

EGG RETRIEVAL-Physician	
ICD 10	CPT
N97.x Female Infertility family Z31.83 Encounter for assisted reproductive fertility procedure cycle Z31.81 Encounter for male factor infertility in female patient Z31.94 Encounter for fertility preservation procedure Z31.89 Encounter for other procreative management Z52.810 Egg (Oocyte) donor under age 35, anonymous recipient Z52.811 Egg (Oocyte) donor under age 35, designated recipient Z52.812 Egg (Oocyte) donor age 35 and over, anonymous recipient Z52.813 Egg (Oocyte) donor age 35 and over, designated recipient Z52.819 Egg (Oocyte) donor, unspecified	58970 Follicle puncture for oocyte retrieval, any method 76948 Ultrasonic guidance for aspiration of ova, imaging supervision and interpretation

EGG RETRIEVAL-IVF LAB	
ICD 10	CPT
N97.x Female Infertility family Z31.83 Encounter for assisted reproductive fertility procedure cycle Z31.81 Encounter for male factor infertility in female patient Z31.94 Encounter for fertility preservation procedure Z31.89 Encounter for other procreative management	EGG IDENTIFICATION and FERTILIZATION 89254 Oocyte identification from follicular fluid 89268 Insemination of oocytes 89280 Assisted oocyte fertilization, microtechnique; less than or equal to 10 oocytes 89281 Assisted oocyte fertilization, microtechnique; greater than 10 oocytes
	EMBRYO CULTURE 89250 Culture of oocyte(s)/embryo(s), less than 4 days 89272 Extended culture of oocyte(s)/embryo(s), 4-7 days 89251 Culture of oocyte(s)/embryo(s), less than 4 days with co-culture of oocyte(s)/embryos
	ASSISTED HATCHING 89253 Assisted embryo hatching, microtechniques (any method)
	EMBRYO TRANSFER 89255 Preparation for embryo for transfer (any method)
	EMBRYO BIOPSY 89290 Biopsy, oocyte polar body or embryo blastomere, microtechnique (for pre-implantation genetic diagnosis); less than or equal to 5 embryos

	89291 Biopsy, oocyte polar body or embryo blastomere, microtechnique (for pre-implantation genetic diagnosis); Greater than 5 embryos
	CRYOPRESERVATION and STORAGE 89258 Cryopreservation; embryo(s) 89337 Cryopreservation, mature oocyte(s) 0058T Cryopreservation; reproductive tissue, ovarian 89342 Storage (per year); embryo(s) 89346 Storage (per year) oocyte(s) 89344 Storage reproductive tissue, testicular/ovarian
	EMBRYO/OOCYTES/OVARIAN TISSUE THAWING 89352 Thawing of cryopreserved; embryo(s) 89354 Thawing of cryopreserved; reproductive tissue, testicular/ovarian 89356 Thawing of cryopreserved; oocytes, each aliquot 0357T Cryopreservation; immature oocyte(s)

TRANSFER-Physician	
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N97.x Female Infertility family Z31.83 Encounter for assisted reproductive fertility procedure cycle Z31.81 Encounter for male factor infertility in female patient Z31.94 Encounter for fertility preservation procedure Z31.89 Encounter for other procreative management	MOCK TRANSFER: no specific CPT 58974 (embryo transfer), -52 modifier should be added because the entire procedure (i.e., actual embryo transfer) was not performed. 99070 Supplies and materials (except spectacles), provided by the physician or other qualified health care professional over and above those usually included with the office visit or other services rendered (list drugs, trays, supplies, or materials provided)-may be used to bill for the trial catheter or other supplies. 76705 Ultrasound, abdominal, real time with image documentation; limited (eg, single organ, quadrant, follow-up), or 76942 Ultrasound guidance for needle placement (eg, biopsy, aspiration, injection, localization device), imaging supervision and interpretation, or 76998 Ultrasonic guidance, intraoperative 99212 or 00213 E/M codes for existing patients can be used to bill for physician time 58999 Unlisted services might be considered with supporting documentation)
N97.x Female Infertility family Z31.83 Encounter for assisted reproductive fertility procedure cycle	EMBRYO TRANSFER 58974 Embryo transfer intrauterine 58976 Gamete, zygote, or embryo intrafallopian

<p>Z31.81 Encounter for male factor infertility in female patient</p> <p>Z31.94 Encounter for fertility preservation procedure</p> <p>Z31.89 Encounter for other procreative management</p>	<p>transfer, any method</p> <p>76705 Ultrasound, abdominal, real time with image documentation; limited (eg, single organ, quadrant, follow-up); or</p> <p>76942 Ultrasound guidance for needle placement (eg, biopsy, aspiration, injection, localization device), imaging supervision and interpretation, or</p> <p>76998 Ultrasonic guidance, intraoperative</p>
	<p>TRANSMYOMETRIAL TRANSFER</p> <p>58974-22 embryo transfer with -22 modifier (trans-myometrial transfer procedure is more challenging than the typical embryo transfer)</p> <p>76998 Ultrasound guidance, intraoperative.</p>

IVF LABORATORY-EMBRYO TRANSFER	
ICD 10	CPT
<p>N97.x Female Infertility family</p> <p>Z31.83 Encounter for assisted reproductive fertility procedure cycle</p> <p>Z31.81 Encounter for male factor infertility in female patient</p> <p>Z31.94 Encounter for fertility preservation procedure</p> <p>Z31.89 Encounter for other procreative management</p>	<p>89255 Preparation of embryo for transfer (any method)</p>

LAB-SPERM	
ICD 10	CPT
<p>N46.x Male infertility family</p> <p>Z31.83 Encounter for assisted reproductive fertility procedure cycle</p>	<p>SPERM EVALUATION</p> <p>89321: sperm presence (not concentration) and motility (qualitative)-PPM procedure: provider performed microscopy, moderate complexity</p> <p>89300 Semen analysis; presence and/or motility of sperm including Huhner test (post coital)</p> <p>89310 Semen analysis; motility and count (not including Huhner test)</p> <p>89320 Semen analysis; volume, count, motility, and differential</p> <p>89321 Semen analysis; sperm presence and motility of sperm, if performed</p> <p>89322 volume, count, motility, and differential using strict morphologic criteria (eg, Kruger)</p> <p>89325 Sperm antibodies</p> <p>89329 Sperm evaluation; hamster penetration test</p> <p>89330 Sperm evaluation; cervical mucus penetration test, with or without spinnbarkeit test</p> <p>89331 Sperm evaluation, for retrograde ejaculation, urine (sperm concentration, motility, and morphology, as indicated)</p> <p>89257 Sperm identification from aspiration (other than seminal fluid)</p>

	89264 Sperm identification from testis tissue, fresh or cryopreserved
	SPERM PROCESSING
	58323 sperm washing for artificial insemination- Not quantification; <u>moderate complexity</u> procedures with subcategory of Provider-Performed Microscopy (PPM) procedures
	89260 Sperm isolation; simple prep (eg, sperm wash and swim-up) for insemination or diagnosis with semen analysis (CLIA-certified lab)
	89261 Sperm isolation; complex prep (eg, Percoll gradient, albumin gradient) for insemination or diagnosis with semen analysis
	SPERM CRYOPRESERVATION and STORAGE
	89259 Cryopreservation; sperm
	89343 Storage sperm/semen
	89335 Cryopreservation, reproductive tissue, testicular
	89344 Storage reproductive tissue, testicular/ovarian
	SPERM THAWING
	89353 Thawing of cryopreserved; sperm/semen, each aliquot
	89354 Thawing of cryopreserved; reproductive tissue, testicular/ovarian

INTRAUTERINE INSEMINATION-Physician	
ICD	CPT
N97.x Female infertility family Z31.83 Encounter for assisted reproductive fertility procedure cycle Z31.89 Encounter for other procreative management Z31.9 Encounter for procreative management, unspecified	58321 Artificial insemination; intra-cervical 58322 Artificial insemination; intra-uterine.

ADDITIONAL CPTs	HCPCS
	S4011 In vitro fertilization; including but not limited to identification and incubation of mature oocytes, fertilization with sperm, incubation of embryo(s), and subsequent visualization for determination of development S4013 Complete cycle, gamete intra-fallopian transfer (GIFT), case rate S4015 Complete in vitro fertilization cycle, not otherwise specified, case rate S4017 Incomplete cycle, treatment cancelled prior to stimulation, case rate S4018 Frozen embryo transfer procedure cancelled before transfer, case rate S4014 Complete cycle, zygote intra-fallopian transfer (ZIFT), case rate S4016 Frozen in vitro fertilization case rate S4018 Frozen embryo transfer procedure cancelled prior to transfer case rate S4020 In vitro fertilization procedure cancelled before aspiration, case rate S4021 In vitro fertilization procedure cancelled after aspiration, case rate S4022 Assisted oocyte fertilization, case rate S4023 Donor egg cycle, incomplete, case rate S4025 Donor services for in vitro fertilization (sperm or embryo) case rate S4037 Cryopreserved embryo transfer, case rate S4027 Storage of previously frozen embryos

	S4040 monitoring and storage of cryopreserved embryos, per 30 days
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