

# 2026 Reimbursement Codes for GI Diagnostic Procedures



## 2026 Medicare National Average Payment

CPT Code	Code Description	APC Category <sup>2</sup>	Facility		Physician	
			Hospital Outpatient <sup>2</sup>	ASC <sup>3</sup>	In-Office <sup>4</sup>	In-Facility <sup>4</sup>
<b>Esophageal Motility Testing</b>						
91010	Esophageal motility (manometric study of the esophagus and/or gastroesophageal junction) study; with interpretation and report.	5723	\$381	\$179	\$246	\$68
91037	Esophageal function test, gastroesophageal reflux test with nasal catheter intraluminal impedance electrode(s) placement, recording, analysis and interpretation.	5722	\$221	\$119	\$187	\$51
91013	Esophageal motility (manometric study of the esophagus and/or gastroesophageal junction) study with interpretation and report; with stimulation or perfusion during 2-dimensional data study (eg, stimulant, acid or alkali perfusion) (List separately in addition to code for primary procedure).	5723	Packaged	\$19	\$28	\$10
<b>Anorectal Motility Testing</b>						
91125 (replaced 91122)	Anorectal manometry, with rectal sensation and rectal balloon expulsion test, when performed.	5723	\$381	\$205	\$348	\$142
91124 (replaced 91120)	Rectal sensation, tone, and compliance study.	5722	\$221	\$119	\$769	\$164
90912	Biofeedback training, perineal muscles, anorectal or urethral sphincter, including EMG and/or manometry when performed; initial 15 minutes.	N/A	Not Covered	Not ASC Covered	\$82	\$37
90913	Biofeedback training, perineal muscles; each additional 15 minutes.	N/A	Not Covered	Not ASC Covered	\$33	\$21
51784	Electromyography studies (EMG) of anal or urethral sphincter, other than needle, any technique.	5721	\$131	\$29	\$66	\$37
<b>Esophageal Reflux Testing</b>						
91034	Esophagus, gastroesophageal reflux test; with nasal catheter pH electrode placement, recording, analysis and interpretation.	5723	\$381	\$152	\$203	\$50
91038	Esophageal function test, gastroesophageal reflux test with nasal catheter intraluminal impedance electrode(s) placement, recording, analysis and interpretation; prolonged (greater than 1 hour, up to 24 hours).	5723	\$381	\$205	\$446	\$58

### Reimbursement Assistance

For assistance regarding reimbursement, please email questions to [sales@diversatekhc.com](mailto:sales@diversatekhc.com).

### References

<sup>1</sup> 2025 Current Procedural Terminology (CPT®) Professional Edition. © 2025 American Medical Association. All rights reserved.

<sup>2</sup> CMS 2026 OPPS Payment by HCPCS Code for CY2026. Addendum B. Accessed 04.13.26.

<sup>3</sup> CMS 2026 Ambulatory Surgery Center Covered Surgical Procedures for CY2026. Addendum AA. Accessed 04.13.26.

<sup>4</sup> CMS 2026 Physician Fee Schedule. Conversion Factor \$33.57 (Qualifying Advanced APM Participants). Accessed 04.13.26.

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