

CODING AND REIMBURSEMENT GUIDE

Critical Care

CONTACT

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Critical Care

CPT Code	Procedure Description	Ambulatory Surgery Center		Hospital Outpatient			Physician Services		
		Payment Indicator ¹	Facility Payment ¹	Status Indicator ²	APC ²	Facility Payment ²	Work RVUs ³	Physician (Facility) ³	Physician (Non-Facility) ³
Percutaneous Tracheostomy									
31600	Tracheostomy, planned (separate procedure)	NA	NA	J1	5164	\$3,243.07	5.56	\$293.74	NA
Thoracentesis									
32554	Thoracentesis, needle or catheter, aspiration of the pleural space; without imaging guidance	G2	\$332.31	T	5181	\$618.26	1.82	\$84.43	\$222.24
32555	Thoracentesis, needle or catheter, aspiration of the pleural space; with imaging guidance	G2	\$332.31	T	5181	\$618.26	2.27	\$103.84	\$297.30
Pleural Drainage									
32556	Pleural drainage, percutaneous, with insertion of indwelling catheter; without imaging guidance	G2	\$864.15	J1	5302	\$1,896.99	2.5	\$119.37	\$691.32
32557	Pleural drainage, percutaneous, with insertion of indwelling catheter; with imaging guidance	G2	\$632.40	J1	5182	\$1,553.44	3.12	\$141.69	\$618.53
Pericardiocentesis									
33016	Pericardiocentesis, including imaging guidance, when performed	G2	\$632.40	J1	5182	\$1,553.44	4.4	\$222.89	NA
Endobronchial Ultrasound (EBUS) Biopsy									
31652	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with endobronchial ultrasound (EBUS) guided transtracheal and/or transbronchial sampling (eg, aspiration[s]/biopsy[ies]), one or two mediastinal and/or hilar lymph node stations or structures	G2	\$1,610.31	J1	5154	\$3,686.95	4.46	\$209.63	\$1,155.22
31653	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with endobronchial ultrasound (EBUS) guided transtracheal and/or transbronchial sampling (eg, aspiration[s]/biopsy[ies]), 3 or more mediastinal and/or hilar lymph node stations or structures	G2	\$1,610.31	J1	5154	\$3,686.95	4.96	\$232.27	\$1,197.60
31654	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with transendoscopic endobronchial ultrasound (EBUS) during bronchoscopic diagnostic or therapeutic interventions(s) for peripheral lesion(s) (List separately in addition to code for primary procedure[s])	N1	NA	N	NA	NA	1.4	\$63.41	\$115.49
31623	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with brushing or protected brushings	A2	\$792.14	J1	5153	\$1,724.47	2.63	\$125.52	\$264.62
31625	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with bronchial or endobronchial biopsy(s), single or multiple sites	A2	\$792.14	J1	5153	\$1,724.47	3.11	\$148.16	\$334.18
31628	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with transbronchial lung biopsy(s), single lobe	A2	\$1,610.31	J1	5154	\$3,686.95	3.55	\$166.60	\$355.20
31629	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with transbronchial needle aspiration biopsy(s), trachea, main stem and/or lobar bronchus(i)	A2	\$1,610.31	J1	5154	\$3,686.95	3.75	\$177.60	\$430.26
31632	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with transbronchial lung biopsy(s), each additional lobe (List separately in addition to code for primary procedure)	N1	NA	N	NA	NA	1.03	\$45.94	\$62.11
31633	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with transbronchial needle aspiration biopsy(s), each additional lobe (List separately in addition to code for primary procedure)	N1	NA	N	NA	NA	1.32	\$59.85	\$77.96

1. 2025 Medicare Ambulatory Surgery Center Fee Schedule
 2. 2025 Medicare Hospital Outpatient Prospective Payment System
 3. 2025 Medicare Physician Fee Schedule
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