

HEALTH ECONOMICS & REIMBURSEMENT

2023 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 2023 (CY2023) 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 November 2, 2022, CMS released the CY2023 Hospital Outpatient Prospective Payment System (OPPS)/Ambulatory Surgical Center (ASC) Final Rule, effective for services on January 1, 2023.^{3,4} For 2023, CMS projects a:

- 3.8% increase in total OPPS payments³
- 3.8% increase in total ASC payments⁴

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 CY2023 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.

						Hospital	Outpatient (OPPS)		Ambulator	y Surgical Center (AS	SC)
Franchise	Technology	Procedure	Primary APC	CPT [‡] Code	ASC Complexity Adj. CPT [‡] Code	2022 Reimbursement ¹	2023 Reimbursment ³	% Change	2022 Reimbursement ²	2023 Reimbursement⁴	% Change
Electrophysiology		Catheter ablation, AV node	5212	93650		\$6,208	\$6,733	8.5%			
	EP Ablation	EP study with catheter ablation, SVT	5213	93653		\$21,916	\$23,481	7.1%			
		EP study and catheter ablation, VT	5213	93654		\$21,916	\$23,481	7.1%			
		EP study and catheter ablation, treatment of AF by PVI	5213	93656		\$21,916	\$23,481	7.1%			
	EP Studies	Comprehensive EP study without induction	5212	93619		\$6,208	\$6,733	8.5%			
	Implantable	ICM implantation		33282							
	Cardiac Monitor (ICM)	,	5222	33285		\$8,332	\$8,163	-2.0%	\$7,201	\$7,048	-2.1%
	(ICIVI)	ICM Removal	5071	33286		\$636	\$649	2.0%	\$322	\$338	5.0%
		System Implant or Replacement - Single Chamber (Ventricular)	5223	33207		\$10,619	\$10,329	-2.7%	\$7,795	\$7,557	-3.1%
		System Implant or Replacement - Dual Chamber	5223	33208		\$10,619	\$10,329	-2.7%	\$8,064	\$7,722	-4.2%
	Pacemaker	Leadless Pacemaker Removal	5183	33275		\$2,924	\$2,979	1.9%	\$2,471	\$2,491	0.8%
		Leadless Pacemaker Implant	5194	33274		\$16,402	\$17,178	4.7%	\$12,023	\$12,491	3.9%
		Battery Replacement - Single Chamber	5222	33227		\$8,332	\$8,163	-2.0%	\$6,574	\$6,410	-2.5%
ement		Battery Replacement - Dual Chamber	5223	33228		\$10,619	\$10,329	-2.7%	\$7,863	\$7,547	-4.0%
ınage	Implantable Cardioverter Defibrillator (ICD)	System Implant or Replacement	5232	33249		\$33,547	\$32,076	-4.4%	\$27,317	\$25,547	-6.5%
thm Ma		Battery Replacement - Single Chamber	5231	33262		\$23,551	\$22,818	-3.1%	\$20,223	\$19,382	-4.2%
Cardiac Rhythm Management		Battery Replacement - Dual Chamber	5231	33263		\$23,551	\$22,818	-3.1%	\$20,421	\$19,333	-5.3%
Card	Sub-Q ICD	Insertion of Subcutaneous ICD system	5232	33270		\$33,547	\$32,076	-4.4%	\$27,431	\$25,478	-7.1%
	Leads Only - Pacemaker, ICD,	Single lead, Pacemaker, ICD, or SICD	5222	33216		\$8,332	\$8,163	-2.0%	\$5,673	\$5,956	5.0%
	SICD, CRT	CRT	5223	33224		\$10,619	\$10,329	-2.7%	\$7,816	\$7,725	-1.2%
	Device	Programming and Remote	5741	0650T		\$38	\$35	-7.9%			
	Monitoring	Monitoring	5741	93279		\$38	\$35	-7.9%			
	CRT-P	System Implant or Replacement	5224	33208 + 33225	C7539	\$19,021	\$18,672	-1.8%	\$8,064	\$10,262	27.3%
		Battery Replacement	5224	33229		\$19,021	\$18,672	-1.8%	\$12,286	\$11,850	-3.5%
	CRT-D	System Implant or Replacement	5232	33249 + 33225		\$33,547	\$32,076	-4.4%	\$27,317	\$25,547	-6.5%
		Battery Replacement	5232	33264		\$33,547	\$32,076	-4.4%	\$27,209	\$25,557	-6.1%
		Sensor Implant		C2624		4	4				
ure	CardioMEMS	·	5200	33289		\$29,460	\$27,305	-7.3%			
. Pail			5741	G2066		\$38	\$35	-7.9%			
Heart Failure		,		93264		4	4				
	LVAD	Interrogation, in person	5742	93750		\$103	\$100	-2.9%			
		Advance care planning	5822	99497		\$76	\$76	0.0%			
Hypertension	Renal	Renal denervation, unilateral	5192	0338T		\$5,062	\$5,215	3.0%	\$2,207	\$2,327	5.4%
Нурег	Denervation	Renal denervation, bilateral	5192	0339T		\$5,062	\$5,215	3.0%	\$2,207	\$2,327	5.4%

						Hospital Outpatient (OPPS)			Ambulatory Surgical Center (ASC)		
Franchise	Technology	Procedure	Primary APC	CPT [‡] Code	ASC Complexity Adj. CPT* Code	2022 Reimbursement ¹	2023 Reimbursment ³	% Change	2022 Reimbursement ²	2023 Reimbursement ⁴	% Change
	PCI Drug Eluting Stents (including FFR/OCT)	DES, with angioplasty; one vessel, with or without FFR and/or OCT	5193	C9600		\$10,258	\$10,615	3.5%	\$6,404	\$6,489	1.3%
		Two DES, with angioplasty; two vessels, with or without FFR and/or OCT.	5193	C9600		\$10,258	\$10,615	3.5%	\$6,404	\$6,489	1.3%
		Two DES, with angioplasty; one vessel, with or without FFR and/or OCT	5193	C9600		\$10,258	\$10,615	3.5%	\$6,404	\$6,489	1.3%
		Two DES, with angioplasty; two major coronary arteries, with or without FFR and/or OCT.	5193	C9600		\$16,402	\$10,615	-35.3%	\$9,606	\$9,734	1.3%
	BMS with atherectomy	BMS with atherectomy	5194	92933		\$16,402	\$17,178	4.7%			
	DES with atherectomy	DES with atherectomy	5194	C9602		\$16,402	\$17,178	4.7%			
	DES and AMI	DES and AMI		C9606		\$0	\$0				
	DES and CTO	DES and CTO	5194	C9607		\$16,402	\$17,178	4.7%			
		Coronary angiography	5191	93454		\$2,962	\$2,958	-0.1%	\$1,438	\$1,489	3.5%
	Coronary Angiography and Coronary Physiology (FFR/ CFR) or OCT	Coronary angiography + OCT	5192	93454 + 92978	C7516	\$5,062	\$5,215	3.0%	\$0	\$2,327	
		Coronary angiography in graft	5191	93455		\$2,962	\$2,958	-0.1%	\$1,438	\$1,489	3.5%
		Coronary angiography in graft + OCT	5192	93455 + 92978	C7518	\$5,062	\$5,215	3.0%	\$0	\$2,327	
		Coronary angiography in graft + FFR/CFR	5192	93455 + 93571	C7519	\$5,062	\$5,215	3.0%	\$0	\$2,327	
λ.		Coronary angiography with right heart catherterization	5191	93456		\$2,962	\$2,958	-0.1%	\$1,438	\$1,489	3.5%
Coronary		Coronary angiography with right heart catherterization + OCT	5192	93456 + 92978	C7521	\$5,062	\$5,215	3.0%	\$0	\$2,327	
		Coronary angiography with right heart catherterization + FFR/CFR	5192	93456 + 93571	C7522	\$5,062	\$5,215	3.0%	\$0	\$2,327	
		Coronary angiography in graft with right heart catheterization	5191	93457		\$2,962	\$2,958	-0.1%	\$1,438	\$1,489	3.5%
		Coronary angiography in graft with right heart catheterization + FFR/CFR	5192	93457 + 93571		\$2,962	\$5,215	76.1%	\$0	\$0	
		Coronary angiography with left heart catherterization	5191	93458		\$2,962	\$2,958	-0.1%	\$1,438	\$1,489	3.5%
		Coronary angiography with left heart catherterization + OCT	5192	93458 + 92978	C7523	\$5,062	\$5,215	3.0%	\$0	\$2,327	
		Coronary angiography with left heart catherterization + FFR/CFR	5192	93458 + 93571	C7524	\$5,062	\$5,215	3.0%	\$0	\$2,327	
		Coronary angiography in graft with left heart catheterization	5191	93459		\$2,962	\$2,958	-0.1%	\$1,438	\$1,489	3.5%
		Coronary angiography in graft with left heart catheterization + OCT	5192	93459 + 92978	C7525	\$5,062	\$5,215	3.0%	\$0	\$2,327	
		Coronary angiography in graft with left heart catheterization + FFR/CFR	5192	93459 + 93571	C7526	\$5,062	\$5,215	3.0%	\$0	\$2,327	
		Coronary angiography with right and left heart catherterization	5191	93460		\$2,962	\$2,958	-0.1%	\$1,438	\$1,489	3.5%
		Coronary angiography with right and left heart catherterization + OCT	5192	93460 + 92978	C7527	\$5,062	\$5,215	3.0%	\$0	\$2,327	
		Coronary angiography with right and left heart catherterization + FFR/CFR	5192	93460 + 93571	C7528	\$5,062	\$5,215	3.0%	\$0	\$2,327	

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

						Hospital Outpatient (OPPS)			Ambulatory Surgical Center (ASC)		
Franchise	Technology	Procedure	Primary APC	CPT [‡] Code	ASC Complexity Adj. CPT [‡] Code	2022 Reimbursement ¹	2023 Reimbursment ³	% Change	2022 Reimbursement ²	2023 Reimbursement ⁴	% Change
ary	Coronary Angiography and Coronary Physiology (FFR/ CFR) or OCT	Coronary angiography in graft with right and left heart catheterization	5191	93461		\$2,962	\$2,958	-0.1%	\$1,438	\$1,489	3.5%
Coronary		Coronary angiography in graft with right and left heart catheterization + FFR/CFR	5192	93461 + 93571	C7529	\$5,062	\$5,215	3.0%	\$0	\$2,327	
		Angioplasty (Iliac)	5192	37220		\$5,062	\$5,215	3.0%	\$2,922	\$3,074	5.2%
	Angioplasty	Angioplasty (Fem/Pop)	5192	37224		\$5,062	\$5,215	3.0%	\$3,142	\$3,230	2.8%
		Angioplasty (Tibial/Peroneal)	5193	37228		\$10,258	\$10,615	3.5%	\$5,939	\$6,085	2.5%
	Athorostomy	Atherectomy (Fem/Pop)	5193	37225		\$10,258	\$10,615	3.5%	\$6,901	\$7,056	2.2%
	Atherectomy	Atherectomy (Tibial/Peroneal)	5194	37229		\$16,402	\$17,178	4.7%	\$10,774	\$11,119	3.2%
		Stenting (Iliac)	5193	37221		\$10,258	\$10,615	3.5%	\$6,372	\$6,599	3.6%
	Ctantina	Stenting (Fem/Pop)	5193	37226		\$10,258	\$10,615	3.5%	\$6,673	\$6,969	4.4%
	Stenting	Stenting (Periph, incl Renal)	5193	37236		\$10,258	\$10,615	3.5%	\$6,256	\$6,386	2.1%
		Stenting (Tibial/Peroneal)	5194	37230		\$16,402	\$17,178	4.7%	\$10,623	\$11,352	6.9%
	Atherectomy and Stenting	Atherectomy and stenting (Fem/Pop)	5194	37227		\$16,402	\$17,178	4.7%	\$11,534	\$11,792	2.2%
		Atherectomy and stenting (Tibial/Peroneal)	5194	37231		\$16,402	\$17,178	4.7%	\$10,812	\$11,322	4.7%
	Vascular Plugs	Venous embolization or occlusion	5193	37241		\$10,258	\$10,615	3.5%	\$5,683	\$5,889	3.6%
		Arterial embolization or occlusion	5193	37242		\$10,258	\$10,615	3.5%	\$6,495	\$6,720	3.5%
		Embolization or occlusion for tumors, organ ischemia, or infarction	5193	37243		\$10,258	\$10,615	3.5%	\$4,366	\$4,579	4.9%
		Embolization or occlusion for arterial or venous hemorrhage or lymphatic extravasation	5193	37244		\$10,258	\$10,615	3.5%			
Peripheral Vascular	Arterial Mechanical Thrombectomy	Primary arterial percutaneous mechanical thrombectomy; initial vessel	5193	37184		\$10,258	\$10,615	3.5%	\$6,787	\$6,563	-3.3%
Periphe		Primary arterial percutaneous mechanical thrombectomy; second and all subsequent vessel(s)		37185		Packaged	Packaged		NA	NA	
		Secondary arterial percutaneous mechanical thrombectomy		37186		Packaged	Packaged		NA	NA	
	Venous	Venous percutaneous mechanical thrombectomy, initial treatment	5193	37187		\$10,258	\$10,615	3.5%	\$6,686	\$7,321	9.5%
	Mechanical Thrombectomy	Venous percutaneous mechanical thrombectomy, repeat treatment on subsequent day	5183	37188		\$2,924	\$2,979	1.9%	\$1,931	\$2,488	28.8%
		Percutaneous mechanical thrombectomy, dialysis circuit	5192	36904		\$5,062	\$5,215	3.0%	\$2,954	\$3,071	4.0%
	Dialysis Circuit Thrombectomy	Percutaneous mechanical thrombectomy, dialysis circuit, with angioplasty	5193	36905		\$10,258	\$10,615	3.5%	\$5,669	\$5,907	4.2%
		Percutaneous mechanical throm- bectomy, dialysis circuit, with stent	5194	36906		\$16,402	\$17,178	4.7%	\$10,900	\$11,245	3.2%
		Transcatheter arterial thrombolysis treatment, initial day	5184	37211		\$4,870	\$5,140	5.5%	\$3,166	\$3,395	7.2%
	Thrombolysis	Transcatheter venous thrombolysis treatment, initial day	5183	37212		\$2,924	\$2,979	1.9%	\$1,899	\$1,444	-24.0%
		Transcatheter arterial or venous thrombolysis treatment, subsequent day	5183	37213		\$2,924	\$2,979	1.9%			
		Transcatheter arterial or venous thrombolysis treatment, final day	5183	37214		\$2,924	\$2,979	1.9%			

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

						Hospital	Outpatient (OPPS)		Ambulatory Surgical Center (ASC)		
Franchise	Technology	Procedure	Primary APC	CPT [‡] Code	ASC Complexity Adj. CPT [‡] Code	2022 Reimbursement ¹	2023 Reimbursment ³	% Change	2022 Reimbursement ²	2023 Reimbursement ⁴	% Change
	PFO Closure	ASD/PFO closure	5194	93580		\$16,402	\$17,178	4.7%			
tural	ASD	ASD/PFO closure	5194	93580		\$16,402	\$17,178	4.7%			
Structural Heart	VSD	VSD closure	5194	93581		\$16,402	\$17,178	4.7%			
<i>3,</i>	PDA	PDA closure	5194	93582		\$16,402	\$17,178	4.7%			
		Single Lead Trial: percutaneous	5462	63650		\$6,295	\$6,604	4.9%	\$4,570	\$4,913	7.5%
		Dual Lead Trial: percutaneous	5462	63650		\$6,295	\$6,604	4.9%	\$9,140	\$9,826	7.5%
		Surgical Lead Trial	5464	63655		\$20,913	\$21,515	2.9%	\$17,144	\$17,950	4.7%
	Spinal Cord Stimulation and DRG Stimulation	Full System - Single lead - Percutaneous	5465	63685		\$30,063	\$29,358	-2.3%	\$28,993	\$29,629	2.2%
		Full System - Dual Lead - Percutaneous	5465	63685		\$30,063	\$29,358	-2.3%	\$33,563	\$34,542	2.9%
aji		Full System IPG - Laminectomy	5465	63685		\$30,063	\$29,358	-2.3%	\$41,567	\$42,666	2.6%
Chronic Pain		IPG implant or replacement	5465	63685		\$30,063	\$29,358	-2.3%	\$24,423	\$24,716	1.2%
Chro		Single lead	5462	63650		Packaged	Packaged		\$4,570	\$4,913	7.5%
		Dual lead	5462	63650		Packaged	Packaged		\$4,570	\$4,913	7.5%
		Analysis of IPG, Simple Programming	5742	95971		\$103	\$100	-2.9%			
	RF Ablation	Cervical Spine / Thoracic Spine	5431	64633		\$1,793	\$1,798	0.3%	\$825	\$854	3.5%
		Lumbar Spine	5431	64635		\$1,793	\$1,798	0.3%	\$825	\$854	3.5%
		Other Peripheral Nerves	5443	64640		\$841	\$852	1.3%	\$176	\$172	-2.3%
		Radiofrequency Ablation	5431	64625		\$1,793	\$1,798	0.3%	\$825	\$854	3.5%
		IPG Placement - Single Array	5464	61885		\$20,913	\$21,515	2.9%	\$18,591	\$19,686	5.9%
50		IPG Placement - Two Single Array 5	5464	61885		\$20,913	\$21,515	2.9%	\$18,591	\$19,686	5.9%
Movement Disorders	200	IPGs	5464	61885		\$20,913	\$21,515	2.9%	\$18,591	\$19,686	5.9%
		IPG Placement - Dual Array	5465	61886		\$30,063	\$29,358	-2.3%	\$24,540	\$24,824	1.2%
	DBS	Analysis of IPG, No Programming	5734	95970		\$115	\$116	0.9%			
		Analysis of IPG, Simple Programming; first 15 Min	5742	95983		\$103	\$100	-2.9%			
		Analysis of IPG, Simple Programming; additional 15 Min		95984		\$0	\$0				

Sources:

- $1. \ \ Hospital\ Outpatient\ Prospective\ Payment-Final\ Rule\ with\ Comment\ CY2022: \underline{https://www.cms.gov/medicare-fee-service-paymenthospitaloutpatientpps/cms-1753-fee-service-paymenthospital$
- 2. Ambulatory Surgical Center Payment-Final Rule CY2022 Payment Rates: <a href="https://www.cms.gov/medicaremedicare-fee-service-paymentascpayment
- $3. \ \ Hospital \ Outpatient \ Prospective \ Payment-Final \ Rule \ with \ Comment \ CY2023: \\ \underline{https://www.cms.gov/httpswwwcmsgovmedicaremedicare-fee-service-paymenthospitaloutpatientppshospital-outpatient/cms-1772-fc}$
- 4. Ambulatory Surgical Center Payment-Final Rule CY2023 Payment Rates: <a href="https://www.cms.gov/medicaremedicare-fee-service-paymentascpayment

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