



2021 ABBOTT REIMBURSEMENT GUIDE

CMS Hospital Outpatient (OPPS) and Ambulatory Surgical Center (ASC) Reimbursement Prospectus

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The Centers for Medicare & Medicaid Services (CMS) made significant changes to calendar year 2021 (CY2021) policies and payment levels which impact a number of procedures utilizing Abbott's technology and therapy solutions in the Hospital Outpatient Department (HOPD) and Ambulatory Surgical Center (ASC) settings of care. These changes are compounded by the advance of both new and ongoing payment reform initiatives impacting a majority of U.S. health care facilities. In this prospectus document, Abbott highlights certain payment policies and new payment rates to health care providers who perform services that are now paid differently than in prior years.

On December 3, 2020, CMS released the CY2021 Hospital Outpatient Prospective Payment System (OPPS)/Ambulatory Surgical Center (ASC) Final Rule, effective for services on January 1, 2021.^{1,2}

For 2021, CMS projects a:

- 2.2% increase in total OPPS payments¹
- 1.4% increase in total ASC payments²

We have provided the following tables based on common billing scenarios for various technologies and procedures. This is intended for illustrative purposes only and is not a guarantee of reimbursement levels or coverage.

Reimbursement can vary based on the specific procedures being performed, and on the Comprehensive Ambulatory Payment Classification (APC) that CMS has created in the HOPD.

Using the CY2021 rules as a reference, Abbott has analyzed the potential impact on payment to individual procedures performed within the HOPD, and in the ASC care setting, which involve our technologies or therapy solutions. We will continue to analyze the potential impact of the changes to CMS payment policies and update this document as necessary.

For more information please visit Abbott.com, or contact Abbott Health Care Economics team at (855) 569-6430 or AbbottEconomics@Abbott.com.

Franchise	Therapy/ Technology	Procedure/Scenario	Primary APC	CPT ¹ Code	Hospital Outpatient (OPPS)			Ambulatory Surgery Center (ASC)		
					2020 ³ Payment	2021 ¹ Payment	% Change	2020 ⁴ Payment	2021 ² Payment	% Change
Electrophysiology (EP)	EP Ablation	Catheter ablation, AV node	5212	93650	\$5,885	\$6,078	3.3%	NA	NA	NA
		EP study with catheter ablation, SVT	5213	93653	\$20,433	\$21,464	5.0%	NA	NA	NA
		EP study and catheter ablation, VT	5213	93654	\$20,433	\$21,464	5.0%	NA	NA	NA
		EP study and catheter ablation, treatment of AF by PVI	5213	93656	\$20,433	\$21,464	5.0%	NA	NA	NA
	EP Studies	Comprehensive EP study without induction	5212	93619	\$5,885	\$6,078	3.3%	NA	NA	NA
Cardiac Rhythm Management (CRM)	Implantable Cardiac Monitor (ICM)	ICM Implantation	5222	33285	\$7,641	\$8,153	6.7%	\$6,655	\$7,046	5.9%
		ICM Removal	5071	33286	\$610	\$622	2.0%	\$308	\$316	2.6%
	Pacemaker	System Implant or Replacement - Single Chamber	5223	33206, 33207	\$10,251	\$10,400	1.5%	\$7,385	\$7,635	3.4%
		System Implant or Replacement - Dual Chamber	5223	33208	\$10,251	\$10,400	1.5%	\$7,816	\$7,897	1.0%
		Battery Replacement - Single Lead	5222	33227	\$7,641	\$8,153	6.7%	\$6,061	\$6,436	6.2%
		Battery Replacement - Dual Lead	5223	33228	\$10,251	\$10,400	1.5%	\$7,634	\$7,701	0.9%
	Implantable Cardioverter Defibrillator (ICD)	System Implant or Replacement	5232	33249	\$32,279	\$32,839	1.7%	\$26,699	\$26,733	0.1%
		Battery Replacement - Single Lead	5231	33262	\$22,710	\$23,040	1.5%	\$19,502	\$19,793	1.5%
		Battery Replacement - Dual Lead	5231	33263	\$22,710	\$23,040	1.5%	\$19,777	\$19,987	1.1%
	Leads - Pacemaker, ICD, CRT	Single lead, Pacemaker or ICD	5222	multiple	\$7,641	\$8,153	6.7%	\$5,469	\$5,556	1.6%
		CRT	5223	33224	\$10,251	\$10,400	1.5%	\$7,837	\$7,656	-2.3%
	Device Monitoring	Programming and Remote Monitoring	5741	multiple	\$36	\$37	2.8%	NA	NA	NA
	CRT-P	System Implant or Replacement	5224	33208, +33225	\$18,311	\$18,311	1.6%	\$7,837	\$7,656	1.0%
		Battery Replacement	5224	33229	\$18,311	\$18,611	1.6%	\$11,807	\$12,026	1.9%
	CRT-D	System Implant or Replacement	5232	33249, +33225	\$32,279	\$32,839	1.7%	\$26,699	\$26,733	0.1%
Battery Replacement		5232	33264	\$32,279	\$32,839	1.7%	\$26,640	\$26,748	0.4%	
Heart Failure	CardioMEMS™	Sensor Implant	NA	C2624	NA	NA	NA	NA	NA	NA
			5200	33289	\$28,518	\$28,815	1.0%	NA	NA	NA
		Electronic Analysis of Devices	5741	G2066	\$36	\$37	2.8%	NA	NA	NA
			NA	93264	NA	NA	NA	NA	NA	NA
LVAD	Interrogation, in person	5742	93750	\$113	\$100	-11.5%	NA	NA	NA	
Coronary	PCI Drug Eluting Stents (including FFR/OCT)	DES, with angioplasty; one vessel, with or without FFR and/or OCT	5193	C9600	\$9,907	\$10,043	1.4%	\$6,189	\$6,276	1.4%
		Two DES, with angioplasty; two vessels, with or without FFR and/or OCT.	5193	C9600	\$9,907	\$10,043	1.4%	\$6,189	\$6,276	1.4%
		Two DES, with angioplasty; one vessel, with or without FFR and/or OCT	5193	C9600	\$9,907	\$10,043	1.4%	\$6,189	\$6,276	1.4%
		Two DES, with angioplasty; two major coronary arteries, with or without FFR and/or OCT. Complexity adjustment.	5194	C9600	\$15,938	\$16,064	0.8%	\$9,284	\$9,414	1.4%
		DES with angioplasty; each additional branch	NA	C9601	NA	NA	NA	NA	NA	NA
	BMS with Angioplasty	BMS, with angioplasty; one vessel, with or without FFR and/or OCT	5193	92928	\$9,907	\$10,043	1.4%	\$6,057	\$5,997	-1%
	DES with atherectomy	DES with atherectomy	5194	C9602	\$15,938	\$16,064	0.8%	NA	\$11,371	NA
	DES in bypass graft	DES in bypass graft	5193	C9604	\$9,907	\$10,043	1.4%	NA	\$6,276	NA
	DES and AMI	DES and AMI	NA	C9606	\$0	\$0	NA	NA	NA	NA
	DES and CTO	DES and CTO	5194	C9607	\$15,938	\$16,064	0.8%	NA	\$11,286	NA

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

Franchise	Therapy/ Technology	Procedure/Scenario	Primary APC	CPT+ Code	Hospital Outpatient (OPPS)			Ambulatory Surgery Center (ASC)		
					2020 ³ Payment	2021 ¹ Payment	% Change	2020 ⁴ Payment	2021 ² Payment	% Change
Structural Heart	PFO Closure	ASD/PFO closure	5194	93580	\$15,938	\$16,064	0.8%	NA	NA	NA
	ASD	ASD/PFO closure	5194	93580	\$15,938	\$16,064	0.8%	NA	NA	NA
	VSD	VSD closure	5194	93581	\$15,938	\$16,064	0.8%	NA	NA	NA
	PDA	PDA closure	5194	93582	\$15,938	\$16,064	0.8%	NA	NA	NA
Chronic Pain	Spinal Cord Stimulation and DRG Stimulation	Single Lead Trial: percutaneous	5462	63650	\$6,186	\$6,161	-0.4%	\$4,515	\$4,481	-0.8%
		Dual Lead Trial: percutaneous	5462	63650	\$6,186	\$6,161	-0.4%	\$9,030	\$8,962	-0.8%
		Surgical Lead Trial	5464	63655	\$19,277	\$20,480	6.2%	\$15,942	\$16,774	5.2%
		Full System - Single lead - Percutaneous	5465	63685	\$29,116	\$29,445	1.1%	\$27,981	\$28,385	1.4%
		Full System - Dual Lead - Percutaneous	5465	63685	\$29,116	\$29,445	1.1%	\$32,496	\$32,866	1.1%
		Full System IPG - Laminectomy	5465	63685	\$29,116	\$29,445	1.1%	\$39,408	\$40,678	3.2%
		IPG implant or replacement	5465	63685	\$29,116	\$29,445	1.1%	\$23,466	\$23,904	1.9%
		Single lead	5462	63650	Packaged	Packaged		\$4,515	\$4,481	-0.8%
		Dual lead	5462	63650	Packaged	Packaged		\$4,515	\$4,481	-0.8%
	Analysis of IPG, Simple Programming	5742	95971	\$113	\$100	-11.5%	NA	NA	NA	
	RF Ablation	Cervical Spine / Thoracic Spine	5431	64633	\$1,719	\$1,754	2.0%	\$797	\$809	1.5%
		Lumbar Spine	5431	64635	\$1,719	\$1,754	2.0%	\$797	\$809	1.5%
		Other Peripheral Nerves	5443	64640	\$812	\$822	1.2%	\$176	\$180	2.3%
Movement Disorders	DBS	IPG Placement - Single Array	5464	61885	\$19,277	\$20,480	6.2%	\$17,306	\$18,193	5.1%
		IPG Placement - Two Single Array IPGs	5464	61885	\$19,277	\$20,480	6.2%	\$17,306	\$18,193	5.1%
			5464	61885	\$19,277	\$20,480	6.2%	\$17,306	\$18,193	5.1%
		IPG Placement - Dual Array	5465	61886	\$29,116	\$29,445	1.1%	\$23,560	\$24,018	1.9%
		Analysis of IPG, No Programming	5734	95970	\$109	\$112	2.8%	NA	NA	NA
		Analysis of IPG, Simple Programming; first 15 Min	5742	95983	\$113	\$100	-11.5%	NA	NA	NA
Peripheral Vascular	Angioplasty	Angioplasty (Iliac)	5192	37220	\$4,953	\$4,957	0.1%	\$2,142	\$2,167	1.2%
		Angioplasty (Fem/Pop)	5192	37224	\$4,953	\$4,957	0.1%	\$3,120	\$3,081	-1.3%
		Angioplasty (Tibial/Peroneal)	5193	37228	\$9,907	\$10,043	1.4%	\$5,670	\$5,822	2.7%
	Atherectomy	Atherectomy (Fem/Pop)	5193	37225	\$9,907	\$10,043	1.4%	\$6,675	\$6,763	1.3%
		Atherectomy (Tibial/Peroneal)	5194	37229	\$15,938	\$16,064	0.8%	\$10,286	\$10,556	2.6%
	Stenting	Stenting (Iliac)	5193	37221	\$9,907	\$10,043	1.4%	\$6,179	\$6,247	1.1%
		Stenting (Fem/Pop)	5193	37226	\$9,907	\$10,043	1.4%	\$6,444	\$6,540	1.5%
		Stenting (Periph, incl Renal)	5193	37236	\$9,907	\$10,043	1.4%	\$5,945	\$6,133	3.2%
		Stenting (Tibial/Peroneal)	5194	37230	\$15,938	\$16,064	0.8%	\$10,101	\$10,408	3.0%
	Atherectomy and Stenting	Atherectomy and stenting (Fem/Pop)	5194	37227	\$15,938	\$16,064	0.8%	\$10,941	\$11,301	3.3%
		Atherectomy and stenting (Tibial/Peroneal)	5194	37231	\$15,938	\$16,064	0.8%	\$10,649	\$10,592	-0.5%
	Vascular Plugs	Venous embolization or occlusion	5193	37241	\$9,907	\$10,043	1.4%	\$4,183	\$4,285	2.4%
		Arterial embolization or occlusion	5193	37242	\$9,907	\$10,043	1.4%	\$6,096	\$6,366	4.4%
		Embolization or occlusion for tumors, organ ischemia, or infarction	5193	37243	\$9,907	\$10,043	1.4%	\$4,183	\$4,285	2.4%
Embolization or occlusion for arterial or venous hemorrhage or lymphatic extravasation		5193	37244	\$9,907	\$10,043	1.4%	NA	\$6,131	NA	

Sources:

1. Hospital Outpatient Prospective Payment-Final Rule with Comment CY2021: <https://www.cms.gov/medicare/medicare-fee-service-payment/hospitaloutpatientppshospital-outpatient-regulations-and-notices/cms-1736-fc>
2. Ambulatory Surgical Center Payment-Final Rule CY2021 Payment Rates: <https://edit.cms.gov/medicare/medicare-fee-service-payment/ascpayment/asc-regulations-and-notices/cms-1736-fc>
3. Hospital Outpatient Prospective Payment-Final Rule with Comment CY2020: <https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/ASCPayment/ASC-Regulations-and-Notices-Items/CMS-1717-FC>
4. Ambulatory Surgical Center Payment-Final Rule CY2020 Payment Rates: <https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/ASCPayment/ASC-Regulations-and-Notices-Items/CMS-1717-FC>

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