

Esophageal Stents

PRODUCT INFORMATION SHEET

CLINICAL BENEFITS

- Fully covered with anti-migration struts
- Non-foreshortening
- Unique small diameters

QUICK FACTS

- Box quantity: 1
- Single Use
- Not made with natural rubber latex or DEHP
- Sterility: Non-Sterile
- Shelf Life
 - EndoMAXX: 5 years
 - ALIMAXX-ES: 3 years
- FDA Class II medical device
 - EndoMAXX:
 - 510(k) number: K111611
 - <https://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfp/MN/pmn.cfm?ID=K111611>
 - ALIMAXX-ES:
 - 510(K) number: K060239
 - https://www.accessdata.fda.gov/cdrh_docs/pdf6/K060239.pdf

CODING*

Healthcare Common Procedure Code(s) (HCPCS)

- C1874 Stent, coated/coated, with delivery system

Common Procedure Terminology (CPT) Code(s)

- 43212 - Esophagoscopy, flexible, transoral; with placement of endoscopic stent (includes pre- and post-dilation and guide wire passage, when performed)
- 43266 - Esophagogastroduodenoscopy, flexible, transoral; with placement of endoscopic stent (includes pre- and post-dilation and guide wire passage, when performed)

International Classification of Diseases (ICD) Code(s)

- ODH50DZ - Insertion of Intraluminal Device into Esophagus, Open Approach
- ODH50UZ - Insertion of Feeding Device into Esophagus, Open Approach
- ODH53DZ - Insertion of Intraluminal Device into Esophagus, Percutaneous Approach
- ODH53UZ - Insertion of Feeding Device into Esophagus, Percutaneous Approach
- ODH54DZ - Insertion of Intraluminal Device into Esophagus, Percutaneous Endoscopic Approach
- ODH54UZ - Insertion of Feeding Device into Esophagus, Percutaneous Endoscopic Approach
- ODH57DZ - Insertion of Intraluminal Device into Esophagus, Via Natural or Artificial Opening
- ODH57UZ - Insertion of Feeding Device into Esophagus, Via Natural or Artificial Opening

- ODH58DZ - Insertion of Intraluminal Device into Esophagus, Via Natural or Artificial Opening Endoscopic
- ODH58UZ - Insertion of Feeding Device into Esophagus, Via Natural or Artificial Opening Endoscopic

Medicare Severity Diagnosis Related Groups (MSDRG)

- DRG 374 Digestive Malignancy with MCC
- DRG 375 Digestive Malignancy with CC
- DRG 376 Digestive Malignancy without CCC/MCC
- DRG 368 Major Esophageal Disorders with MCC
- DRG 369 Major Esophageal Disorders with CC
- DRG 370 Major Esophageal Disorders without CC/MCC

United Nations Standard Products and Services Code (UNSPSC)

- 42295906 Esophageal stents

GLOBAL TRADE ITEM NUMBER (GTIN)

ALIMAXX-ES	
80129-201	00884450030639
80129-202	00884450030646
80129-203	00884450030653
80129-204	00884450030660
80129-205	00884450030677
80129-206	00884450030684
80129-207	00884450033500
80129-208	00884450038543
80129-209	00884450038550
80129-210	00884450033517
80129-211	00884450038567
80129-212	00884450038574
80129-213	00884450033524
80129-214	00884450038581
80129-215	00884450038598

ENDOMAXX	
MAXX-197	00884450093108
MAXX-1910	00884450093047
MAXX-1912	00884450093061
MAXX-1915	00884450093085
MAXX-237	00884450147610
MAXX-2310	00884450147627
MAXX-2312	00884450147634
MAXX-2315	00884450147641

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ENDOMAXX

Merit Medical Endotek			Boston Scientific Wallflex		Cook Evolution	
SIZE	SKU	Stent Type	SKU	Stent Type	SKU	Stent Type
19X70	MAXX-197	Fully-Covered	Size Not Offered		EVO-FC-18-23-8-E	Fully-Covered
19X100	MAXX-1910	Fully-Covered	M00516700	Fully-Covered	EVO-FC-18-23-10-E	Fully-Covered
19X120	MAXX-1912	Fully-Covered	M00516710	Fully-Covered	EVO-FC-18-23-12-E	Fully-Covered
19X150	MAXX-1915	Fully-Covered	M00516720	Fully-Covered	Size Not Offered	
23X70	MAXX-237	Fully-Covered	Size Not Offered		EVO-FC-20-25-8-E	Fully-Covered
23X100	MAXX-2310	Fully-Covered	M00516730	Fully-Covered	EVO-FC-20-25-10-E	Fully-Covered
23X120	MAXX-2312	Fully-Covered	M00516740	Fully-Covered	EVO-FC-20-25-12-E	Fully-Covered
23X150	MAXX-2315	Fully-Covered	M00516750	Fully-Covered	Size Not Offered	

Merit Medical Endotek			Olympus Hanarostent		Taewoong Niti-S	
SIZE	SKU	Stent Type	SKU	Stent Type	SKU	Stent Type
19X70	MAXX-197	Fully-Covered	HES-18-080-070	Fully-Covered	ES1808F	Fully-Covered
19X100	MAXX-1910	Fully-Covered	HES-18-100-070	Fully-Covered	ES1810F	Fully-Covered
19X120	MAXX-1912	Fully-Covered	HES-18-120-070	Fully-Covered	ES1812	Fully-Covered
19X150	MAXX-1915	Fully-Covered	HES-18-150-070	Fully-Covered	ES1815F	Fully-Covered
23X70	MAXX-237	Fully-Covered	HES-22-080-070	Fully-Covered	ES2008F	Fully-Covered
23X100	MAXX-2310	Fully-Covered	HES-22-100-070	Fully-Covered	ES2010F	Fully-Covered
23X120	MAXX-2312	Fully-Covered	HES-22-120-070	Fully-Covered	ES2012F	Fully-Covered
23X150	MAXX-2315	Fully-Covered	HES-22-150-070	Fully-Covered	ES2015F	Fully-Covered

Merit Medical Endotek			Thoracent Bonastent	
SIZE	SKU	Stent Type	SKU	Stent Type
19X70	MAXX-197	Fully-Covered	BER-1808	Fully-Covered
19X100	MAXX-1910	Fully-Covered	BER-1810	Fully-Covered
19X120	MAXX-1912	Fully-Covered	BER-18120	Fully-Covered
19X150	MAXX-1915	Fully-Covered	BER-1815	Fully-Covered
23X70	MAXX-237	Fully-Covered	Size Not Offered	
23X100	MAXX-2310	Fully-Covered	Size Not Offered	
23X120	MAXX-2312	Fully-Covered	Size Not Offered	
23X150	MAXX-2315	Fully-Covered	Size Not Offered	

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ALIMAXX-ES

Merit Medical Endotek			Cook Evolution			Taewoong Niti-S	
SIZE	SKU	Stent Type	SKU	Expansion Technique	Stent Type	SKU	Stent Type
12X70	80129-207	Fully-Covered	Size Not Offered		Size Not Offered		
12X100	80129-208	Fully-Covered	Size Not Offered		Size Not Offered		
12X120	80129-209	Fully-Covered	Size Not Offered		Size Not Offered		
14X70	80129-210	Fully-Covered	Size Not Offered		Size Not Offered		
14X100	80129-211	Fully-Covered	Size Not Offered		Size Not Offered		
14X120	80129-212	Fully-Covered	Size Not Offered		Size Not Offered		
16X70	80129-213	Fully-Covered	Size Not Offered		Size Not Offered		
16X100	80129-214	Fully-Covered	Size Not Offered		Size Not Offered		
16X120	80129-215	Fully-Covered	Size Not Offered		Size Not Offered		
18X70	80129-201	Fully-Covered	EVO-FC-18-23-8-E	Self-Expanding	Fully-Covered	ES1808F	Fully-Covered
18X100	80129-202	Fully-Covered	EVO-FC-18-23-10-E	Self-Expanding	Fully-Covered	ES1810F	Fully-Covered
18X120	80129-203	Fully-Covered	EVO-FC-18-23-12-E	Self-Expanding	Fully-Covered	ES1812	Fully-Covered
22X70	80129-204	Fully-Covered	EVO-FC-20-25-8-E	Self-Expanding	Fully-Covered	ES2008F	Fully-Covered
22X100	80129-205	Fully-Covered	EVO-FC-20-25-10-E	Self-Expanding	Fully-Covered	ES2010F	Fully-Covered
22X120	80129-206	Fully-Covered	EVO-FC-20-25-12-E	Self-Expanding	Fully-Covered	ES2012F	Fully-Covered

Merit Medical Endotek			Olympus Hanarostent		Thoracent Bonastent	
SIZE	SKU	Stent Type	SKU	Stent Type	SKU	Stent Type
12X70	80129-207	Fully-Covered	Size Not Offered		Size Not Offered	
12X100	80129-208	Fully-Covered	Size Not Offered		Size Not Offered	
12X120	80129-209	Fully-Covered	Size Not Offered		Size Not Offered	
14X70	80129-210	Fully-Covered	Size Not Offered		Size Not Offered	
14X100	80129-211	Fully-Covered	Size Not Offered		Size Not Offered	
14X120	80129-212	Fully-Covered	Size Not Offered		Size Not Offered	
16X70	80129-213	Fully-Covered	Size Not Offered		Size Not Offered	
16X100	80129-214	Fully-Covered	Size Not Offered		Size Not Offered	
16X120	80129-215	Fully-Covered	Size Not Offered		Size Not Offered	
18X70	80129-201	Fully-Covered	HES-18-080-070	Fully-Covered	BER-1808	Fully-Covered
18X100	80129-202	Fully-Covered	HES-18-100-070	Fully-Covered	BER-1810	Fully-Covered
18X120	80129-203	Fully-Covered	HES-18-120-070	Fully-Covered	BER-18120	Fully-Covered
22X70	80129-204	Fully-Covered	HES-22-080-070	Fully-Covered	Size Not Offered	
22X100	80129-205	Fully-Covered	HES-22-100-070	Fully-Covered	Size Not Offered	
22X120	80129-206	Fully-Covered	HES-22-120-070	Fully-Covered	Size Not Offered	

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