



2022 MEDICARE

Inpatient Reimbursement Prospectus

Due to increasing financial risk to U.S. health care providers, physicians and hospitals have been centered on outcomes-based modifiers to Medicare payments for the last few years. We appreciate the role that Abbott procedures play in Medicare’s reform programs and we believe that opportunities for success in a new era of reform continue to present themselves, such as treatment optimization, improving outcomes and avoiding downstream complications. Abbott believes that opportunities also exist from clinical to economic perspectives to impact patient care and hospital performance. We continue our mission to create relevant technology that improves meaningful patient outcomes, now made even more meaningful considering expanded financial risks posed to U.S. hospitals.

On November 30, 2021, the Centers for Medicare & Medicaid Services (CMS) released the FY 2022 Inpatient Prospective Payment System (IPPS), effective for inpatient services on October 1, 2021. Abbott has analyzed and summarized the varying impact to individual FY 2022 Medicare Severity-Diagnosis Related Group (MS-DRG) payments for procedures supported by our technologies or therapy solutions. Please refer to the full FY 2022 IPPS Correction Notice to fully understand the changes to individual MS-DRGs.

Medicare IPPS Comparison Chart: FY 2021 vs. FY 2022

Technology	MS-DRG	Description	Severity	FY-2021 Correction Notice		FY-2022 Correction Notice		% Change (\$)	Change (Discharges)
				Payment	Discharges	Payment	Discharges		
Surgical Valves	216	Cardiac valve & other major cardiothoracic procedures with cardiac catheterization	MCC	\$67,040	5,603	\$66,202	7,517	-1.3%	1,914
	217		CC	\$41,733	1,885	\$42,754	2,610	2.4%	725
	218		None	\$33,058	210	\$40,286	479	21.9%	269
	219	Cardiac valve & other major cardiothoracic procedures without cardiac catheterization	MCC	\$51,774	15,599	\$53,134	15,810	2.6%	211
	220		CC	\$34,708	15,078	\$35,644	15,227	2.7%	149
	221		None	\$29,260	2,419	\$30,201	2,486	3.2%	67
Congenital Defects-Ventricular Septal	228	Other cardiothoracic procedures	MCC	\$39,949	4,437	\$35,149	2,747	-12.0%	-1,690
	229		CC-16, None-17	\$25,633	5,252	\$22,692	3,515	-11.5%	-1,737
TEER and TAVR	266	Endovascular Cardiac Valve Replacement & Supplement Procedure	MCC	\$45,617	20,765	\$46,476	20,611	1.9%	-154
	267		None	\$36,000	29,799	\$36,915	29,708	2.5%	-91
Atrial Septal, PDA, PFO Closure and LAAC	273	Percutaneous intracardiac procedures	MCC	\$24,664	7,557	\$25,234	7,699	2.3%	142
	274		None	\$21,117	26,618	\$21,673	26,476	2.6%	-142

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Technology	MS-DRG	Description	Severity	FY-2021 Correction Notice		FY-2022 Correction Notice		% Change (\$)	Change (Discharges)
				Payment	Discharges	Payment	Discharges		
Carotid	034	Carotid artery stent procedure	MCC	\$25,547	1,372	\$26,233	1,372	2.7%	0
	035		CC	\$15,022	3,672	\$15,429	3,672	2.7%	0
	036		None	\$11,899	5,167	\$12,215	5,166	2.7%	-1
CABG	231	Coronary bypass with PTCA	MCC	\$54,571	974	\$57,475	1,060	5.3%	86
	232		None	\$37,911	701	\$39,261	720	3.6%	19
	233	Coronary bypass with cardiac catheterization	MCC	\$50,088	12,154	\$52,242	13,684	4.3%	1,530
	234		None	\$34,178	13,951	\$35,187	15,313	3.0%	1,362
	235	Coronary bypass without cardiac catheterization	MCC	\$38,759	11,499	\$40,252	11,858	3.9%	359
	236		None	\$26,229	19,732	\$27,017	20,092	3.0%	360
Coronary (PCI)	246	Percutaneous cardiovascular procedures with DES or 4+ stents	MCC	\$20,090	51,008	\$20,602	52,462	2.5%	1,454
	247	Percutaneous cardiovascular procedure with DES	None	\$12,779	86,480	\$13,012	85,022	1.8%	-1,458
	248	Percutaneous cardiovascular procedures with BMS or 4+ stents	MCC	\$20,400	2,416	\$20,852	2,461	2.2%	45
	249	Percutaneous cardiovascular procedures with BMS	None	\$12,079	3,090	\$12,356	3,045	2.3%	-45
	250	Perc cardiovascular proc w/o coronary artery stent	MCC	\$16,215	4,435	\$16,629	4,472	2.6%	37
	251		None	\$10,668	5,172	\$10,936	5,135	2.5%	-37
Endovascular and Dialysis Circuit Mechanical Thrombectomy	252	Other vascular procedures	MCC	\$21,344	33,330	\$21,930	33,470	2.7%	140
	253		CC	\$17,057	23,996	\$17,498	23,997	2.6%	1
	254		None	\$11,631	10,545	\$11,974	10,599	2.9%	54
Arterial & Venous Mechanical Thrombectomy and Vascular Plugs	270	Other major cardiovascular services	MCC	\$33,305	18,960	\$34,204	19,004	2.7%	44
	271		CC	\$22,912	14,541	\$23,511	14,511	2.6%	-30
	272		None	\$17,282	5,320	\$17,727	5,320	2.6%	0
Thrombolysis	299	Peripheral vascular disorders	MCC	\$9,843	19,593	\$10,106	19,588	2.7%	-5
	300		CC	\$6,699	28,615	\$6,883	28,614	2.7%	-1
	301		None	\$4,772	7,636	\$4,900	7,630	2.7%	-6
ICD Systems and CRT-D	222	Cardiac defibrillator implant with cardiac catheterization with AMI/HF/shock	MCC	\$54,127	1,867	\$52,431	2,081	-3.1%	214
	223		None	\$39,928	484	\$38,237	404	-4.2%	-80
	224	Cardiac defibrillator implant with cardiac catheterization without AMI/HF/shock	MCC	\$47,321	2,335	\$49,583	2,119	4.8%	-216
	225		None	\$36,166	1,634	\$37,045	1,629	2.4%	-5
	226	Cardiac defibrillator implant without cardiac catheterization	MCC	\$42,497	4,869	\$43,291	5,317	1.9%	448
	227		None	\$33,757	4,622	\$34,370	4,202	1.8%	-420
Leadless Pacemaker	228	Other cardiothoracic procedures	MCC	\$39,949	4,437	\$35,149	2,747	-12.0%	-1,690
	229		None	\$25,633	5,252	\$22,692	3,515	-11.5%	-1,737
Pacemaker Systems; CRT-P	242	Permanent cardiac pacemaker implant	MCC	\$23,926	18,961	\$24,581	19,301	2.7%	340
	243		CC	\$16,278	25,229	\$16,608	24,932	2.0%	-297
	244		None	\$13,277	14,510	\$13,606	14,466	2.5%	-44

Medicare IPPS Comparison Chart: FY 2021 vs. FY 2022

Technology	MS-DRG	Description	Severity	FY-2021 Correction Notice		FY-2022 Correction Notice		% Change (\$)	Change (Discharges)
				Payment	Discharges	Payment	Discharges		
ICDs	245	AICD generator procedures	NA	\$34,799	1,889	\$35,726	1,889	2.7%	0
	265	AICD lead procedures	NA	\$21,614	580	\$22,193	580	2.7%	0
Pacemaker Generator Replacement	258	Cardiac pacemaker device replacement	MCC	\$20,576	547	\$20,891	592	1.5%	45
	259		None	\$13,628	902	\$13,777	857	1.1%	-45
Pacemaker Revision and ICMs Implant	260	Cardiac pacemaker revision except device replacement	MCC	\$23,038	2,668	\$23,524	2,707	2.1%	39
	261		CC	\$12,799	3,653	\$13,148	3,619	2.7%	-34
	262		None	\$10,979	1,359	\$11,251	1,354	2.5%	-5
Acute Myocardial Infarction (AMI)	280	Acute myocardial infarction, discharged alive	MCC	\$10,452	91,216	\$10,596	94,141	1.4%	2,925
	281		CC	\$5,991	48,347	\$6,137	46,135	2.4%	-2,212
	282		None	\$4,663	20,562	\$4,788	19,808	2.7%	-754
	283	Acute myocardial infarction, expired	MCC	\$11,985	10,281	\$12,296	10,318	2.6%	37
	284		CC	\$4,719	1,086	\$4,770	1,053	1.1%	-33
	285		None	\$3,191	273	\$3,262	266	2.2%	-7
Conduction Disorders	308	Cardiac arrhythmia and conduction disorders	MCC	\$7,709	69,826	\$7,919	69,819	2.7%	-7
	309		CC	\$4,817	86,595	\$4,949	86,579	2.7%	-16
	310		None	\$3,589	55,723	\$3,687	55,709	2.7%	-14
Catheter Ablations	273	Percutaneous intracardiac procedures	MCC	\$24,664	7,557	\$25,234	7,699	2.3%	142
	274		None	\$21,117	26,618	\$21,673	26,476	2.6%	-142
Left Ventricular Assist Device (LVAD)	001	Heart Transplant or Implant of Heart Assist System	MCC	\$186,174	2,213	\$190,661	2,236	2.4%	23
	002		None	\$102,397	145	\$98,716	122	-3.6%	-23
Acute Mechanical Circulatory System (MCS)	003	ECMO or Tracheostomy with MV >96 Hours or PDX Except Face, Mouth and Neck with major O.R. procedure	NA	\$122,066	14,534	\$125,986	14,274	3.2%	-260
	215	Other heart assist systems implant	NA	\$71,718	7,744	\$69,625	4,409	-2.9%	-3,335
	216	Cardiac valve and other major cardiothoracic procedures with cardiac catheterization with MCC	NA	\$67,040	5,603	\$66,202	7,517	-1.3%	1,914
	217	Cardiac valve and other major cardiothoracic procedures with cardiac catheterization with CC	NA	\$41,733	1,885	\$42,754	2,610	2.4%	725
	218	Cardiac valve and other major cardiothoracic procedures with cardiac catheterization without CC/MCC	NA	\$33,058	210	\$40,286	479	21.9%	269
	219	Cardiac valve and other major cardiothoracic procedures without cardiac catheterization with MCC	NA	\$51,774	15,599	\$53,134	15,810	2.6%	211
	220	Cardiac valve and other major cardiothoracic procedures without cardiac catheterization with CC	NA	\$34,708	15,078	\$35,644	15,227	2.7%	149
	221	Cardiac valve and other major cardiothoracic procedures without cardiac catheterization without CC/MCC	NA	\$29,260	2,419	\$30,201	2,486	3.2%	67
PA Pressure Monitor	264	Other circulatory system operating room procedures	NA	\$20,875	10,418	\$21,455	10,415	2.8%	-3

Medicare IPPS Comparison Chart: FY 2021 vs. FY 2022

Technology	MS-DRG	Description	Severity	FY-2021 Correction Notice		FY-2022 Correction Notice		% Change (\$)	Change (Discharges)
				Payment	Discharges	Payment	Discharges		
Deep Brain Stimulation (DBS)	023	System implant, multi-array, rechargeable or non-rechargeable, plus leads	MCC	\$36,395	12,867	\$37,402	12,870	2.8%	3
	024		None	\$25,276	4,624	\$25,975	4,624	2.8%	0
	025	Lead placement only, or lead revision OR System implant, single array generator plus leads	MCC	\$28,870	21,986	\$29,657	21,973	2.7%	-13
	026		CC	\$19,655	9,547	\$20,192	9,535	2.7%	-12
	027		None	\$16,145	10,506	\$16,580	10,477	2.7%	-29
	040	Generator only implant or replacement, single/multi array non-rechargeable or multi-array rechargeable	MCC	\$25,439	3,883	\$25,485	3,780	0.2%	-103
	041		CC	\$15,112	6,427	\$15,494	6,399	2.5%	-28
	042		None	\$12,115	2,414	\$12,537	2,442	3.5%	28
Spinal Cord Stimulation (SCS) for Pain	028	Whole System implantation or replacement(generator plus leads)	MCC	\$37,408	2,247	\$38,399	2,247	2.6%	0
	029	Spinal procedures or spinal neurostimulators	CC	\$21,179	3,865	\$21,740	3,865	2.6%	0
	030	Spinal Procedures without CC/MCC	None	\$15,150	1,432	\$15,541	1,432	2.6%	0
	040	Peripheral/Cranial Nerve and Other Nervous System Procedures Generator implantation only or replacement (any type)	MCC	\$25,439	3,883	\$25,485	3,780	0.2%	-103
	041		CC	\$15,112	6,427	\$15,494	6,399	2.5%	-28
	042		None	\$12,115	2,414	\$12,537	2,442	3.5%	28
	518	Back & neck procedures excluding spinal fusion, or disc device/ neurostimulator	MCC	\$23,038	2,684	\$23,653	2,684	2.7%	0
	519	Back and neck procedure except spinal fusion with CC	CC	\$12,583	8,454	\$12,925	8,454	2.7%	0
	520	Back and neck procedure except spinal fusion without CC/MCC	None	\$9,110	6,513	\$9,353	6,513	2.7%	0
	981	Extensive OR procedure unrelated to principal Dx	MCC	\$29,617	26,453	\$30,429	26,389	2.7%	-64
	982		CC	\$16,334	13,857	\$16,727	13,717	2.4%	-140
	983		None	\$10,636	2,652	\$10,896	2,652	2.4%	0
Major Chest	163	Major chest procedures	MCC	\$31,888	10,852	\$33,016	11,069	3.5%	217
	164		CC	\$16,964	15,747	\$17,512	15,841	3.2%	94
	165		None	\$12,300	8,148	\$12,639	8,164	2.8%	16
Aortic Heart Assist	268	Aortic and heart assist procedures except pulsation balloon	MCC	\$44,701	3,661	\$45,918	3,672	2.7%	11
	269		None	\$27,732	16,306	\$28,455	16,310	2.6%	4
Aortic Heart Assist	286	Circulatory disorders except AMI, with card cath	MCC	\$14,231	44,705	\$14,087	50,172	-1.0%	5,467
	287		None	\$7,392	57,260	\$7,353	51,797	-0.5%	-5,463
Heart Failure	291	Heart failure & shock	MCC	\$8,619	394,461	\$8,363	466,339	-3.0%	71,878
	292		CC	\$5,753	84,830	\$5,694	28,940	-1.0%	-55,890
	293		None	\$4,195	21,889	\$3,890	5,791	-7.3%	-16,098
Peripheral Vascular	299	Peripheral vascular disorders	MCC	\$9,843	19,593	\$10,106	19,588	2.7%	-5
	300		CC	\$6,699	28,615	\$6,883	28,614	2.7%	-1
	301		None	\$4,772	7,636	\$4,900	7,630	2.7%	-6
Vascular: Other Kidney and Urinary Tract	673	Other kidney & urinary tract procedures	MCC	\$22,259	15,762	\$22,871	15,768	2.7%	6
	674		CC	\$15,300	7,325	\$15,715	7,334	2.7%	9
	675		None	\$11,261	474	\$11,571	474	2.8%	0

MEDICARE PAYMENT RISK CONTINUES

As planned, Medicare will continue the scope and level of potential penalties of its payment reform initiatives, including the Hospital Readmissions Reduction Program and the Value-Based Purchasing Program. Risk to inpatient MS-DRG payments will continue at 3% and 2% respectively. The FY 2013 through FY 2022 makeup and impact of these two payment reform programs are illustrated in the charts on the next page. As payment reforms continue to impact healthcare management and as Medicare changes the way in which health care providers are paid, Abbott will continue to explore programs that seek to improve meaningful patient outcomes through shared risk.

For more information on how Medicare’s rulemaking or reform initiatives may impact your facility or institution, please contact Abbott’s Reimbursement team at 855-569-6430 or at AbbottEconomics@abbott.com.



