

# Comprehensive Secretin CPT & J2850 Billing Guide

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Date: August 25, 2025

## I. Active Status of CPT Codes

All five CPT codes (82938, 43755, 43756, 43757, 96374) are currently ACTIVE as of August 2025:

- 82938: Active (Gastrin after secretin stimulation)
- 43755: Active (Gastric secretory study)
- 43756: Active (Duodenal intubation & aspiration)
- 43757: Active (Pancreatic/gallbladder secretory study)
- 96374: Active (IV push administration)

## II. Modifier, Bundling, and Payer-Specific Nuances

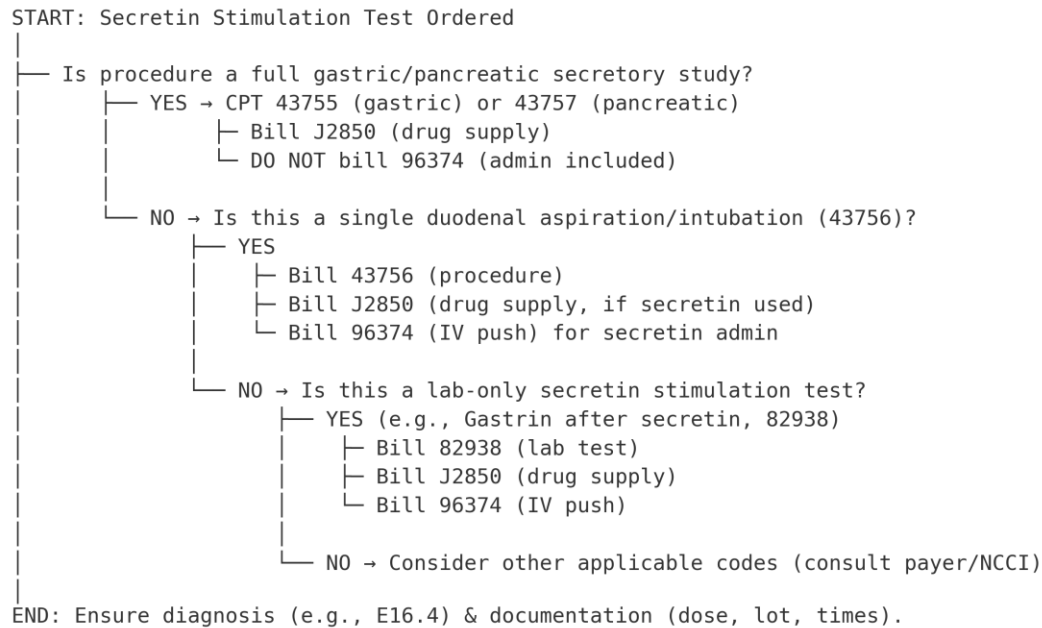
- 82938: Use modifier 90 (reference lab) or 91 (repeat test) as applicable. Conditionally packaged under OPPS when billed with other services.
- 43755 & 43757: Include drug administration in the descriptor; do not bill 96374 separately. Bundled with EGD if performed in the same session unless truly distinct (use modifier 59/XS if justified).
- 43756: Includes image guidance. Bill 96374 if secretin is administered separately. Bundled with EGD if part of the same endoscopic session.
- 96374: Billable for IV push when not integral to another procedure. Use JW/JZ modifiers for discarded drug when reporting J2850.

## III. J2850 (Human Secretin) Inclusion for Reimbursement

- Always bill J2850 separately for the drug supply (per 1 mcg). Link it to the appropriate CPT code (43755, 43757, 43756, 82938) based on the clinical scenario.
- For lab-only tests (82938): Bill 96374 for the IV push plus J2850 for the drug.
- For 43755/43757: Administration is included; bill only J2850 for the drug.
- For 43756: Bill the procedure, J2850 for drug, and 96374 for IV push.
- Medicare: J2850 reimbursed under ASP, OPPS status K (separately payable). Commercial payers may require PA or linkage to CPT codes.

## IV. Billing Flowchart

The following flowchart illustrates when to bill each code combination:



## V. Payer-Facing Billing Guide & Sample Claim Lines

### 1. Full Gastric Secretory Study (43755):

- Bill CPT 43755 (procedure).
- Bill J2850 (drug supply).
- Do NOT bill 96374.

### 2. Pancreatic/Gallbladder Study (43757):

- Bill CPT 43757 (procedure).
- Bill J2850 (drug supply).
- Do NOT bill 96374.

### 3. Duodenal Intubation/Aspiration (43756):

- Bill CPT 43756 (procedure).

- Bill J2850 (drug supply if secretin used).
- Bill 96374 (IV push).

#### 4. Lab-Only Secretin Stimulation (82938):

- Bill CPT 82938 (lab test).
- Bill J2850 (drug supply).
- Bill 96374 (IV push).

### Sample Claim Lines:

Example: Gastrin after secretin stimulation (physician office):

Line 1: 82938 Diagnosis: E16.4  
 Line 2: J2850 Units: 16 (16 mcg secretin)  
 Line 3: 96374 Diagnosis: E16.4

Example: Pancreatic secretory study (hospital outpatient):

Line 1: 43757 Diagnosis: E16.4  
 Line 2: J2850 Units: 16  
 (Drug administration included in 43757)

## VI. Documentation Requirements

- Clear indication and physician order.
- Dose, route, time, and lot/expiry of secretin (J2850).
- Procedure details (samples, stimulation method).
- Start/stop times for infusions.
- Use JW/JZ for discarded drug per CMS.

*The CPT codes above are accurate as of August 2025. Consult the [AMA website](#) to ensure you are using current CPT code information.*

*ChiRhoStim® is covered by most major health plans. Actual coverage and reimbursement decisions are made by individual payors following the receipt of claims. For additional information, customers should consult with their payors for all relevant coding, reimbursement, and coverage requirements. It is the sole responsibility of the provider to select the proper code and ensure the accuracy of all claims used in seeking reimbursement. All services must be medically appropriate and properly supported in the patient's medical record.*