

Welch Allyn Colposcope

2016 REIMBURSEMENT INFORMATION



CPT CODING RESOURCE FOR COLPOSCOPY & MEDICARE PHYSICIAN FEE SCHEDULE

Code	Description	2016 National Averages ¹	
		Facility	Non-Facility
56820	Colposcopy of the vulva	\$88.79	\$114.22
56821	Colposcopy of the vulva, with biopsy(s)	\$118.15	\$150.38
57420	Colposcopy of the entire vagina, with cervix if present	\$93.81	\$119.59
57421	Colposcopy of the entire vagina, with cervix if present; with biopsy(s) of vagina/cervix	\$127.46	\$160.40
57452	Colposcopy of the cervix including upper/adjacent vagina	\$94.17	\$110.64
57454	Colposcopy of the cervix including upper/adjacent vagina, with biopsy(s) of the cervix and endocervical curettage	\$138.20	\$155.03
57455	Colposcopy of the cervix including upper/adjacent vagina, with biopsy(s) of the cervix	\$112.78	\$144.65
57456	Colposcopy of the cervix including upper/adjacent vagina, with endocervical curettage	\$104.91	\$136.41
57460	Colposcopy of the cervix including upper/adjacent vagina, with loop electrode biopsy(s) of the cervix	\$165.77	\$286.08
57461	Colposcopy of the cervix including upper/adjacent vagina, with loop electrode conization of the cervix	\$191.19	\$323.31
58110	Endometrial sampling (biopsy) performed in conjunction with colposcopy (List separately in addition to code for primary procedure)	\$41.53	\$48.69
99170	Anogenital examination, magnified, in childhood for suspected trauma, including image recovery when performed.	\$90.58	\$175.44

Rates are subject to change. Effective 1/1/2016.
For reference only. Information does not constitute a guarantee of coverage or payment.

¹National Average from the 2016 Centers for Medicare and Medicaid Services Physician Fee Schedule.

The information contained in this document is provided for convenience only and represents no statement, promise or guarantee by Welch Allyn concerning coverage or levels of reimbursement. Payment will vary by geographic locality. It is always the provider's responsibility to determine accurate coding, coverage and claim information for the services that were provided.

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Facility—Includes hospitals (inpatient, outpatient and emergency department), ambulatory surgery centers (ASCs) and skilled nursing facilities (SNFs).

Non-Facility—Includes all other settings.

MEDICARE

- Specific indications for coverage may vary by Medicare contractor. Providers should refer to their Medicare Contractor's Local Coverage Determination policies for specific coverage and billing guidelines.

MEDICAID AND PRIVATE PAYERS

- Some payers have internal payment policies that prevent reimbursement for an E/M service when it is provided on the same day as a procedure.
- Colposcopy procedures may be covered by Medicaid and private payers when medically necessary. Coverage guidelines and payment levels vary by payer and specific plan. Providers should contact each specific plan to determine coverage and payment for the use of Welch Allyn colposcope products.

OTHER CONSIDERATIONS

- Document the anatomic site(s) examined (vulva, cervix, upper/adjacent vagina) and the type of procedure(s) performed.
- When appropriate, a modifier may be reported and support documentation should be provided with the claim.
- Some payers may have specific requirements for using certain codes, including prior authorization, restricted medical diagnoses or specialty provider types.
- Confirm that proper ICD-10-CM diagnosis codes are reported to justify medical necessity of colposcopy procedure(s).

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Please visit our website at

welchallyn.com/en/products/care-settings/primary-care-and-clinics/reimbursement.html

for additional reimbursement support, a list of frequently asked questions and brochures.

For additional questions, please contact the Welch Allyn Customer Care Line at 1.800.535.6663.

Centers for Medicare & Medicaid Services (CMS), Medicare Program: Medicare Physician Fee Schedule for CY 2016, <http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeeSched>.

Please note: Medicare fee schedule corrections and changes occur periodically.

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