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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.
<table>
<thead>
<tr>
<th>Franchise</th>
<th>Therapy/Technology</th>
<th>Procedure/Scenario</th>
<th>Primary APC</th>
<th>CPT Code</th>
<th>2021^1 Payment</th>
<th>% Change</th>
<th>Hospital Outpatient (OPPS)</th>
<th>Ambulatory Surgery Center (ASC)</th>
<th>% Change</th>
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<td><strong>EP Ablation</strong></td>
<td>Catheter ablation, AV node</td>
<td>5212</td>
<td>93650</td>
<td>$5,885</td>
<td>3.3%</td>
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<td>NA</td>
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<td>EP study with catheter ablation, SVT</td>
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<td>EP study and catheter ablation, VT</td>
<td>5213</td>
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<td>EP study and catheter ablation, treatment of AF by PVI</td>
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<td>93656</td>
<td>$20,433</td>
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<td><strong>EP Studies</strong></td>
<td>Comprehensive EP study without induction</td>
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<td><strong>Implantable Cardiac Monitor (ICM)</strong></td>
<td><strong>Implantable Cardiac Monitor (ICM)</strong></td>
<td>ICM Implantation</td>
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<td>33285</td>
<td>$7,641</td>
<td>6.7%</td>
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<td>$7,046</td>
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<td></td>
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<td>ICM Removal</td>
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<td>$316</td>
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<td><strong>Cardiac Rhythm Management (CRM)</strong></td>
<td><strong>Pacemaker</strong></td>
<td>System Implant or Replacement - Single Chamber</td>
<td>5223</td>
<td>33206, 33207</td>
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<td>1.5%</td>
<td>$7,385</td>
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<td>$26,699</td>
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<td>Battery Replacement - Single Lead</td>
<td>5231</td>
<td>33262</td>
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<td>$19,502</td>
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<td>Battery Replacement - Dual Lead</td>
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<td>33263</td>
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<td>$19,777</td>
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<td><strong>Leads - Pacemaker, ICD, CRT</strong></td>
<td>Single lead, Pacemaker or ICD</td>
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<td>$5,469</td>
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<td><strong>Device Monitoring</strong></td>
<td>Programming and Remote Monitoring</td>
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<td><strong>CRT-P</strong></td>
<td>System Implant or Replacement</td>
<td>5224</td>
<td>33208, 33225</td>
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<td>$11,807</td>
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<td><strong>CRT-D</strong></td>
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<td>33249, 33225</td>
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<td>$26,699</td>
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<td>Battery Replacement</td>
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<td>Sensor Implant</td>
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<td><strong>CardioMEMS™</strong></td>
<td>Electronic Analysis of Devices</td>
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<td><strong>LVAD</strong></td>
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<td><strong>Coronary</strong></td>
<td><strong>PCI Drug Eluting Stents (including FFR/OCT)</strong></td>
<td>DES, with angioplasty; one vessel, with or without FFR and/or OCT</td>
<td>5193</td>
<td>C9600</td>
<td>$9,907</td>
<td>1.4%</td>
<td>$6,189</td>
<td>$6,276</td>
<td>1.4%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Two DES, with angioplasty; two vessels, with or without FFR and/or OCT.</td>
<td>5193</td>
<td>C9600</td>
<td>$9,907</td>
<td>1.4%</td>
<td>$6,189</td>
<td>$6,276</td>
<td>1.4%</td>
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<tr>
<td></td>
<td></td>
<td>Two DES, with angioplasty; one vessel, with or without FFR and/or OCT.</td>
<td>5193</td>
<td>C9600</td>
<td>$9,907</td>
<td>1.4%</td>
<td>$6,189</td>
<td>$6,276</td>
<td>1.4%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Two DES, with angioplasty; two major coronary arteries, with or without FFR and/or OCT. Complexity adjustment.</td>
<td>5194</td>
<td>C9600</td>
<td>$15,938</td>
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<td>$9,284</td>
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<td></td>
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<td>DES with angioplasty; each additional branch</td>
<td>NA</td>
<td>C9601</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
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<td></td>
<td><strong>BMS with Angioplasty</strong></td>
<td>BMS, with angioplasty; one vessel, with or without FFR and/or OCT</td>
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<td>92928</td>
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<td>$6,057</td>
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<td><strong>DES in bypass graft</strong></td>
<td>DES in bypass graft</td>
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<td>1.4%</td>
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<td>$6,276</td>
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<td><strong>DES and AMI</strong></td>
<td>DES and AMI</td>
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<td>C9606</td>
<td>$0</td>
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<td><strong>DES and CTO</strong></td>
<td>DES and CTO</td>
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NA: There is no established Medicare payment in this setting.
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<th>Therapy/Technology</th>
<th>Procedure/Scenario</th>
<th>Primary APC</th>
<th>CPT Code</th>
<th>2020(^{\text{a}}) Payment</th>
<th>2021(^{\text{a}}) Payment</th>
<th>% Change</th>
<th>2020(^{\text{b}}) Payment</th>
<th>2021(^{\text{b}}) Payment</th>
<th>% Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Structural Heart</td>
<td></td>
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<td>PFO Closure</td>
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<td>93580</td>
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<td>ASD</td>
<td>ASD/PFO closure</td>
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<td>93580</td>
<td>$15,938</td>
<td>$16,064</td>
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<td>Chronic Pain</td>
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<td>Spinal Cord</td>
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NA: There is no established Medicare payment in this setting.
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One St. Jude Medical Dr., St. Paul, MN 55117, USA, Tel: 1 651 756 2000

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