Deflux™

2026 Reimbursement Guide

The following coding information is related to treatment of the appropriate patients with vesicoureteral reflux (VUR) using Deflux™, an injectable gel. This document serves as a guide and not intended to dictate or determine practice patterns of medical providers. All documentation for services rendered to support Deflux™ and the medical record by the provider. Below is a list of diagnosis/CPT/HCPCS codes that may be helpful.

For questions regarding coding services provided using Deflux, please contact Teleflex Reimbursement Support at 844-516-5966.

POSSIBLE INTERNATIONAL CLASSIFICATION OF DISEASES (ICD-10-CM DIAGNOSIS CODES)

The patient's diagnosis is only determined at the sole discretion and medical judgment of the treating physician.

- **N13.7** Vesicoureteral reflux (VUR)
  - **N13.70** VUR, unspecified
  - **N13.71** VUR without reflux nephropathy
  - **N13.72** VUR with reflux nephropathy without hydroureter
    - **N13.721** Unilateral
    - **N13.722** Bilateral
    - **N13.729** Unspecified
  - **N13.73** VUR with reflux nephropathy with hydroureter
    - **N13.731** Unilateral
    - **N13.732** Bilateral
    - **N13.739** Unspecified

CODING AND BILLING

Administration of Deflux™ does have a CPT code. The appropriate code and Healthcare Common Procedure Coding System (HCPCS) is indicated below. Deflux is coded with HCPCS code L8604. Additional information may be required by insurers.

Administration Code	**CPT** 52327	Cystourethroscopy with subureteric injection of implant	**NOTE:** Surgical cystoscopy always includes diagnostic cystoscopy and should not be reported separately
Reporting Implant Material on Claim Forms	**HCPCS** L8604	Injectable bulking agent, dextranomer/ hyaluronic acid copolymer implant, urinary tract	**NOTE:** 1 mL, includes shipping and necessary supplies

REVENUE CODES

Revenue codes are used to assign costs to hospital specific accounting centers and are reported on facility claim forms (UB04). The following revenue codes may be appropriate; however, facilities should report the code that is consistent with their own accounting procedures.

278	Other implants (Deflux syringe and needle)
36X or 49X	General surgery or ambulatory surgery (Implant procedure)

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Teleflex LLC encourages providers to submit claims for services that are appropriately and accurately consistent with FDA clearance and approved labeling and does not promote the use of its products outside their FDA-cleared labeling.

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