

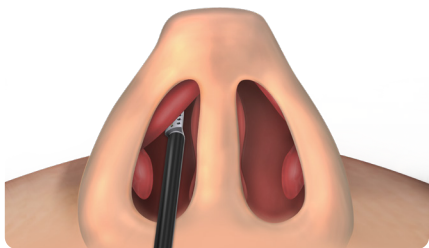
Coding and Payment for Medicare Reimbursement

The following are the codes and national average payment rates referenced in CMS CY 2024 Final Rule for facility and non-facility rates. Please refer to the end of guide disclaimers for all relevant third-party proof sources.

VivAer[®] Coding Overview

The **VivAer Stylus** is indicated for use in otorhinolaryngology (ENT) surgery for the coagulation of soft tissue in the nasal airway, to treat nasal airway obstruction by shrinking submucosal tissue, including cartilage in the internal nasal valve area

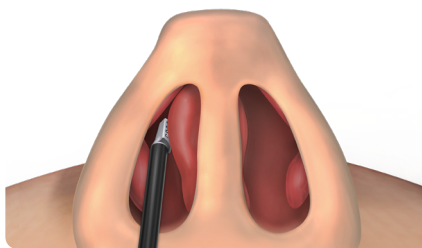
Lateral Nasal Wall



CPT[®] 30469

Repair of nasal valve collapse with low energy, temperature-controlled (i.e., radiofrequency) subcutaneous/submucosal remodeling

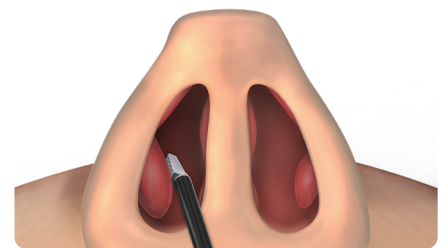
Septal Swell Bodies



CPT 30117¹

Excision or destruction (e.g., laser), intranasal lesion; internal approach

Inferior Turbinate



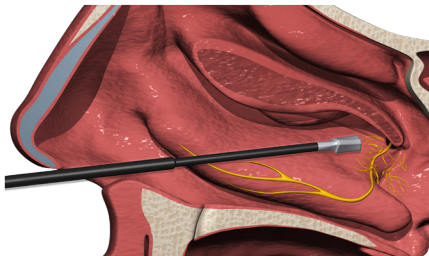
CPT 30802 or CPT 30801

Ablation, soft tissue of inferior turbinates, unilateral or bilateral, any method (volume reduction). Submucosal (CPT 30802) or superficial (CPT 30801)²

RhinAer[®] Coding Overview

The **RhinAer Stylus** is indicated for use in otorhinolaryngology (ENT) surgery for the destruction of soft tissue in the nasal airway, including in posterior nasal nerve regions in patients with chronic rhinitis

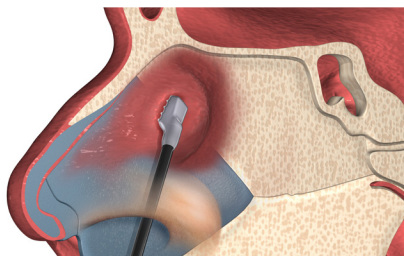
Posterior Nasal Nerve



CPT 31242

Nasal/sinus endoscopy, surgical; with destruction by radiofrequency ablation, posterior nasal nerve

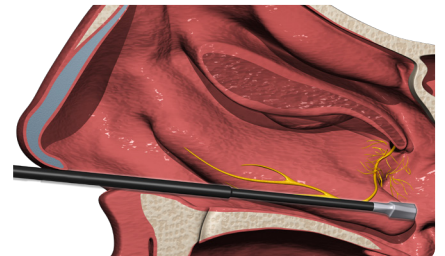
Septal Swell Bodies



CPT 30117¹

Excision or destruction (e.g., laser), intranasal lesion; internal approach

Inferior Turbinate



CPT 30802 or CPT 30801

Ablation, soft tissue of inferior turbinates, unilateral or bilateral, any method (volume reduction). Submucosal (CPT 30802) or superficial (CPT 30801)²

CPT and ICD-10 CM Primary Diagnosis Codes

VivAer for Nasal Airway Obstruction

Code	ICD-10 Short Description
CPT 30469	Repair of Nasal Valve Collapse (NVC)
J34.89	Other disorders of the nose or nasal sinuses
R09.81	Nasal congestion
CPT 30117	Destruction of Septal Swell Bodies ¹
R09.81	Nasal congestion
J34.89	Other disorders of the nose or nasal sinuses
CPT 30802 or CPT 30801	Destruction of Inferior Turbinates (submucosal or superficial) ²
J34.3	Hypertrophy of nasal turbinates

RhinAer for Chronic Rhinitis

Code	ICD-10 Short Description
CPT 31242	Destruction of the Posterior Nasal Nerve (PNN)
J31.0	Chronic rhinitis
J30.0	Vasomotor rhinitis
J30.1	Allergic rhinitis due to pollen
J34.89	Other disorders of the nose or nasal sinuses
CPT 30117	Destruction of Septal Swell Bodies ¹
R09.81	Nasal congestion
J34.89	Other disorders of the nose or nasal sinuses
CPT 30802 or CPT 30801	Destruction of Inferior Turbinates (submucosal or superficial) ²
J34.3	Hypertrophy of nasal turbinates

C-Code Information

Code	Short Description
C1889	Implantable/insertable device, not otherwise classified

Suggested Revenue Codes

Code [†]	Short Description
279	Other supplies/devices

Physician Services – Medicare

			RVUs			2024 NATIONAL PAYMENT RATE ^{††}	
Code	Short Description	Global Period	Physician Work	MD In-Office Total RVUs	MD In-Facility Total RVUs	MD In-Office Payment	MD In-Facility Payment
30469	Repair of nasal valve collapse with low energy, temperature-controlled (i.e., radiofrequency) subcutaneous/submucosal remodeling	000	2.44	73.29	4.51	\$2,439.64	\$150.13
31242	Nasal/sinus endoscopy, surgical; with destruction by radiofrequency ablation, posterior nasal nerve	000	2.70	75.08	4.72	\$2,498.89	\$157.12
30117 ¹	Excision or destruction (e.g., laser), intranasal lesion	090	3.91	29.73	12.50	\$989.64	\$416.09
30801 ²	Ablation, soft tissue of inferior turbinates, unilateral or bilateral, any method; superficial	010	1.14	6.59	4.60	\$219.36	\$153.12
30802 ²	Ablation, soft tissue of inferior turbinates, unilateral or bilateral, any method; intramural	010	2.08	8.40	6.13	\$278.95	\$203.72

References

1. CPT 30117 may be used for the destruction of the septal swell bodies if the patient is clinically diagnosed with nasal congestion primary Dx R09.81. One unit for each side of the septum. -XS or -59 modifier may be appropriate when treating bilaterally.
2. Provider to determine appropriate coding for destruction of turbinate either superficial or intramural (i.e., submucosal).

Ambulatory Surgery Center – Medicare

				2024 NATIONAL PAYMENT RATE ^{††}
Code	Short Description	Payment Indicator	Device Intensive	ASC Payment
30469	Repair of nasal valve collapse with low energy, temperature-controlled (i.e., radiofrequency) subcutaneous/submucosal remodeling	J8	Yes	\$3,478.66
31242	Nasal/sinus endoscopy, surgical; with destruction by radiofrequency ablation, posterior nasal nerve	J8	Yes	\$3,478.66
30117 ¹	Excision or destruction (e.g., laser), intranasal lesion	A2	No	\$1,318.93
30801 ²	Ablation, soft tissue of inferior turbinates, unilateral or bilateral, any method; superficial	A2	No	\$666.85
30802 ²	Ablation, soft tissue of inferior turbinates, unilateral or bilateral, any method; intramural	A2	No	\$666.85
C1889 ³	Implantable/insertable device, not otherwise classified	N/A	No	Packaged

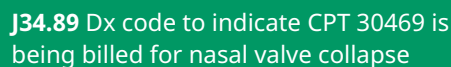
Hospital Outpatient – Medicare

					2024 NATIONAL PAYMENT RATE ^{††}
Code	Short Description	SI	APC	Device Intensive	HOPD Payment
30469	Repair of nasal valve collapse with low energy, temperature-controlled (i.e., radiofrequency) subcutaneous/submucosal remodeling	J1	5165	Yes	\$5,585.51
31242	Nasal/sinus endoscopy, surgical; with destruction by radiofrequency ablation, posterior nasal nerve	J1	5165	Yes	\$5,585.51
30117 ¹	Excision or destruction (e.g., laser), intranasal lesion	J1	5164	No	\$3,070.81
30801 ²	Ablation, soft tissue of inferior turbinates, unilateral or bilateral, any method; superficial	J1	5163	No	\$1,454.56
30802 ²	Ablation, soft tissue of inferior turbinates, unilateral or bilateral, any method; intramural	J1	5163	No	\$1,454.56
C1889 ³	Implantable/insertable device, not otherwise classified	N/A	N/A	No	Packaged

References

1. CPT 30117 may be used for the destruction of the septal swell bodies if the patient is clinically diagnosed with nasal congestion primary Dx R09.81. One unit for each side of the septum. -XS or -59 modifier may be appropriate when treating bilaterally.
2. Provider to determine appropriate coding for destruction of turbinate either superficial or intramural (i.e., submucosal).
3. Considered a device-intensive procedure by CMS, VivAer and RhinAer procedures must be reported with device code C1889, on the same claims form as the placement code.

Sample CMS 1500 Claim Form



CPT 30117 may be used for the destruction of the septal swell bodies if the patient is clinically diagnosed with nasal congestion primary Dx R09.81. One unit for each side of the septum. -XS or -59 modifier may be appropriate when billed as a **bilateral procedure**

19. ADDITIONAL CLAIM INFORMATION (Designated by NUCC) J34.89 Oth spec disord nose & sinuses is ICD10 for nasal valve collapse												20. OUTSIDE LAB? <input type="checkbox"/> YES <input type="checkbox"/> NO				\$ CHARGES					
21. DIAGNOSIS OR NATURE OF ILLNESS OR INJURY Relate A-L to service line below (24E) A. J34.89 B. R09.81 C. J34.3 D. _____ E. _____ F. _____ G. _____ H. _____ I. _____ J. _____ K. _____ L. _____												22. RESUBMISSION CODE				ORIGINAL REF. NO.					
23. PRIOR AUTHORIZATION NUMBER																					
24. A. DATE(S) OF SERVICE From To MM DD YY MM DD YY B. PLACE OF SERVICE C. EMG D. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS MODIFIER E. DIAGNOSIS POINTER												F. \$ CHARGES		G. DAYS OR UNITS		H. EPSDT Family Plan		I. ID. QUAL		J. RENDERING PROVIDER ID. #	
1 01 01 24 01 01 24 11 30469 A B																		NPI			
2 01 01 24 01 01 24 11 30117 RT B A																		NPI			
3 01 01 24 01 01 24 11 30117 XS LT B A																		NPI			
4 01 01 24 01 01 24 11 30802 C B																		NPI			
5																		NPI			
6																		NPI			

CPT 30802 or 30801 are for destruction of the inferior turbinates. Provider to determine appropriate coding. Only one of these codes should be reported per session

- Repair of nasal valve collapse using the VivAer stylus is a bilateral procedure and would not be billed in quantity when performed on both sides of nose. If the procedure is performed unilaterally, one side only, -52 modifier (reduced services) is reported on the claim. When reporting on the CMS 1500 claim, in Box 19, indicate “the procedure was performed unilaterally” to ensure proper payment for the service.
- When a physician performs multiple procedures in the same session, Medicare may not pay the full assigned rate, instead will apply a multiple procedure payment reduction (MPPR).

- CPT 30117 is considered inherent to CPT 30520 (septoplasty) and should not be billed separately.

CPT 31242

Sample CMS 1500 Claim Form



J34.89 Dx code to indicate CPT 30117 is being billed for septal swell bodies (if applicable)

CPT 30117 may be used for the destruction of the septal swell bodies if the patient is clinically diagnosed with nasal congestion primary Dx R09.81. One unit for each side of the septum. -XS or -59 modifier may be appropriate when billed as a **bilateral procedure**

19. ADDITIONAL CLAIM INFORMATION (Designated by NUCC) J34.89 Oth spec disorder nose & sinuses - ICD10 for septal swell bodies										20. OUTSIDE LAB? <input type="checkbox"/> YES <input type="checkbox"/> NO \$ CHARGES											
21. DIAGNOSIS OR NATURE OF ILLNESS OR INJURY Relate A-L to service line below (24E) A. J31.0 B. R09.82 C. R09.81 D. J34.89 E. J34.3 F. G. H. I. J. K. L.										22. RESUBMISSION CODE ORIGINAL REF. NO. 23. PRIOR AUTHORIZATION NUMBER											
24. A. DATE(S) OF SERVICE From To B. PLACE OF SERVICE C. EMG D. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS MODIFIER E. DIAGNOSIS POINTER F. \$ CHARGES G. DAYS OR UNITS H. EPSDT Family Plan I. ID. QUAL J. RENDERING PROVIDER ID. #										PHYSICIAN OR SUPPLIER INFORMATION											
1	01	01	24	01	01	24	11			31242					AB					NPI	
2	01	01	24	01	01	24	11			30117	RT				CD					NPI	
3	01	01	24	01	01	24	11			30117	XS	LT			CD					NPI	
4	01	01	24	01	01	24	11			30802					EC					NPI	
5																				NPI	
6																				NPI	

CPT 30802 or 30801 are for destruction of the inferior turbinates. Provider to determine appropriate coding. Only one of these codes should be reported per session

RhinAer Coding Overview

- Effective January 1, 2024, CPT 31242 is reported when RhinAer is used for the destruction of the posterior nasal nerve (PNN) using radiofrequency; CPT 30117 and unlisted CPT code 30999 should no longer be used to report this service. Please see notes regarding the use of 30117 when treating the septal swell bodies for nasal congestion.
- Destruction of the posterior nasal nerve using the RhinAer stylus is a bilateral procedure and would not be billed in quantity when performed on both sides of nose. If the procedure is performed unilaterally, one side only, -52 modifier (reduced services) is reported on the claim. When reporting on the CMS 1500 claim, in Box 19, indicate "the procedure was performed unilaterally" to ensure proper payment for this service.
- When a physician performs multiple procedures in the same session, Medicare may not pay the full assigned rate, instead will apply a multiple procedure payment reduction (MPPR).

Additional Information

- CPT 31242 includes diagnostic nasal/sinus endoscopy and sinusotomy, when applicable. These procedures cannot be reported separately as they are included in the payment for 31242. Any stereotactic navigation is coded separately. Performing multiple endoscopic procedures of the same family in same encounter, the multiple endoscopic payment rules apply.
- Medicare will reimburse the most extensive endoscopy at full value; additional endoscopies in the same family will be reimbursed by subtracting the value of the base endoscopy and paying the difference. Multiple endoscopies from different code families are exempt from this rule.



Disclaimers

The information provided does not constitute coding, reimbursement, or legal advice. It is the sole responsibility of the healthcare provider to consult with payors, reimbursement specialists, and/or legal counsel regarding coding, coverage, and reimbursement matters, to ensure they submit accurate and appropriate claims for services. The information presented in this document is gathered from third-party sources and is subject to change without notice as a result of complex and frequently changing laws, regulations, rules, and policies. The coding options presented in this document are not intended to be an all-inclusive list of potential codes.

The Aerin® Console is an electrosurgical system intended to generate radiofrequency electrical current for the use of an Aerin Medical Stylus. The Aerin Console is indicated for use in small clinic, office, or hospital environments. Aerin Medical does not promote the use of its products outside of their FDA-cleared label.

Physician payment rates are 2024 Medicare national averages. Source: Centers for Medicare and Medicaid Services. CMS Physician Fee Schedule, source: [CMS-1784-F](#) | [CMS](#)

The 2024 National Average Medicare physician payment rates have been calculated using the latest updated 2024 conversion factor of \$33.29. Rates subject to change, source: [Calendar Year \(CY\) 2024 Medicare Physician Fee Schedule Final Rule](#) | [CMS](#)

Hospital outpatient payment rates are 2024 Medicare OPPS Addendum B national averages. Source: Centers for Medicare and Medicaid Services. CMS OPPS - November 2023 release, source: [CMS-1786-FC](#) | [CMS](#)

ASC payment rates are 2024 Medicare ASC Addendum AA national averages. ASC rates are from the 2024 Ambulatory Surgical Center Covered Procedures List. Source: Centers for Medicare and Medicaid Services. CMS ASC - November 2023 release, source: [CMS-1786-FC](#) | [CMS](#)

ICD-10 MS-DRG definitions from the CMS ICD-10-CM/PCS MS-DRG v38.1 Definitions Manual. Source: https://www.cms.gov/icd10m/version38-1-fullcode-cms/fullcode_cms/P0001.html

Comprehensive APCs (C-APCs): In 2014, CMS implemented their C-APC policy with the goal of identifying certain high-cost, device-related outpatient procedures (formerly "device intensive" APCs). CMS has fully implemented this policy and has identified these high-cost, device-related services as the primary service on a claim. All other services reported on the same date will be considered "adjunctive, supportive, related, or dependent services" provided to support the delivery of the primary service and will be unconditionally packaged into the OPPS C-APC payment of the primary services with minor exceptions.

† Revenue Code 279 - National Uniform Billing Committee. (2020). Guidance on Other Implant [PDF]. Retrieved from: <https://www.nubc.org/system/files/media/file/2020/04/Guidance%20on%20Other%20Implant%20RC0278.pdf>

†† All rates shown are 2024 Medicare national averages; actual rates will vary geographically and/or by individual facility. Actual payment will vary based on the maximum allowance less any applicable deductibles, co-insurances, etc.

Sequestration Disclaimer

Rates referenced in these guides do not reflect sequestration or other reductions that may be implemented in 2024.

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