## **Hemodialysis Coding & Reimbursement Information**

CPT	Procedure Description	Physician Fee <sup>1</sup>		APC <sup>2</sup>		ASC
		Non-Facility	Facility	Code	Payment	Payment <sup>3</sup>
36558	Insertion of tunneled centrally inserted central venous catheter, without subcutaneous port or pump; age 5 years or older	\$836.20	\$272.48	5183	\$2,771.28	\$1,341.23
36581	Replacement, complete, of a tunneled centrally inserted central venous catheter, without subcutaneous port or pump, through same venous access	\$826.81	\$191.27	5183	\$2,771.28	\$1,341.23
36589	Removal of tunneled central venous catheter, without subcutaneous port or pump	\$171.79	\$143.28	5181	\$630.51	\$318.59

ICD-10-PCS⁴	Description
05H533Z	Insertion of Infusion Device into Subclavian Vein, Right, Percutaneous Approach
05H633Z	Insertion of Infusion Device into Subclavian Vein, Left, Percutaneous Approach
05HM33Z	Insertion of Infusion Device into Internal Jugular Vein, Right, Percutaneous Approach
05HN33Z	Insertion of Infusion Device into Internal Jugular Vein, Left, Percutaneous Approach
05PY33Z	Removal of Infusion Device from Upper Vein, Percutaneous Approach

C-Code⁵	Description			
C1750	C1750 Catheter, hemodialysis/peritoneal, long-term			
C1752	Catheter, hemodialysis/peritoneal, short-term			