Artificial Opening, Diagnostic
0BBL7ZX	Excision of Left Lung, Via Natural or Artificial Opening, Diagnostic
0BBK7ZX	Excision of Right Lung, Via Natural or Artificial Opening, Diagnostic
0BBD7ZX	Excision of Right Middle Lung Lobe, Via Natural or Artificial Opening, Diagnostic

# Medicare Hospital Inpatient Coding MS-DRG Payments: National

MS-DRG <sup>6</sup>	Descriptor	Payment Rate
166	Other Respiratory System O.R. Procedures with MCC	\$25,021.33
167	Other Respiratory System O.R. Procedures with CC	\$11,871.33
168	Other Respiratory System O.R. Procedures without CC/MCC	\$8,796.13
264	Other Circulatory System O.R. Procedures	\$22,707.62
981	Extensive O.R. Procedures Unrelated to Principal Diagnosis with MCC	\$30,890.40
982	Extensive O.R. Procedures Unrelated to Principal Diagnosis with CC	\$15,908.79
983	Extensive O.R. Procedures Unrelated to Principal Diagnosis without CC/MCC	\$10,838.25
987	Non extensive O.R. Procedures Unrelated to Principal Diagnosis with MCC	\$22,760.25
988	Non extensive O.R. Procedures Unrelated to Principal Diagnosis with CC	\$11,149.47

CC: Comorbid Condition; MCC: Major Comorbid Condition



# References

1. Current Procedural Terminology (CPT) Copyright 2024 American Medical Association
2. Centers for Medicare and Medicaid Services, 2025 Medicare Physician Fee Schedule, available at: <https://www.cms.gov/medicare/medicare-fee-for-service-payment/physicianfeesched>
3. 2025 CMS OPPS/ASC Final Rule, Addendum AA and B. Accessed via: <https://www.cms.gov/medicare/payment/prospective-payment-systems/ambulatory-surgical-center-asc/asc-payment-rates-addenda2023> CMS OPPS/ASC Final Rule 88 FR 81540, <https://www.federalregister.gov/d/2022-23918>
4. Ambu Inc. CMS Grants Additional Reimbursement for Ambu aScope 5 HD Through a Transitional Passthrough Payment (TPT). Ambu USA. Published January 1, 2023. Accessed January 24, 2025. <https://www.ambuusa.com/ascope5-broncho-tpt-payments>
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6. CMS FY 2025 IPPS Final Rule MS-DRG: <https://www.federalregister.gov/d/2024-22501>

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reusable vs. single-use endoscopes,  
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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.

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