# **Coding For Vasectomies**

The following codes can be used when performing vasectomies:

**ICD-10 Diagnosis Codes**

**Z30.09** Encounter for other general counseling and advice on contraception *(applicable to consultation)*

**Z30.2**  Encounter for sterilization *(applicable to confirmed surgery)*

**Z30.8** Encounter for other contraceptive management *(applicable to post-vasectomy sperm count)*

**Z30.40** Encounter for surveillance of contraceptives

**Z98.52** Vasectomy status

**Outpatient Procedure Codes - CPT Codes**

**55250** Encounter Vasectomy, unilateral or bilateral (separate procedure), including postoperative semen examination(s)

**89321** Semen analysis, presence and/or mobility of sperm (applicable only if vasectomy performed elsewhere)

**G0027** Semen analysis; presence and/or motility of sperm excluding Huhner (if performing in

clinic/office)

**Surgical Trays and Supplies**

A4267 Condoms (external only)

**A4550** Surgical trays

**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)

**Evaluation and Management (E/M) Codes**

New (99202 – 99205) and established (99212 – 99215) client code selection is now based on an updated medical decision making (MDM) level OR time. Use the method most appropriate for the care given and results in the highest level code supported in the documentation. *For further guidance on using E/M codes, see the* [*Reproductive Health National Training Center’s E/M Job Aid*](https://rhntc.org/resources/evaluation-and-management-codes-job-aid)*.*

**Coding by MDM**: level is based on the highest 2 out of the 3 elements:

| Problems | Data | Risk | E/M Code |
| --- | --- | --- | --- |
| Minimal | Minimal or none | Minimal risk of morbidity | 99202; 99212 |
| Low | Limited | Low risk of morbidity | 99203; 99213 |
| Moderate | Moderate | Moderate | 99204; 99214 |
| High | Extensive | High risk of morbidity | 99205; 99215 |

**Coding by Time**

| New Patient | Time | Established Patient | Time |
| --- | --- | --- | --- |
| 99202 | 15-29 min | 99212 | 10-19 min |
| 99203 | 30-44 min | 99213 | 20-29 min |
| 99204 | 45-59 min | 99214 | 30-39 min |
| 99205 | 60-74 min | 99215 | 40-54 min |

**Modifiers**

**-25** Use with the appropriate E/M code to indicate that significant and separately identifiable E/M was provided on the same date of service as a procedure

**-95** Use this modifier with the appropriate E/M code to indicate a real-time audio and video telehealth visit

**Consent**

Federal regulations require that informed consent be obtained at least 30 days prior to sterilization for patients receiving care through federally funded programs, including Medicaid. This consent form must be in the patient’s medical record and included with your claim. You can access the consent form and further instructions through your state Medicaid office.

Additional Resources

[Vasectomy Coding Tips - AAPC](https://www.aapc.com/codes/coding-newsletters/my-urology-coding-alert/coding-tips-trust-these-6-tips-for-successful-vasectomy-coding-article?srsltid=AfmBOorsYHTTBdBV94RU6WUi0rPt7k5KObbREXiFbuLoDZt7eUzs9Vl9)