CARDIAC RHYTHM MANAGEMENT

National Medicare Reimbursement Guide

Implantable / Insertable Cardiac Monitors (ICM)

Effective January 1, 2024

TERMS AND CONDITIONS

All content herein may be based upon several sources, included but not limited to primary sources, scientific literature, commercially available data sets, customer supplied information, and external sources.

Estimates shown are for illustrative purposes only. This content is not intended for any other purpose.

It should be noted that there are usually differences between economic modelling actual results. Abbott does not take responsibility for any such discrepancies. There is no guarantee of any potential economic outcome, including payment, cost savings, or procedure volume. Economic outcomes are dependent on many factors and will vary.

Certain Maryland hospitals paid under Maryland Waiver provisions using All Patient Refined Diagnosis Related Group (APR-DRG) are excluded from payment under the Medicare Inpatient Prospective Payment System (IPPS).

Reimbursement Calculators should not be provided at no charge to actively licensed Healthcare Professionals (HCPs) who regularly practice in Vermont.

This information is not to be distributed to third parties.

NATIONAL CARDIAC RHYTHM MANAGEMENT MEDICARE REIMBURSEMENT GUIDE

Effective January 1, 2024

Introduction

This content is intended to provide reference material related to general guidelines for reimbursement when used consistently with the product's labeling. This content includes information regarding coverage, coding and reimbursement. Additional resources can be found at www.cardiovascular.abbott/us/en/hcp/reimbursement.html

Biventricular Pacing / Cardiac Resynchronization Therapy (CRT)

In certain circumstances, an additional lead may be required to achieve pacing of the left ventricle (biventricular pacing). In this event, the additional transvenous lead placement should be separately reported using CPT‡ 33224 or 33225. 33226 is reported for repositioning. See the Cardiac Resynchronization Therapy section for more information.

Reimbursement Hotline

Abbott offers a reimbursement hotline, which provides live coding and reimbursement information from dedicated reimbursement specialists. Coding and reimbursement support is available from 8 a.m. to 5 p.m. Central Time, Monday through Friday at (855) 569-6430 or CRM_PTA@abbott.com. Coding and reimbursement assistance is provided subject to the disclaimers set forth in this content.

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IMPLANTABLE/INSERTABLE CARDIAC MONITORS (ICM)

Physician

CPT‡ CODE	DESCRIPTION	WORK RVU	MEDICARE NATIONAL RATE	
			FACILITY	NON-FACILITY
	IMPLANT			
33285	Insertion, subcutaneous cardiac rhythm monitor, including programming	1.53	$84	$4,071
	REMOVAL			
33286	Removal of a subcutaneous cardiac rhythm monitor	1.50	$82	$127

It is incumbent upon the physician to determine which, if any, modifiers should be used first.

IMPLANTABLE/INSERTABLE CARDIAC MONITORS (ICM)

Hospital Outpatient

CPT‡ CODE	DESCRIPTION	STATUS INDICATOR	APC	MEDICARE NATIONAL RATE
	IMPLANT			
33285	Insertion, subcutaneous cardiac rhythm monitor, including programming	J1	5222	$8,103
	REMOVAL			
33286	Removal of a subcutaneous cardiac rhythm monitor	Q2	5071	$671

J1: Hospital Part B services paid through a comprehensive APC
Q2: T Packaged codes

Effective Dates: January 1, 2024 - December 31, 2024

IMPLANTABLE/INSERTABLE CARDIAC MONITORS (ICM)

Ambulatory Surgery Center (ASC)

CPT‡ CODE	DESCRIPTION	PAYMENT INDICATOR	MULTI-PROCEDURE DISCOUNT	MEDICARE NATIONAL RATE
	IMPLANT			
33285	Insertion, subcutaneous cardiac rhythm monitor, including programming	J8	Y	$6,904
	REMOVAL			
33286	Removal of a subcutaneous cardiac rhythm monitor	G2	N	$365

NA: There is no established payment in this setting

G2: Non-office-based surgical procedure added in CY 2008 or later; payment based on OPPS relative payment weight

J8: Device-intensive procedure; paid at an adjusted rate.

IMPLANTABLE/INSERTABLE CARDIAC MONITORS (ICM)

Hospital Inpatient

ICD-10 PCS CODE	DESCRIPTION	TYPICAL MS-DRG ASSIGNMENT	MEDICARE NATIONAL RATE
ICM INSERTION			
0JH632Z	Insertion of monitoring device into chest subcutaneous tissue and fascia, percutaneous approach	Cardiac Pacemaker revision except device replacement	
		260 with MCC	$23,212
		261 with CC	$13,176
		262 without CC/MCC	$11,520
ICM REMOVAL			
0JPT32Z	Removal of monitoring device from trunk subcutaneous tissue and fascia, percutaneous approach Monitoring of cardiac electrical activity, ambulatory, external approach	Does not impact MS-DRG assignment	NA
ICM MONITORING			
4A12X45	Monitoring of cardiac electrical activity, ambulatory, external approach	Does not impact MS-DRG assignment	NA

NA: There is no established Medicare payment in this setting.

CC: complication or comorbidity. MCC: a major complication or comorbidity when used as a secondary diagnosis

IMPLANTABLE/INSERTABLE CARDIAC MONITORS (ICM)

HCPCS Device Category C-Codes

C-CODE	DESCRIPTION
EVENT RECORDER	
C1764	Event recorder, cardiac (implantable)

ICD-10-CM Diagnosis Codes

Diagnosis codes are used by both hospitals and physicians to document the indication for the procedure. For Cardiac Pacemaker, Implantable Cardioverter Defibrillator (ICD) and Implantable/Insertable Cardiac Monitors (ICM) patients, there are many possible diagnosis code scenarios and a wide variety of possible combinations. The possible scenarios and combinations are too numerous to capture in this document. The customer should check with their local carriers or intermediaries and should consult with legal counsel or a financial, coding or reimbursement specialist for coding, reimbursement or billing questions related to ICD-10-CM diagnosis codes.

1. FY2024 IPPS Final Rule Home Page. U.S. Centers for Medicare and Medicaid Services. [cited: September 2023].

   https://www.cms.gov/medicare/payment/prospective-payment-systems/acute-inpatient-pps/fy-2024-ipps-final-rule-home-page

2. CY2024 ASC Final Notice Home Page. U.S. Centers for Medicare and Medicaid Services. [cited: November 2023].

   https://www.cms.gov/medicare/payment/prospective-payment-systems/ambulatory-surgical-center-asc/asc-regulations-and-notices

3. CY2024 MPFS Final Rule Home Page. U.S. Centers for Medicare and Medicaid Services. [cited: November 2023].

   https://www.cms.gov/medicare/payment/fee-schedules/physician/federal-regulation-notices

4. CY2024 OPPS Final Rule Home Page. U.S. Centers for Medicare and Medicaid Services. [cited: November 2023].

   https://www.cms.gov/medicare/payment/prospective-payment-systems/hospital-outpatient/regulations-notices

5. FY2023 IPPS Final Rule Home Page. U.S. Centers for Medicare and Medicaid Services. [cited: August 2022].

   https://www.cms.gov/medicare/payment/prospective-payment-systems/acute-inpatient-pps/fy-2023-ipps-final-rule-home-page

6. CY2023 OPPS Final Rule with Correction Notice. U.S. Centers for Medicare and Medicaid Services. [cited: November 2023].

   https://www.cms.gov/medicare/payment/prospective-payment-systems/hospital-outpatient/regulations-notices

7. Provider Outpatient Hospital Charge Data by APC, CY2021. [cited: November 2023].

   https://data.cms.gov/provider-summary-by-type-of-service/medicare-outpatient-hospitals/medicare-outpatient-hospitals-by-provider-and-service

8. Medicare Inpatient Hospitals - by Provider and Service - FY2021 [cited: Sept 2023].

   https://data.cms.gov/provider-summary-by-type-of-service/medicare-inpatient-hospitals/medicare-inpatient-hospitals-by-provider-and-service

9. HOSPITAL ACUTE INPATIENT SERVICES PAYMENT SYSTEM - PAYMENT BASICS [cited: September 2023]

   https://www.medpac.gov/wp-content/uploads/2021/11/MedPAC_Payment_Basics_22_hospital_FINAL_SEC.pdf

10. CGS Medicare Part B Fees [cited: January 2021].

    https://www.cgsmedicare.com/partb/fees/index.html

11. First Coast Service Options (FCSO) Medicare Part B Fees [cited: January 2021].

    https://medicare.fcso.com/SharedTools/faces/FeeSchedule_en.jspx?lob=&state=

12. National Government Services (NGS) Medicare Fee Schedule Lookup [cited: September 2023].

    https://www.ngsmedicare.com/web/ngs/fee-schedules-and-pricers?lob=93617&state=97256&region=93623

13. Noridian Healthcare Solutions Medicare Contractor Status Codes (C-Status) [cited: January 2021].

    https://med.noridianmedicare.com/web/jeb/fees-news/fee-schedules/contractor-status-codes-c-status

14. Novitas Solutions Medicare Physician's Fee Schedule [cited: September 2023].

    https://www.novitas-solutions.com/webcenter/portal/MedicareJH/FeeLookup

15. Palmetto GBA Medicare Physician Fee Schedule Part B [cited: January 2021].

    https://www.palmettogba.com/palmetto/fees_front.nsf/fee_main?OpenForm

16. WPS Medicare Physician Fee Schedules [cited: January 2021].

    https://www.wpsgha.com/wps/portal/mac/site/fees-and-reimbursements/guides-and-resources/2021-mpfs/!ut/p/z0/fczRCoMgFIDhJ5JjDqTbNhouku1q2LmJwzKTNhWtPf96gl3-8PEDggEM9PWONh8DvY8eUI4PpaSqat7fhea80dfnqa37862R0AH-B8dBZH3RDjDRtjAf5gjG7X6yhVGYWLYl7vllCxjBRcU-aS6QVhx-vBIfIA!!/

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