

Coding & Payment Quick Reference Guide for CYTALUX® (pafolacianine) injection



The information described here is intended solely for use as a resource tool to assist hospital inpatient billing staff. Any determination regarding if and how to seek reimbursement should be made only by the appropriate members of the hospital inpatient staff, and in consideration of the procedure performed. You are ultimately responsible for determining the appropriate reimbursement strategy and reimbursement codes.

Scan QR code or visit
www.cytaluxhcp.com/coverage-and-coding/
for more information.

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CYTALUX FOR LUNG CANCER

CYTALUX NDC NUMBER

10 DIGIT NUMBER 81052-138-10

11 DIGIT NUMBER 81052-0138-10

ICD-10-PCS Code

Our new ICD-10-PCS code can be used for discharges effective October 1, 2023.

8E0W0EN	Fluorescence guided procedure of trunk region using pafolacianine, open approach
8E0W3EN	Fluorescence guided procedure of trunk region using pafolacianine, percutaneous approach
8E0W4EN	Fluorescence guided procedure of trunk region using pafolacianine, percutaneous endoscopic approach
8E0W7EN	Fluorescence guided procedure of trunk region using pafolacianine, via natural or artificial opening
8E0W8EN	Fluorescence guided procedure of trunk region using pafolacianine, via natural or artificial opening endoscopic

HCPCS Level II Code effective October 1, 2023

A9603	Injection, pafolacianine, 0.1 mg
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New Technology Add-On Payment (NTAP)

CYTALUX has been granted a New Technology Add-On Payment (NTAP) effective October 1, 2023.

- ▶ The NTAP is limited to the lesser of 65% of the cost of the new technology or 65% of the amount by which the cost of the case exceeds the MS-DRG payment.
- ▶ The maximum add-on payment for CYTALUX is \$2,762.50 for fiscal year (FY) 2024 (reassessed annually).
- ▶ NTAP for CYTALUX in lung cancer is expected to be available up to 3 years; the maximum add-on payment amount is reassessed annually.
- ▶ Hospitals must report the ICD-10 code on claim forms for procedures related to CYTALUX to receive the add-on payment for eligible inpatient cases.

Potential ICD-10-CM Clinical Modification Diagnosis Codes

C3411	Malignant neoplasm of upper lobe, right bronchus, or lung
C3412	Malignant neoplasm of upper lobe, left bronchus or lung
C342	Malignant neoplasm of middle lobe, bronchus, or lung
C3430	Malignant neoplasm of lower lobe, unspecified bronchus or lung
C3431	Malignant neoplasm of lower lobe, right bronchus or lung
C3432	Malignant neoplasm of lower lobe, left bronchus or lung
C3481	Malignant neoplasm of overlapping sites of right bronchus and lung
C3490	Malignant neoplasm of unspecified part of unspecified bronchus or lung
C3491	Malignant neoplasm of unspecified part of right bronchus or lung
C3492	Malignant neoplasm of unspecified part of left bronchus or lung
C7800	Secondary malignant neoplasm of unspecified lung
C7801	Secondary malignant neoplasm of right lung
C7802	Secondary malignant neoplasm of left lung
C7A090	Malignant carcinoid tumor of the bronchus and lung
D0221	Carcinoma in situ of right bronchus and lung
D0222	Carcinoma in situ of left bronchus and lung
D381	Neoplasm of uncertain behavior of trachea, bronchus and lung

Potential MS-DRG Codes

163	MAJOR CHEST PROCEDURES WITH MCC
164	MAJOR CHEST PROCEDURES WITH CC
165	MAJOR CHEST PROCEDURES WITHOUT CC MCC

Potential CPT Codes

32096	Thoracotomy, with diagnostic biopsy(ies) of lung infiltrate(s) (eg, wedge, incisional), unilateral
32097	Thoracotomy, with diagnostic biopsy(ies) of lung nodule(s) or mass(es) (eg, wedge, incisional), unilateral
32480	Removal of lung, other than pneumonectomy; single lobe (lobectomy)
32482	Removal of lung, other than pneumonectomy; 2 lobes (bilobectomy)
32484	Removal of lung, other than pneumonectomy; single segment (segmentectomy)
32486	Removal of lung, other than pneumonectomy; with circumferential resection of segment of bronchus followed by broncho-bronchial anastomosis (sleeve lobectomy)
+32501	Resection and repair of portion of bronchus (bronchoplasty) when performed at time of lobectomy or segmentectomy (List separately in addition to code for primary procedure)
32505	Thoracotomy; with therapeutic wedge resection (eg, mass, nodule), initial
+32506	Thoracotomy; with therapeutic wedge resection (eg, mass, nodule), each additional resection, ipsilateral (List separately in addition to code for primary procedure)
*32507	Thoracotomy; with diagnostic wedge resection followed by anatomic lung resection (List separately in addition to code for primary procedure)
32663	Thoracoscopy, surgical; with lobectomy (single lobe)
32666	Thoracoscopy, surgical; with therapeutic wedge resection (eg, mass, nodule), initial unilateral
+32667	Thoracoscopy, surgical; with therapeutic wedge resection (eg, mass, nodule), each additional resection, ipsilateral surgical; (List with separately
+32668	Thoracoscopy, surgical; with diagnostic wedge resection followed by anatomic lung resection (List separately in addition to code for primary procedure)
32669	Thoracoscopy, surgical; with removal of a single lung segment (segmentectomy)
32670	Thoracoscopy, surgical; with removal of two lobes (bilobectomy)

Potential Revenue Codes

0360	Operating Room Services General
0250	Pharmacy General