

COMMERCIAL REIMBURSEMENT POLICY

Multiple Endoscopic Procedures

Active

Policy Number: Surgery/Interventional Procedure - 008
Policy Title: Multiple Endoscopic Procedures
Section: Surgery/Interventional Procedure
Effective Date: 01/01/24

Description

This policy addresses the correct coding of diagnostic and surgical endoscopies when performed during the same operative session.

Definitions

Endoscopy: A procedure that allows a doctor to view the inside of a person's body using an endoscope such as a colonoscopy, arthroscopy, etc. Endoscopic procedures can be:

- *Diagnostic:* procedure to diagnose a disease or condition
- *Screening:* examination only for a specific disease such as cancer
- *Therapeutic:* to treat a disease or condition

Policy Statement

A base or screening endoscopy is always included as part of a diagnostic or therapeutic endoscopy procedure and should not be separately reported (e.g., 45378 (colonoscopy) is included as part of codes 45379 through 45398).

A screening, diagnostic, and/or therapeutic endoscopy is always included as part of a surgical endoscopic procedure and should not be separately reported (e.g., 43200 (esophagoscopy) is included as part of codes 43201 through 43232).

In addition, an endoscopy with excision or removal of cyst, tumor, mass, lesion, or polyp includes the biopsy performed at the same surgical site. The endoscopic biopsy should not be separately reported (e.g., 43202 is included as part of 43216). Therefore, if the biopsy is reported on the same day as the endoscopic procedure with excision or removal of cyst, tumor, mass, lesion, or polyp, the services should be combined and processed under the appropriate procedure code for the endoscopic study with excision or removal of cyst, tumor, mass, lesion, or polyp.

When an endoscopic biopsy (e.g., code 43202) is performed on a separate surgical site, unrelated to the endoscopic excision or removal of cyst, tumor, mass, lesion, or polyp (e.g., 43216), the endoscopic biopsy may be considered for separate payment. In these cases, a modifier should be reported with the biopsy (e.g., 43202). The patient's medical record should include documentation identifying the different surgical sites to which these services were provided.



When a single endoscopic technique is performed on separate surgical sites, the code should only be reported once (e.g., if multiple esophageal polyps are removed by snare technique, code 43217 should only be reported once). If different endoscopic techniques are performed on separate sites, then multiple endoscopy codes can be reported (e.g., 43216 and 43217 can both be reported when polyps are removed from different sites via the different techniques represented by these codes, a modifier would be required).

Documentation Submission

Documentation/operative report must identify and describe the procedures performed.

Coverage

Eligible services will be subject to the subscriber benefits, applicable fee schedule amount and any coding edits.

The following applies to all claim submissions.

All coding and reimbursement is subject to all terms of the Provider Service Agreement and subject to changes, updates, or other requirements of coding rules and guidelines. All codes are subject to federal HIPAA rules, and in the case of medical code sets (HCPCS, CPT, ICD), only codes valid for the date of service may be submitted or accepted. Reimbursement for all Health Services is subject to current Blue Cross Medical Policy criteria, policies found in the Provider Policy and Procedure Manual sections, Reimbursement Policies and all other provisions of the Provider Service Agreement (Agreement).

In the event that any new codes are developed during the course of Provider's Agreement, such new codes will be paid according to the standard or applicable Blue Cross fee schedule until such time as a new agreement is reached and supersedes the Provider's current Agreement.

All payment for codes based on Relative Value Units (RVU) will include a site of service differential and will be calculated using the appropriate facility or non-facility components, based on the site of service identified, as submitted by Provider.

Coding

The following codes are included below for informational purposes only and are subject to change without notice. Inclusion or exclusion of a code does not constitute or imply subscriber coverage or provider reimbursement.

CPT/HCPCS Modifier: 59 XS XU
ICD-10 Diagnosis: N/A
ICD-10 Procedure: N/A
CPT/HCPCS: Refer to [Appendix](#)
Revenue Codes: N/A

Policy History

2/16/2016	Initial Committee Approval Date
05/24/2017	Annual Policy Review
11/07/2019	Annual Policy Review
08/11/2020	Annual Policy Review
05/27/2021	Annual Policy Review: Updated title, added Appendix A – Applicable Procedure Codes

07/27/2021	Code Update: New group added to Appendix - Esophagogastroduodenoscopy - Endo Base Procedure 0652T with codes 0653T and 0654T
05/24/2022	Policy Review: added multiple colonoscopy policy criteria Code Update: Q1 codes Added 42975, 43497
01/01/2023	Code Update: Added 43290, 43291, 0781T, 0782T
09/26/2023	Annual Policy Review
01/01/2024	Code Update

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APPENDIX:

Shoulder Arthroscopy/Surgery – Endo Base Procedure 29805

29806 29807 29819 29820 29821 29822 29823 29824 29825 29827
29828

Elbow Arthroscopy/Surgery – Endo Base Procedure 29830

29834 29835 29836 29837 29838

Wrist Arthroscopy/Surgery - Endo Base Procedure 29840

29843 29844 29845 29846 29847

Hip Arthroscopy - Endo Base Procedure 29860

29861 29862 29863 29914 29915 29916

Knee Arthroscopy - Endo Base Procedure 29870

29871 29873 29874 29875 29876 29877 29879 29880 29881 29882
29883 29884 29885 29886 29887

Nasal/Sinus Surgery - Endo Base Procedure 31231

31233 31235 31237 31238 31239 31240 31241 31242 31243 31253
31254 31255 31256 31257 31259 31267 31276 31287 31288 31290
31291 31292 31293 31294 31295 31296 31297 31298 69705 69706

Laryngoscopy - Endo Base Procedure 31505

31510 31511 31512 31513

Laryngoscopy - Endo Base Procedure 31525

31527 31528 31529 31530 31535 31540 31560 31570 42975

Laryngoscopy - Endo Base Procedure 31526

31531 31536 31541 31545 31546 31561 31571

Laryngoscopy - Endo Base Procedure 31575

31572 31573 31574 31576 31577 31578 31579 42975

Bronchoscopy - Endo Base Procedure 31622

31623 31624 31625 31628 31629 31630 31631 31634 31635 31636
31638 31640 31641 31645 31647 31648 31660 31661 0781T 0782T

Esophagoscopy, Rigid Transoral - Endo Base Procedure 43191

43192 43193 43194 43195 43196

Esophagoscopy, Flexible Transnasal - Endo Base Procedure 43197
43198

Esophagoscopy - Endo Base Procedure 43200

43201	43202	43204	43205	43206	43211	43212	43213	43214	43215
43216	43217	43220	43226	43227	43229	43231	43232		

UGI Endoscopy Including Esophagus - Endo Base Procedure 43235

43210	43233	43236	43237	43238	43239	43240	43241	43242	43243
43244	43245	43246	43247	43248	43249	43250	43251	43252	43253
43254	43255	43257	43259	43266	43270	43290	43291	43497	0813T

Endoscopic Cholangiopancreatography - Endo Base Procedure 43260

43261	43262	43263	43264	43265	43274	43275	43276	43277	43278
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Small Bowel Endoscopy - Endo Base Procedure 44360

44361	44363	44364	44365	44366	44369	44370	44372	44373	
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Small Bowel Endoscopy and Ileum - Endo Base Procedure 44376

44377	44378	44379							
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Small Bowel Endoscopy through Stoma – Endo Base Procedure 44380

44381	44382	44384							
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Colonoscopy Through Stoma - Endo Base Procedure 44388

44389	44390	44391	44392	44394	44401	44402	44403	44404	44405
44406	44407	44408							

Proctosigmoidoscopy - Endo Base Procedure 45300

45303	45305	45307	45308	45309	45315	45317	45320	45321	45327
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Sigmoidoscopy - Endo Base Procedure 45330

45331	45332	45333	45334	45335	45337	45338	45340	45341	45342
45346	45347	45349	45350						

Colonoscopy through Rectum - Endo Base Procedure 45378

45379	45380	45381	45382	45384	45385	45386	45388	45389	45390
45391	45392	45393	45398						

Anoscopy - Endo Base Procedure 46600

46601	46604	46606	46607	46608	46610	46611	46612	46614	46615
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Biliary Endoscopy - Endo Base Procedure 47552

47553 47554 47555 47556

Laparoscopy - End Base Procedure 49320

38570 38571 38572 38573 49321 49322 49323 49324 49325 58541
58550 58660 58661 58662 58670 58671 58672 58673

Renal Endoscopy via Nephrostomy/Pyelostomy - Endo Base Procedure 50551

50555 50557 50561

Renal Endoscopy via Nephrotomy/Pyelostomy - Endo Base Procedure 50570

50572 50574 50575 50576 50580

Ureteral Endoscopy via Ureterostomy - Endo Base Procedure 50951

50953 50955 50957 50961

Ureteral Endoscopy via Ureterotomy - Endo Base Procedure 50970

50974 50976

Cystourethroscopy - Endo Base Procedure 52000

52001 52005 52007 52010 52204 52214 52224 52234 52235 52240
52250 52260 52265 52270 52275 52276 52277 52281 52282 52283
52284 52285 52287 52290 52300 52301 52305 52310 52315 52317
52318 52320 52325 52327 52330 52332 52334 52341 52342 52343
52344 52400 52402 52441

Cystourethroscopy w/Ureteroscopy/Pyeloscopy - Endo Base Procedure 52351

52345 52346 52352 52353 52354 52355 52356

Colposcopy of Cervix - Endo Base Procedure 57452

57454 57455 57456 57460 57461

Hysteroscopy - End Base Procedure 58555

58558 58559 58560 58561 58562 58563 58565

Endoscopic Ciliary Ablation - Endo Base Procedure 66710

66711

Esophagogastroduodenoscopy - Endo Base Procedure 0652T

0653T 0654T