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HEALTH ECONOMICS & REIMBURSEMENT

ABBOTT CODING GUIDE

ELECTROPHYSIOLOGY

Effective October 1, 2021

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ELECTROPHYSIOLOGY

Effective October 1, 2021

INTRODUCTION

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The Electrophysiology Coding Guide is intended to provide reference material related to general guidelines for the reimbursement of the Electrophysiology procedures when used consistently with the products' labeling. This guide includes information regarding coverage, coding and payment.

REIMBURSEMENT HOTLINE

In addition, 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. This guide and all supporting documents are available at https://www.cardiovascular.abbott/us/en/hcp/reimbursement/ep.html. Coding and reimbursement assistance is provided subject to the disclaimers set forth in this guide.

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HEALTH ECONOMICS & REIMBURSEMENT

CODING AND REIMBURSEMENT FOR ELECTROPHYSIOLOGY

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Electrophysiology studies are invasive diagnostic intracardiac procedures performed to assess patients' cardiac arrhythmias.

Comprehensive Electrophysiology Evaluations include the following:

- Insertion and repositioning of electrode catheters
- Right atrial pacing and recording
- Right ventricular pacing and recording
- His Bundle recording
- Induction or attempted induction of arrhythmia (in most circumstances)

CPT [‡] CODE	DESCRIPTION Output Description		NATIONAL MEDICARE FACILITY RATE			
COMPREH	COMPREHENSIVE ELECTROPHYSIOLOGY STUDIES					
93619-26	Comprehensive electrophysiologic evaluation with right atrial pacing and recording, right ventricular pacing and recording, His bundle recording, including insertion and repositioning of multiple electrode catheters, without induction or attempted induction of arrhythmia	7.06	\$399			
93620-26	Comprehensive electrophysiologic evaluation including insertion and repositioning of multiple electrode catheters with induction or attempted induction of arrhythmia; with right atrial pacing and recording, right ventricular pacing and recording, His bundle recording	11.32	\$639			
93624-26	Electrophysiologic follow-up study with pacing and recording to test effectiveness of therapy, including induction or attempted induction of arrhythmia	4.55	\$244			
+93621-26	Comprehensive electrophysiologic evaluation including insertion and repositioning of multiple electrode catheters with induction or attempted induction of arrhythmia; with left atrial pacing and recording from coronary sinus or left atrium	2.10	\$119			
+93622-26	Comprehensive electrophysiologic evaluation including insertion and repositioning of multiple electrode catheters with induction or attempted induction of arrhythmia; with left ventricular pacing and recording	3.10	\$175			

(+) = Indicates add-on code. List add-on code separately in addition to code for primary procedure.

The -26 modifier may be applicable for a number of these codes.

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

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Electrophysiology Study (EP) component codes should be used when all elements in a comprehensive code are not performed and/or documented. (List below is not all inclusive.)

CPT [‡] CODE	DESCRIPTION Output Description Output Description Output Description Descr	WORK RVU	NATIONAL MEDICARE FACILITY RATE
INDIVIDUA	AL STUDIES*		
93600-26	Bundle of His recording	2.12	\$121
93602-26	Intra-atrial recording	2.12	\$119
93603-26	Right ventricular recording	2.12	\$119
93610-26	Intra-atrial pacing	3.02	\$167
93612-26	Intraventricular pacing	3.02	\$166
MAPPING	& ADD-ON PROCEDURES (List separately in addition to code for primary procedure.)		
+93609	Intraventricular and/or intra-atrial mapping of tachycardia site(s) with catheter manipulation to record from multiple sites to identify origin of tachycardia	4.99	\$283
+93613	Intracardiac electrophysiologic 3-dimensional mapping	5.23	\$303
+93623	Programmed stimulation and pacing after intravenous drug infusion	0.98	\$130

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^{(+) =} Indicates add-on code. List add-on code separately in addition to code for primary procedure.

The -26 modifier may be applicable for a number of these codes.

^{*} Component (e.g., individual study) codes cannot be billed in conjunction with comprehensive EP codes It is incumbent upon the physician to determine which, if any, modifiers should be used first.

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Catheter Ablation CPT[‡] codes include Comprehensive EP studies.

CPT [‡] CODE	DESCRIPTION Output Description Output Description Output Description Output Description Descriptio		NATIONAL MEDICARE FACILITY RATE
CATHET	ER ABLATION		
93650	Intracardiac catheter ablation of atrioventricular node function, atrioventricular conduction for creation of complete heart block, with or without temporary pacemaker placement	10.24	\$603
93653	Comprehensive electrophysiologic evaluation including insertion and repositioning of multiple electrode catheters with induction or attempted induction of an arrhythmia with right atrial pacing and recording, right ventricular pacing and recording (when necessary), and His bundle recording (when necessary) with intracardiac catheter ablation of arrhythmogenic focus; with treatment of supraventricular tachycardia by ablation of fast or slow atrioventricular pathway, accessory atrioventricular connection, cavo-tricuspid isthmus or other single atrial focus or source of atrial re-entry	14.75	\$853
93654	Comprehensive electrophysiologic evaluation including insertion and repositioning of multiple electrode catheters with induction or attempted induction of an arrhythmia with right atrial pacing and recording, right ventricular pacing and recording (when necessary), and His bundle recording (when necessary) with intracardiac catheter ablation of arrhythmogenic focus; with treatment of ventricular tachycardia or focus of ventricular ectopy including intracardiac electrophysiologic 3D mapping, when performed, and left ventricular pacing and recording, when performed	19.75	\$1,141
+93655*	Intracardiac catheter ablation of a discrete mechanism of arrhythmia which is distinct from the primary ablated mechanism, including repeat diagnostic maneuvers, to treat a spontaneous or induced arrhythmia	7.50	\$434
93656	Comprehensive electrophysiologic evaluation including transseptal catheterizations, insertion and repositioning of multiple electrode catheters with induction or attempted induction of an arrhythmia including left or right atrial pacing/recording when necessary, right ventricular pacing/recording when necessary, and His bundle recording when necessary with intracardiac catheter ablation of atrial fibrillation by pulmonary vein isolation	19.77	\$1,145
+93657*	Additional linear or focal intracardiac catheter ablation of the left or right atrium for treatment of atrial fibrillation remaining after completion of pulmonary vein isolation	7.50	\$434

^{(+) =} Indicates add-on code. List separately in addition to code for primary procedure.

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

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The -26 modifier may be applicable for a number of these codes.

^{* 93655} and 93657 have a medically unlikely edit (MUE) of 2 units. Ablation codes 93653, 93654, and 93656 do not require a modifier -52.

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CPT [‡] CODE	DESCRIPTION Output Description Output Description Output Description Descr	WORK RVU	NATIONAL MEDICARE FACILITY RATE				
INTRACAF	RDIAC ECHO / TRANSEPTAL ACCESS (ADD-ON SERVICES) List separately in addition to code for primary procedure.						
+93662	Intracardiac echocardiography during therapeutic/diagnostic intervention, including imaging supervision and interpretation	1.44	\$115				
+93462	Left heart catheterization by transseptal puncture through intact septum or by transapical puncture	3.73	\$215				
OTHER PR	OTHER PROCEDURES: ESOPHAGEAL RECORDING AND INDUCTION OF ARRHYTHMIA						
93615-26	Esophageal recording of atrial electrogram with or without ventricular electrogram(s);	0.74	\$38				
93616-26	Esophageal recording of atrial electrogram with or without ventricular electrogram(s); with pacing	1.24	\$60				
93618-26	Induction of arrhythmia by electrical pacing	4.00	\$224				

(+) = Indicates add-on code. List separately in addition to code for primary procedure.

The -26 modifier may be applicable for a number of these codes.

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

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ADD-ON CODES

The following add-on codes can be performed when medically appropriate with the following primary service/procedure code for separate payment. Add-on codes are not subject to the Physician Multiple Payment Reduction Rule. Procedure codes for electrophysiology often times are reported with add-on codes. Add-on codes (+) may not be reported as a stand-alone and must be billed when performed in conjunction with the primary service or procedure.

ADD-ON CODE	ADD-ON CODE CPT [‡] CODE DESCRIPTOR (List separately in addition to code for the primary procedure)	CAN BE REPORTED IN CONJUNCTION WITH PRIMARY PROCEDURE CODE
+93609	Intraventricular and/or intra-atrial mapping of tachycardia site(s) with catheter manipulation to record from multiple sites to identify origin of tachycardia	with 93620, 93653, or 93656
+93621	Comprehensive electrophysiologic evaluation including insertion and repositioning of multiple electrode catheters with induction or attempted induction of arrhythmia; with left atrial pacing and recording from coronary sinus or left atrium	with 93620, 93653, 93654
+93613	Intracardiac electrophysiologic 3-dimensional mapping	with 93620, 93653, 93656
+93622	Comprehensive electrophysiologic evaluation including insertion and repositioning of multiple electrode catheters with induction or attempted induction of arrhythmia; with left ventricular pacing and recording	with 93620, 93653, 93656
+93623	Programmed stimulation and pacing after intravenous drug infusion	with 93610, 93612, 93619, 93620, 93653, 93654, 93656
+93462	Left heart catheterization by transseptal puncture through intact septum or by transapical puncture	with 93653, 93654
+93655	Intracardiac catheter ablation of a discrete mechanism of arrhythmia which is distinct from the primary ablated mechanism, including repeat diagnostic maneuvers, to treat a spontaneous or induced arrhythmia	with 93653,93654, 93656
+93657	Additional linear or focal intracardiac catheter ablation of the left or right atrium for treatment of atrial fibrillation remaining after completion of pulmonary vein isolation	with 93656
+93662	Intracardiac echocardiography during therapeutic/diagnostic intervention, including imaging supervision and interpretation	with 93462, 93620-93622, 93653, 93654, 93656

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COMMON EP SCENARIOS

The scenarios presented are examples of commonly performed EP procedures. These representative examples are not meant to be an exhaustive list. Please verify with your coders.

SCENARIO 1: ATRIAL FLUTTER OR TACHYCARDIA ABLATION WITH 3-D MAPPING

Completed diagnostic EP study with induction of arrhythmia; atrial ablation, 3-D mapping.

CPT‡ CODE	SHORT DESCRIPTOR*
93653	Comprehensive electrophysiologic evaluation with atrial ablation, SVT
+93613	Intracardiac electrophysiologic 3D mapping

SCENARIO 2: ATRIAL TACHYCARDIA ABLATION WITH 3D MAPPING AND INTRACARDIAC ECHOCARDIOGRAPHY (ICE)

Completed diagnostic EP study with induction of arrhythmia; atrial ablation, 3D mapping, and ICE

CPT‡ CODE	SHORT DESCRIPTOR*
93653	Comprehensive electrophysiologic evaluation with atrial ablation, SVT
+93613	Intracardiac electrophysiologic 3D mapping
+93662	Intracardiac echocardiography (ICE)

SCENARIO 3: VENTRICULAR TACHYCARDIA ABLATION WITH 3D MAPPING AND ICE

Completed diagnostic EP study with induction of arrhythmia; ventricular ablation, 3D mapping, and ICE

CPT‡ CODE	SHORT DESCRIPTOR*
93654	Comprehensive electrophysiologic study (EPS) + 3D mapping with ventricular ablation
+93662	Intracardiac echocardiography (ICE)

^{*}Please refer to the physician coding for the complete CPT[‡] code description.

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COMMON EP SCENARIOS

SCENARIO 4: PULMONARY VEIN ISOLATION (PVI) ABLATION WITH 3D MAPPING WITH ABLATION OF ADDITIONAL TARGETS

Completed diagnostic EP study with induction of arrhythmia, left atrial pacing & recording; transseptal puncture; with left PVI ablation, 3D mapping and Ablation of additional targets for treatment of refractory and paroxysmal Afib

CPT‡ CODE	SHORT DESCRIPTOR*
93656	Comprehensive electrophysiologic study (EPS) with PVI for Afib includes transseptal access, left atrial pacing & recording
+93613	Intracardiac electrophysiologic 3D mapping
+93657	Ablate additional RT or LT atrial site for Afib

SCENARIO 5: PULMONARY VEIN ISOLATION (PVI) ABLATION WITH 3D MAPPING AND ICE

Completed diagnostic EP study with induction of arrhythmia, left atrial pacing & recording; transseptal puncture; with left PVI ablation, 3D mapping, and ICE

CPT‡ CODE	SHORT DESCRIPTOR*
93656	Comprehensive electrophysiologic study (EPS) with PVI for Afib includes transseptal access, left atrial pacing & recording
+93613	Intracardiac electrophysiologic 3D mapping
+93662	Intracardiac echocardiography (ICE)

(+) = Indicates add-on code. List separately in addition to code for primary procedure. *Please refer to the physician coding for the complete CPT[‡] code description.

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CODING AND REIMBURSEMENT FOR ELECTROPHYSIOLOGY

HOSPITAL OUTPATIENT²

CMS implemented the comprehensive ambulatory payment category (C-APC) policy with the goal of identifying high-cost, device-related services as the primary service on the claim. All other services reported on the same date will be considered "adjunctive, supportive, related or dependent services" provided to support the delivery of the primary service and will be packaged into the OPPS C-APC payment of the primary service with minor exceptions (e.g., C-APC complexity adjustments).

To recognize more costly, complex cases where multiple C-APC procedures are performed during the same surgical session, CMS finalized a new C-APC "complexity adjustment" policy. To qualify, claims with certain code combinations must meet specific thresholds for both Cost and Frequency. If these thresholds are met, the code combinations qualify for reassignment to the next highest C-APC in the clinical group and potentially higher payment. In EP studies, some code combinations may qualify for a C-APC clinical complexity adjustment.

CPT [‡] CODE	DESCRIPTION	STATUS INDICATOR	C-APC	APC DESCRIPTION	NATIONAL MEDICARE RATE
COMPRI	EHENSIVE ELECTROPHYSIOLOGY STUDIES				
93619	Comprehensive electrophysiologic evaluation with right atrial pacing and recording, right ventricular pacing and recording, His bundle recording, including insertion and repositioning of multiple electrode catheters, without induction or attempted induction of arrhythmia		5212	Level 2 EP Procedures	\$6,078
93620*	Comprehensive electrophysiologic evaluation including insertion and repositioning of multiple electrode catheters with induction or attempted induction of arrhythmia; with right atrial pacing and recording, right ventricular pacing and recording, His bundle recording				
93624	Electrophysiologic follow-up study with pacing and recording to test effectiveness of therapy, including induction or attempted induction of arrhythmia				
+93621	Comprehensive electrophysiologic evaluation including insertion and repositioning of multiple electrode catheters with induction or attempted induction of arrhythmia; with left atrial pacing and recording from coronary sinus or left atrium	N	Packaged Packaged	Packaged	Packaged
+93622	Comprehensive electrophysiologic evaluation including insertion and repositioning of multiple electrode catheters with induction or attempted induction of arrhythmia; with left ventricular pacing and recording				

*CPT[‡] code 93620 when combined with CPT[‡] code 93613 will qualify for a complexity adjusted APC assignment to C-APC 5213.

*CPT[‡] code 93620 when combined with CPT[‡] code 93650 will be assigned to a complexity adjusted APC assignment to C-APC 5213.

Please refer to Addendum J of the CY2021 Final OPPS Rule for the complete listing of complexity adjustment combinations

J1 = Hospital Part B services paid through a comprehensive APC

N = Items and services packaged into APC rates (+) = Indicates add-on codes. List separately in addition to code for primary procedure

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HOSPITAL OUTPATIENT²

CPT [‡] CODE	DESCRIPTION	STATUS INDICATOR	C-APC	APC DESCRIPTION	NATIONAL MEDICARE RATE			
INDIVIDU	INDIVIDUAL STUDIES							
93600	Bundle of His recording	– J1	5212	Level 2 EP	\$6,078			
93602	Intra-atrial recording			Procedures	φο,ογο			
93603	Right ventricular recording	J1	5211	Level 1 EP Procedures	\$1,113			
93610	Intra-atrial pacing	- J1	5212	Level 2 EP Procedures	\$6,078			
93612	Intraventricular pacing							
MAPPING	& ADD-ON PROCEDURES							
+93609	Intraventricular and/or intra-atrial mapping of tachycardia site(s) with catheter manipulation to record from multiple sites to identify origin of tachycardia							
+93613	Intracardiac electrophysiologic 3-dimensional mapping	N	Packaged	Packaged	Packaged			
+93623	Programmed stimulation and pacing after intravenous drug infusion							

J1 = Hospital Part B services paid through a comprehensive APC

N = Items and services packaged into APC rates

(+) = Indicates add-on code. List separately in addition to code for primary procedure.

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HOSPITAL OUTPATIENT²

CPT [‡] CODE	DESCRIPTION	STATUS INDICATOR	C-APC	APC DESCRIPTION	NATIONAL MEDICARE RATE
CATHETER ABLATION					
93650	Intracardiac catheter ablation of atrioventricular node function, atrioventricular conduction for creation of complete heart block, with or without temporary pacemaker placement	J1	5212	Level 2 EP Procedures	\$6,078
93653	Comprehensive electrophysiologic evaluation including insertion and repositioning of multiple electrode catheters with induction or attempted induction of an arrhythmia with right atrial pacing and recording, right ventricular pacing and recording (when necessary), and His bundle recording (when necessary) with intracardiac catheter ablation of arrhythmogenic focus; with treatment of supraventricular tachycardia by ablation of fast or slow atrioventricular pathway, accessory atrioventricular connection, cavo-tricuspid isthmus or other single atrial focus or source of atrial re-entry		F 010	Level 3 EP	
93654	Comprehensive electrophysiologic evaluation including insertion and repositioning of multiple electrode catheters with induction or attempted induction of an arrhythmia with right atrial pacing and recording, right ventricular pacing and recording (when necessary), and His bundle recording (when necessary) with intracardiac catheter ablation of arrhythmogenic focus; with treatment of ventricular tachycardia or focus of ventricular ectopy including intracardiac electrophysiologic 3D mapping, when performed, and left ventricular pacing and recording, when performed	- J1	5213	Procedures	\$21,464
+93655	Intracardiac catheter ablation of a discrete mechanism of arrhythmia which is distinct from the primary ablated mechanism, including repeat diagnostic maneuvers, to treat a spontaneous or induced arrhythmia	N	Packaged	Packaged	Packaged

J1 = Hospital Part B services paid through a comprehensive APC

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N = Items and services packaged into APC rates

^{(+) =} Indicates add-on code. List separately in addition to code for primary procedure.



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HOSPITAL OUTPATIENT²

CPT [‡] CODE	DESCRIPTION	STATUS	C-APC	APC DESCRIPTION	NATIONAL MEDICARE RATE	
CATHETE	CATHETER ABLATION					
93656	Comprehensive electrophysiologic evaluation including transseptal catheterizations, insertion and repositioning of multiple electrode catheters with induction or attempted induction of an arrhythmia including left or right atrial pacing/recording when necessary, right ventricular pacing/recording when necessary, and His bundle recording when necessary with intracardiac catheter ablation of atrial fibrillation by pulmonary vein isolation	J1	5213	Level 3 EP Procedures	\$21,464	
+93657	Additional linear or focal intracardiac catheter ablation of the left or right atrium for treatment of atrial fibrillation remaining after completion of pulmonary vein isolation	N	Packaged	Packaged	Packaged	
INTRACA	INTRACARDIAC ECHO / TRANSEPTAL ACCESS (ADD-ON SERVICES)					
+93462	Left heart catheterization by transseptal puncture through intact septum or by transapical puncture Intracardiac echocardiography during therapeutic/diagnostic intervention, including imaging supervision and interpretation	- N	Packaged	Packaged	Packaged	
ESOPHA	ESOPHAGEAL RECORDING AND INDUCTION OF ARRHYTHMIA					
93615	Esophageal recording of atrial electrogram with or without ventricular electrogram(s);					
93616	Esophageal recording of atrial electrogram with or without ventricular electrogram(s); with pacing	J1	5211	Level 1 EP Procedures	\$1,113	
93618	Induction of arrhythmia by electrical pacing					

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J1 = Hospital Part B services paid through a comprehensive APC

N = Items and services packaged into APC rates

^{+ =} Indicates add-on code. List separately in addition to code for primary procedure.



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HOSPITAL INPATIENT³

ICD-10 PCS CODE	DESCRIPTION	TYPICAL MS-DRG ASSIGNMENT	NATIONAL MEDICARE RATE
ELECTROPH	HYSIOLOGY		
4A023FZ	Measurement of cardiac rhythm, percutaneous approach		
4A0234Z	Measurement of cardiac electrical activity, percutaneous approach	273	#25 224
02K83ZZ	Map conduction mechanism, percutaneous approach	with MCC	\$25,234
02563ZZ	Destruction of right atrium, percutaneous approach	274	\$21,673
02573ZZ	Destruction of left atrium, percutaneous approach	without MCC	
02583ZZ	Destruction of conduction mechanism, percutaneous approach		
INTRACARDIAC ECHOCARDIOGRAPHY			
B244YZZ	Ultrasonography of right heart using other contrast		
B244ZZZ	Ultrasonography of right heart	- Does not	
B245YZZ	Ultrasonography of left heart using other contrast	impact	TAT A
B245ZZZ	Ultrasonography of left heart	MS-DRG	NA
B246YZZ	Ultrasonography of right and left heart using other contrast	assignment	
B246ZZZ	Ultrasonography of right and left heart		

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ELECTROPHYSIOLOGY HCPCS DEVICE CATEGORY C-CODES

C-CODE	DEVICE	MODEL		
CATHETER	CATHETER, ELECTROPHYSIOLOGY, DIAGNOSTIC, OTHER THAN 3D MAPPING (19 OR FEWER ELECTRODES)			
	Livewire™ Cannulator	401786, D402058		
	Reflexion™ Bi-Directional Decapolar	402800		
	Inquiry™ Bi-Directional Decapolar Catheter	81503, 81504, 81101, 81102, 81104, 81105, 81107, 81108, 81520, 81524, 81945, 81947		
	Inquiry™ 4 Fr. Fixed Catheters	IBI-80043, IBI-80063, IBI-80064, IBI-80130, IBI- 80131, IBI-80132, IBI-80133, IBI-80134, IBI-80135, IBI-80137, IBI-80138, IBI-80409, IBI-80412, IBI- 80413, IBI-80440, IBI-8045, IBI-80464, IBI-80465, IBI-80466, IBI-80467, IBI-80468, IBI-80469, IBI- 80485, IBI-80515, IBI-80535, IBI-80536, IBI-80567, IBI-80571, IBI-80804, IBI-81531, IBI-81532, IBI-81534, IBI-81537, IBI-81587, IBI-81594, IBI-81595		
	Inquiry™ 5 Fr. Fixed Catheters	80051, 80052, 80053, 80054, 80055, IBI-80063, IBI- 80064, 80065, 80451, IBI-80452, 80453, 80454, 80455, 80456, 80458, 80459, 80463, 80556, 80559		
C1730	Inquiry™ 6 Fr. Fixed Catheters	80001, 80002, 80003, 80008, 80010, 80017, 80116, 80404, 80405, 80406, 80407, 80408, IBI-80409, 80410, 80411, IBI-80412, IBI-80413, 80414, 80415, 80501, 80508, 80601, 80602, 80603, 80604, 80606, 80630, 80801, 80802, 80803, IBI-80804, 80805, 80806, 80810		
C1750	Livewire TM	401938, 401939, 401940, 401941, 401990, 401991, 401600, 401603, 401572, 401606, 401933, 401934, 401917, 401949, 401575, 401915, 401923, 401926, 401576, 401577, 401578, 401579, 401583, 401584, 401585, 401586, 401587, 401588, 401580, 401581, 401582, 401653, 401654, 401652, 401782, 401783, 401784, 401785, 401915, 401934, 401935		
	Response™	401206, 401207, 401221, 401222, 401223, 401224, 401328, 401359, 401360, 401362, 401366, 401317, 401318, 401374, 401375, 401376, 401209, 401210, 401354, 401211, 401355, 401212, 401325, 401225, 401226, 401356, 401227, 401357, 401228, 401329, 401259, 401260, 401261, 401262, 401154, 401155, 401156, 401158, 401397, 401271, 401272, 401273, 401274, 401275, 401276, 401277, 401278, 401279, 401281, 401282, 401283, 401284, 401285, 401287, 401288, 401290, 401291, 401293, 401294, 401296, 401297, 401298, 401299, 401300, 401301, 401305, 401306, 401307, 401308, 401309, 401310, 401311, 401312, 401313, 401379, 401385, 401386,401387, 401380, 401388, 401389, 401390, 401381, 401353, 401392, 401393, 401399, 401400, 401132, 401130, 401133,401137, 401134, 401135, 401138, 401136		

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ELECTROPHYSIOLOGY HCPCS DEVICE CATEGORY C-CODES

C-CODE	DEVICE	MODEL			
CATHETER	CATHETER, ELECTROPHYSIOLOGY, DIAGNOSTIC, OTHER THAN 3D MAPPING (19 OR FEWER ELECTRODES)				
	Inquiry™ Soft Tip Fixed Catheters	80139, 80470, 80473, 80476, 80478, 80479, 80484, 80516, 80517, 80518, 80519, 80520, 80533, 80534, 80537, 80544, 80627			
	Inquiry TM 4 Fr. Steerable Catheters	81540, 81541, 81542, 81545, 81530, IBI-81531, IBI-81532, IBI-81534, 81535, 81536, IBI-81537, 81543			
	Inquiry™ 5 Fr. Steerable Catheters	81171, 81172, 81174, 81176, 81177, 81178,81179, 81223, 81224, 81229, 81471, 81472, 81473, 81474, 81475, 81478, 81479, 81871, 81872, 81873, 81874, 81877, 81879, 81886, 81890			
C1730	Supreme™	401957, 401433, 401435, 401441, 401443, 401444, 401466, 401448, 401450, 401468, 40187, 401859, 401995, 401954, 401872, 401878, 401863, 401864, 401865, 401956, 401434, 401434, 401438, 401440, 401442, 401474, 401430, 401475, 401445, 401449, 401451, 401453, 401951, 401952, 401953, 401873, 401876, 401877, 401874, 401879, 401887, 401888, 401889, 401890, 401891, 401892, 401893, 401894, 401896, 401897, 401898, 401966, 401967, 401978,401979, 401993, 401994, 401995, 401996, 401998, 401999,402004, 402008, 402040010, 402011, 402012, 402013,401955, 401860			
C1750	Inquiry™ 6 Fr. Steerable Catheters	81101, 81102, 81104, 81105, 81106, 81107, 81108, 81109, 81231, 81401, 81402, 81403, 81404, 81405, 81406, 81407, 81412, 81414, 81415, 81416, 81417, 81418, 81420, 81462, 81511, 81516, 81520, 81524, 81601, 81602, 81603, 81604, 81605, 81801, 81802, 81803, 81807, 81809, 81810, 81813			
	Inquiry™ Soft Tip Steerable Catheters	81203, 81483, 81521, 81703, 81704, 81705, 81706, 81721, 81730, 81731, 81732, 81733, 81734, 81735, 81736, 81737, 81738, 81742, 81743, 81745, 81747, 81750, 81751, 81757, 81758, 81823, 81943, 81945, 81946, 81947, 81951, 81954, 81956, 81958, 81516			
	Inquiry™ HIS Fixed and Steerable	IBI-80440, IBI-80515, 80567, 80820, 80847, 81169, 81483, 81484, 81485, 81711			
	Inquiry™ Luma Catheter, Fixed and Steerable	80901, 80902, 81910, 81911, 81912, 81913, 81914, 81915, 81917, 81918, 81920, 81921, 81922, 81937, 81938, 81939, 81960, 81961			
	Inquiry TM AFocus TM	81591, IBI-81594, IBI-81595, 81596, 81670, 81671, 81672, 81673, 81674, 81676, 81680, 81589, 81597, 81599			
	Inquiry TM Optima TM	81687, 81767			

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ELECTROPHYSIOLOGY HCPCS DEVICE CATEGORY C-CODES

C-CODE	DEVICE	MODEL	
CATHETER	CATHETER, ELECTROPHYSIOLOGY, DIAGNOSTIC, OTHER THAN 3D MAPPING (19 OR FEWER ELECTRODES) CONT'D		
	Advisor™ FL Sensor Enabled™ Uni-Directional Circular Mapping Catheter, 15mm Curve	D-AVSE-D10-F15	
C1730	Advisor™ FL Sensor Enabled™ Uni-Directional Circular Mapping Catheter, 20mm Curve D	D-AVSE-D10-F20	
C1/30	Advisor™ FL Sensor Enabled™ Bi-Directional Circular Mapping Catheter, 15mm Curve DF	D-AVSE-DF10-F15	
	Advisor™ FL Sensor Enabled™ Bi-Directional Circular Mapping Catheter, 20mm Curve DF	D-AVSE-DF10-F20	
	Advisor™ HD Grid Mapping Catheter, Sensor Enabled™ Bi-D High Density Mapping Catheter.	D-AVHD-DF16	
CATHETER	R, ELECTROPHYSIOLOGY, DIAGNOSTIC, OTHER THAN	3D MAPPING (20 OR MORE ELECTRODES)	
	Reflexion™ Spiral Variable Radius Mapping Catheter	402804, D402893, D402865	
	Reflexion™ HD Mapping Catheter	D402864	
	Inquiry™ H Curve Catheters	81120, 81124, 81128, 81130, 81131, 81134, 81136, 81150, 81121	
	Inquiry TM AFocus TM	IBI-81587, 81598, 87008, D087022, D087023, D087024	
C1731	Inquiry Optima™	81659, 81683, 87015, 81664	
	Inquiry Optima TM PLUS	81717	
	Inquiry TM Ten Ten TM	81202, 81207, 81209, 81901	
	EnSite TM Array TM Catheter	EC1000	
	Livewire™ Steerable, Duo-Decapolar	401904, 401905, 401914, 401908, 401918, 401932	
	Inquiry™ H-Curve Catheters	81125, 81110, 81112, 81126, 81129, 81142	

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ELECTROPHYSIOLOGY HCPCS DEVICE CATEGORY C-CODES

C-CODE	DEVICE	MODEL			
CATHETER	CATHETER, ELECTROPHYSIOLOGY, DIAGNOSTIC/ABLATION, OTHER THAN 3-D OR VECTOR MAPPING, OTHER THAN COOL TIP				
	Livewire TM TC	402153, 402154, 402155, 402156, 402149, 402150, 402151, 402152, 402205, 402206, 402207, 402208, 402271, 402273, 402274			
C1500	Safire™, Safire™ TX	402806, 402807, 402808, 402809, 402810, 402811, 402812, 402813, 402814, 402815, 402816, 402817, 402838, 402839, 402840, 402841, 402842, 402843			
C1733	Therapy™ Dual-8™	83370, 83371, 83372, 83373, 83374, 83375			
	Therapy™ 8 mm Tip	83441, 83442, 83444, 83445, 83446			
	Therapy™ Bi-Directional 4 mm Tip	83719, 83720, 83721			
	Therapy™ 4 mm Tip	83364, 83365, 83366, 83367, 83368, 83369, 83724, 83725, 83726, 83727			
CATHETER	R, ELECTROPHYSIOLOGY, DIAGNOSTIC/ABLATION, OT	HER THAN 3-D OR VECTOR MAPPING, COOL TIP			
C2630	Safire™ Duo Ablation Catheter MediGuide Enabled™ Irrigated 4 mm Tip Thermocouple Quadripolar	A700237 1304-CP2S-8-25-MS-BD-ME 7 F 2-5-2 4 Medium Sweep 110 A700238 1304-CP2S-8-25-MC-BD-ME 7 F 2-5-2 4 Medium Curl 110 A700239 1304-CP2S-8-25-LS-BD-ME 7 F 2-5-2 4 Large Sweep 110 A700240			
	Cool Path™ Duo Ablation Catheter MediGuide Enabled™ Irrigated 4 mm Tip Thermocouple Quadripolar 7 F	A700241 1304-CP2-8-25-MS-BD-ME 7 F 2-5-2 4 Medium Sweep 110 A700242 1304-CP2-8-25-MC-BD-ME 7 F 2-5-2 4 Medium Curl 110 A700243 1304-CP2-8-25-LS-BD-ME 7 F 2-5-2 4 Large Sweep 110 A700244			
	FlexAbility TM	A701124, A701125, A701127, A701128, A701129, A701157, A701158, A701159			
	FlexAbility Sensor Enabled™ Bi-Directional Irrigated Ablation Catheter, DD Curve	A-FASE-DD			

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ELECTROPHYSIOLOGY HCPCS DEVICE CATEGORY C-CODES

C-CODE	DEVICE	MODEL		
CATHETER	CATHETER, ELECTROPHYSIOLOGY, DIAGNOSTIC/ABLATION, OTHER THAN 3-D OR VECTOR MAPPING, COOL TIP CONT'D			
	FlexAbility Sensor Enabled™ Bi-Directional Irrigated Ablation Catheter, DF Curve	A-FASE-DF		
	FlexAbility Sensor Enabled™ Bi-Directional Irrigated Ablation Catheter, FF Curve	A-FASE-FF		
	FlexAbility Sensor Enabled™ Bi-Directional Irrigated Ablation Catheter, FJ Curve	A-FASE-FJ		
	FlexAbility Sensor Enabled™ Bi-Directional Irrigated Ablation Catheter, JJ Curve	A-FASE-JJ		
	FlexAbility Sensor Enabled™ Uni-Directional Irrigated Ablation Catheter, D Curve	A-FASE-D		
C2630	FlexAbility Sensor Enabled™ Uni-Directional Irrigated Ablation Catheter, F Curve	A-FASE-F		
	FlexAbility Sensor Enabled™ Uni-Directional Irrigated Ablation Catheter, J Curve	A-FASE-J		
	Safire TM BLU TM	A402869, A402871, A402870, A402872		
	Safire™ BLU™ Duo	A088106, A088108, A088107, A088109		
	TactiCath™ Quartz	PN-004 075, PN-004 065		
	TactiCath™ SE	A-TCSE-DD, A-TCSE-DF, A-TCSE-FF, A-TCSE-FJ, A-TCSE-JJ, A-TCSE-D, A-TCSE-F, A-TCSE-J		
	Therapy™ Cool Path™	A088046, A088047, A088048, A088049, 83326, 83327, 83328, 83329, 84308, 84309, 84310, 84311, 84312		
CATHETER, INTRACARDIAC ECHOCARDIOGRAPHY				
C1759	ViewFlex™ XTRA	D087031		
	ViewFlex™ PLUS	100043720		

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CODING AND REIMBURSEMENT FOR ELECTROPHYSIOLOGY

ICD-10-CM DIAGNOSIS CODES⁵

Diagnosis codes are used by both hospitals and physicians to document the medical necessity and clinical rationale for the procedure. For Electrophysiology patients, there are many possible diagnosis code scenarios and a wide variety of possible combinations. This list is not exhaustive of all the diagnosis codes supporting EP procedures and is meant to serve as an example for your review. 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.

ICM-10-CM	DESCRIPTION		
CARDIAC DY	CARDIAC DYSRHYTHMIAS		
I47.0	Re-entry ventricular arrhythmia		
I47.1	Supraventricular tachycardia (AVNRT, atrial, AV, junctional, nodal)		
I47.2	Ventricular tachycardia		
I47.9	Paroxysmal tachycardia, unspecified (Bouveret [-Hoffman] syndrome)		
I48.0	Paroxysmal atrial fibrillation		
I48.11	Longstanding persistent atrial fibrillation		
I48.19	Other persistent atrial fibrillation		
I48.20	Chronic atrial fibrillation, unspecified		
I48.21	Permanent atrial fibrillation		
I48.3	Typical atrial flutter (Type I atrial flutter)		
I48.4	Atypical atrial flutter (Type II atrial flutter)		
I48.91	Unspecified atrial fibrillation		
I48.92	Unspecified atrial flutter		
I49.01	Ventricular fibrillation		

Effective Dates: January 1, 2021 - December 31, 2021

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CODING AND REIMBURSEMENT FOR ELECTROPHYSIOLOGY

ICD-10-CM DIAGNOSIS CODES⁵ CONTINUED

ICM-10-CM	DESCRIPTION		
CARDIAC DY	CARDIAC DYSRHYTHMIAS		
I49.02	Ventricular flutter		
I49.1	Atrial premature depolarization (atrial premature beats)		
I49.2	Junctional premature depolarization		
I49.3	Ventricular premature depolarization		
I49.40	Unspecified premature depolarization (premature beats NOS)		
I49.49	Other premature depolarization (ectopic, extrasystole)		
I49.5	Sick sinus syndrome (tachycardia-bradycardia syndrome)		
I49.8	Other specified cardiac arrhythmias (Brugada syndrome, coronary sinus rhythm disorder)		
I49.9	Cardiac arrhythmia, unspecified		
ABNORMALI'	TIES OF HEART BEAT (SYMPTOMS)		
R00.0	Tachycardia, unspecified (sinoauricular tachycardia NOS, sinus tachycardia NOS)		
R00.1	Bradycardia, unspecified (sinus bradycardia, vagal bradycardia)		
R00.2	Palpitations		
R00.8	Other abnormalities of heart beat		
R00.9	Unspecified abnormalities of heart beat		

Effective Dates: January 1, 2021 - December 31, 2021

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References

- 1. Physician Prospective Payment-Final rule with Comment Period and Final CY2021 Payment Rates. CMS-1734-F: https://www.cms.gov/medicaremedicare-fee-service-paymentphysicianfeeschedpfs-federal-regulation-notices/cms-1734-f
- 2. Hospital Outpatient Prospective Payment-CY2021 Notice of Final Rulemaking with Comment Period (NFRM). CMS-1736-FC: https://www.cms.gov/medicaremedicare-fee-service-paymenthospitaloutpatient ppshospital-outpatient-regulations-and-notices/cms-1736-fc
- 3. Hospital Inpatient Prospective Payment-FY 2022 Final Home Page CMS-1752-F: https://www.cms.gov/medicare/acute-inpatient-pps/fy-2022-ipps-final-rule-home-page
- 4. CMS, 2020 Alpha-Numeric Index HCPCS code set: https://www.cms.gov/Medicare/Coding/HCPCSReleaseCodeSets/Alpha-Numeric-HCPCS
- 5. CMS 2022 ICD-10-CM: https://www.cms.gov/medicare/icd-10/2022-icd-10-cm
- 6. Abbott Product List: https://www.abbott.com/product-list.html

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