

Hospital Outpatient and Physician Coding and Billing Guide 2021

Common Diagnosis Codes

ICD-10 ¹	Description
K21.0	Gastro-esophageal reflux disease with esophagitis
K21.9	Gastro-esophageal reflux disease without esophagitis

Professional - Physician

CPT* Code ⁵	Description	2021 National Medicare Average ⁵
43284	Laparoscopy, surgical, esophageal sphincter augmentation procedure, of sphincter augmentation device (i.e. magnetic band), including cruroplasty when performed	\$673
43285	Removal of esophageal sphincter augmentation device	\$693

Hospital Outpatient and Ambulatory Surgery Center (ASC)

CPT*/HCPCS Codes ^{3,4}	Description	APC Status Indicator ^{4*}	2021 Hospital Outpatient National Medicare Average ⁴	2021 ASC National Medicare Average ⁴
43284	Laparoscopy, surgical, esophageal sphincter augmentation procedure, placement of sphincter augmentation device (i.e. magnetic band) including cruroplasty when performed	5362 J1	\$8,908	\$5,754
L8699	Prosthetic implant, not otherwise specified <i>(Commercial payers only - confirm payer guidelines for reporting device separately)</i>		Payer Priced	Payer Priced
A4649	Surgical supply, miscellaneous		Payer Priced	Payer Priced
43285	Removal of esophageal sphincter augmentation device	5361 Q2	\$4,834	\$2,318

*J1 = Comprehensive APC; all services on the claim are packaged into one payment.

*Q2 = Payment is packaged if billed on the same date as a procedure with a T status indicator; otherwise paid separately.

LINX® Reflux Management System Important Safety Information

The LINX Reflux Management System is a laparoscopic, fundic-sparing anti-reflux procedure indicated for patients diagnosed with Gastroesophageal Reflux Disease (GERD) as defined by abnormal pH testing, and who are seeking an alternative to continuous acid suppression therapy (i.e. proton pump inhibitors or equivalent) in the management of their GERD. Rx Only. Contraindications: Do not implant the LINX system in patients with suspected or known allergies to titanium, stainless steel, nickel, or ferrous materials. Warnings: The LINX device is considered MR Conditional in a magnetic resonance imaging (MRI) system up to either 0.7 Tesla (0.7T) or 1.5 Tesla (1.5T), depending on the LINX model implanted. Laparoscopic placement of the LINX device is major surgery. General Precautions: The LINX device is a long-term implant for use in patients 21 years or older. Medical management of adverse reactions may include explantation and/or replacement. Potential Risks Associated with LINX System: belching, decreased appetite, device erosion, device migration (device does not appear to be at the implant site), dysphagia (difficult swallowing), flatulence, hiccups, inability to belch or vomit, infection, nausea, odynophagia (painful swallowing), pain regurgitation, stomach bloating, weight loss, and worsening of preoperative symptoms. Your physician can help you determine if LINX is right for you. Patient results may vary. For full patient information visit www.linxforslife.com or www.ethicon.com.

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Common Diagnosis Codes

ICD-10 ¹	Description
K21.0	Gastro-esophageal reflux disease with esophagitis
K21.9	Gastro-esophageal reflux disease without esophagitis

Hospital Inpatient

ICD-10 ²	Description
ODV44CZ	Restriction of Esophagogastric Junction with Extraluminal Device, Percutaneous Endoscopic Approach

MS-DRG	Description
326	Stomach, esophageal and duodenal procedures with MCC
327	Stomach, esophageal and duodenal procedures with CC
328	Stomach, esophageal and duodenal procedures without CC/MCC

Revenue Codes	Description
278	Medical/surgical supplies, other implants
360	OR Services
361	OR Services, Minor Surgery

LINX Reimbursement Hotline: 877-244-0305 | linx@avaniareimbursement.com

- 1 AAPC; ICD-10-CM 2017 Expert for Physicians and Hospitals
- 2 <https://www.cms.gov/Medicare/Coding/ICD10/2020-ICD-10-PCS>
- 3 AAPC 2017 Level II Expert.
- 4 Medicare Program: Hospital Outpatient Prospective Payment and Ambulatory Surgical Center Payment Systems and Quality Reporting Programs; New Categories for Hospital Outpatient Department Prior Authorization Process; Clinical Laboratory Fee Schedule; Laboratory Date of Service Policy; Overall Hospital Quality Star Rating Methodology; Physician-owned Hospitals; Notice of Closure of Two Teaching Hospitals and Opportunity To Apply for Available Slots, Radiation Oncology Model, and Reporting Requirements for Hospitals and Critical Access Hospitals (CAHs) to Report Acute Respiratory Illness During the Public Health Emergency (PHE) for Coronavirus Disease 2019 (COVID-19). Federal Register. Vol. 85, No 249. December 29, 2020.
- 5 Medicare Program: CY 2021 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; Quality Payment Program; Coverage of Opioid Use Disorder Services Furnished by Opioid Treatment Programs; Medicare Enrollment of Opioid Treatment Programs; Electronic Prescribing for Controlled Substances for a Covered Part D Drug; Payment for Office/Outpatient Evaluation and Management Services; Hospital IQR Program; Establish New Code Categories; Medicare Diabetes Prevention Program (MDPP) Expanded Model Emergency Policy; Coding and Payment for Virtual Check-in; Final Rule. Federal Register. Vol. 85, No 248. December 28, 2020.

*CPT® is a registered trademark of the American Medical Association.

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