

## **Capsule Endoscopy (GI-009) Billing and Coding Guideline**

- A. This policy does not take precedence over the Correct Coding Initiative (CCI) and the CCI does not interfere with the indication and the limitations within this policy.
- B. Capsule endoscopy (91110) consists of a technical portion of the service (provision of the capsule, hookup of the recording equipment and downloading of the digital data to the computer with processing and creation of video images) and a professional component (review of the images and interpretation with report). The place of service for the technical component of the test should be reported as the location where the download of the images to the computer is performed.
- C. The ingestion of the capsule is part of the test and an E&M service may not be billed for this purpose.
- D. The date of service should be entered as the date hook-up is performed, with a number of service (NOS) of one (1), regardless of the number of days the recorder is worn.
- E. The NPI of the physician or qualified non-physician ordering the test must be included on the claim.
- F. Capsule Endoscopy is not covered for colorectal cancer screening.
- G. Capsule endoscopy of the esophagus has been used by some practitioners for patients with suspected gastroesophageal reflux disease, Barrett's Esophagus, or esophageal varices. However, mere visualization will not diagnose Barrett's Esophagus (i.e., a biopsy is needed), and there is no need, nor is it standard, to monitor treatment of GERD, varices, etc. by this method (i.e., patients with symptoms will need upper endoscopy to determine severity of disease and potential complications). Since the findings will not alter the treatment plan, these will be denied as not medically necessary.
- H. Patency Capsule testing is not covered. It is used to verify adequate patency of the gastrointestinal tract prior to administration of the PillCam video capsule in patients with known or suspected strictures. There are insufficient studies available to support coverage and is not considered to be medically necessary.

### **Published/Website:**

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### **Revision History:**

02/09/2012-Annual review no change.