



**Information on Coding and Medicare Payment Amounts
for the Pleurx Catheter for Pleural Effusion**

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PLEURX PLEURAL CATHETER

A. HOSPITAL INPATIENT PLACEMENT

ICD-9-CM Procedure	CPT Code	Physician Fee (2007 National Average)	Common DRGs	Facility Reimbursement (2007 National Average)
34.04 Insertion of intercostal catheter for drainage	32019 Insertion of indwelling tunneled pleural catheter with cuff	\$218.31	082 respiratory neoplasms	\$6,884
			085 pleural effusion with CC	\$6,076
			086 pleural effusion	\$3,475
97.41 Removal of thoracotomy tube or pleural cavity drain	32999 Unlisted procedure, lungs and pleura	There is no specific CPT code for removal of a pleural catheter. This code requires an operative report for M.D. payment. The DRG would be determined by the patient's condition and the reason for removal.		
Other Codes That May Be Applicable for Hospitals				
34.21 Transpleural thoracoscopy	32601 Thoracoscopy, diagnostic	\$302.87	076 Respiratory system OR procedures with CC	\$13,832
	32602 Thoracoscopy, diagnostic with biopsy	\$328.63	077 Respiratory system OR procedures	\$5,801
88.39 X-ray, other and unspecified	75989 Radiological guidance	\$56.86	Secondary procedure under primary DRG	Not Applicable

- Notes: 1) Conscious sedation is not separately billable for 32019. However, other anesthesia, if required, may be separately billable for the anesthesiologist.
 2) 32019 is not specifically excluded as a separately billable procedure with 32601 or 32602, but it may not be appropriate, depending on the circumstances. The payment rates will be different if the procedures are concurrent.



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B. HOSPITAL OUTPATIENT PLACEMENT

CPT Code	Physician Fee (2007 National Average)	APC (Ambulatory Payment Classification)	Facility Reimbursement (2007 National Average)	C-Codes (for reporting – no additional reimbursement)
32019 Insertion of indwelling tunneled pleural catheter with cuff	\$218.31	0652 Insertion of Intraperitoneal & Pleural Catheters	\$1,815.86	C1729 – Catheter, drainage C1894 – Introducer/Sheath C1769 – Guidewire
75989 Radiological guidance	\$56.86	Payment is packaged into APC for procedure		N/A
32999 Unlisted procedure, lungs and pleura	N/A	0070	\$222.78	
There is no specific CPT code for removal of a pleural catheter. This code requires an operative report for M.D. payment. The DRG would be determined by the patient's condition and the reason for removal.				

C. NON-FACILITY PLACEMENT (e.g. procedure room in an office suite)

CPT Code	Physician & Office Fee (2007 National Average)
32019 Insertion of indwelling tunneled pleural catheter with cuff	\$869.01 all inclusive

D. AMBULATORY SURGERY CENTER PLACEMENT

No coverage in this setting

Additional Information:

- HCPCS Codes for Pleurx Catheter: **A7042**
- For purposes of reporting C-Codes, the following percentages are recommended to break out the cost of the **Pleurx Catheter Kit**:
 - 60% Pleurx Pleural Catheter
 - 40% All other incidental supplies

***Disclaimer:** Use of the Pleurx Catheter may be a covered service if it meets the requirements of Medicare and private payers. Each claim should be coded based on the patient's medical conditions and must be adequately documented in the medical record, including medical necessity. While reasonable efforts have been made to ensure the accuracy of the above information, DENVER BIOMEDICAL, INC., makes no express or implied warranty that the options are error-free, that the use of the information will prevent disputes with payers, or that the provider can appropriately use the codes set forth as options.*