

## TRANSORAL INCISIONLESS FUNDOPLICATION (TIF)

### **2016 CODING QUICK REFERENCE\***

*For reimbursement assistance call 425-307-9224*

*For customer/product assistance visit [www.endogastricsolutions.com](http://www.endogastricsolutions.com)*

#### **DESCRIPTION: TRANSORAL INCISIONLESS FUNDOPLICATION (TIF®) PROCEDURE**

The TIF procedure is an innovative and effective treatment for gastroesophageal reflux disease (GERD). Developed by EndoGastric Solutions® Inc., transoral fundoplication is performed from inside the patient's stomach without incisions. This procedure delivers patient outcomes similar to those provided by conventional antireflux surgical procedures, but is less invasive, has fewer adverse effects, and does not limit future treatment options. Transoral fundoplication is able to repair the antireflux barrier, including reduction of hiatal hernia ( $\leq 2$  cm), restoration of the angle of His, and creation of an antireflux valve with a minimum of 2cm in length and 240 to 270 degrees in circumference similar to the Toupet, Hill, and Belsey fundoplication procedures.

In a transoral fundoplication procedure, the patient is placed under general anesthesia so that the EsophyX® device, used with a flexible endoscope, can be gently introduced into the stomach under constant visualization. The endoscope is retroflexed and the helical retractor is engaged into the tissue slightly distal to the Z line. Then, the fundus of the stomach is folded up and around the distal esophagus utilizing the tissue mold and chassis of the device. After locking all the tissue handling elements, suction is applied via the device to allow the separation of the GEJ from the diaphragm, and permits the reduction of hiatal hernia 2 cm or smaller (if present). The fastener implants are then delivered through two layers of folded tissue as an anchor. The SerosaFuse® fasteners are made of polypropylene in the shape of an "H" and are equivalent to USP 3-0 sutures. The same maneuvers are repeated at 3 additional positions to create full thickness, partial, gastroesophageal fundoplication; valves are created using 12 to 20 fasteners.

#### Coding Options

ICD-10-CM Diagnosis Codes	K21.0	Gastro-esophageal reflux disease with esophagitis
	K21.9	Gastro-esophageal reflux disease without esophagitis
	K30	Functional dysphasia
	R10.13	Dyspepsia NOS
	K44 R12	Diaphragmatic hernia without obstruction or gangrene Heartburn
Note: Underlying condition(s) should also be coded. Consult an ICD-10-CM manual for a complete list of diagnosis codes.		
ICD-10-PSC Procedure Codes	0DV48DZ	Restriction of Esophagogastric Junction with Intraluminal Device, Via Natural or Artificial Opening Endoscopic
Note: ICD-10-PCS procedure codes are used specifically by hospitals to describe services and procedures provided during an in-patient confinement		
DRG	MS-DRG 326 MS-DRG 327 MS-DRG 328	Stomach, Esophageal and Duodenal Procedures with MCC Stomach, Esophageal and Duodenal Procedures with CC Stomach, Esophageal and Duodenal Procedures w/o CC/MCC
Physician	CPT® Code 43210	Esophagogastroduodenoscopy, flexible, transoral; with esophagogastric fundoplasty, partial or complete, includes duodenoscopy when performed.
Outpatient Hospital Commercial	CPT® Code 43210	Esophagogastroduodenoscopy, flexible, transoral; with esophagogastric fundoplasty, partial or complete, includes duodenoscopy when performed.
Outpatient Hospital Medicare	CPT® Code 43210	Endoscopic full-thickness plication of the stomach using endoscopic plication system (eps), includes Endoscopy C-APC Payment Group 5331

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