



2026 REIMBURSEMENT GUIDE

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

The Centers for Medicare & Medicaid Services (CMS) made significant changes to calendar year CY2026 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 1, 2025, CMS released the CY2026 Hospital Outpatient Prospective Payment System (OPPS)/Ambulatory Surgical Center (ASC) Final Rule, effective for services on January 1, 2026.^{3,4}

For 2026, CMS projects a:

- 2.6% increase in total OPPS payments⁵
- 2.4% increase in total ASC payments⁵

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 CY2026 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](https://www.abbott.com), or contact Abbott Health Care Economics team at (855) 569-6430 or AbbottEconomics@Abbott.com.

Franchise	Technology	Procedure	Primary APC	CPT+ Code	ASC Complexity Adj. CPT+ Code	Hospital Outpatient (OPPS)			Ambulatory Surgery Center (ASC)		
						2025 ¹ Reimbursement	2026 ³ Reimbursement	% Change	2025 ² Reimbursement	2026 ⁴ Reimbursement	% Change
Electrophysiology	EP Ablation	Catheter ablation, AV node	5212	93650	NA	\$7,588	\$7,969	5.0%	NA	\$5,943	NA
		EP study with catheter ablation, SVT	5213	93653	NA	\$24,532	\$26,704	8.9%	NA	\$19,176	NA
		EP study and catheter ablation, VT	5213	93654	NA	\$24,532	\$26,704	8.9%	NA	\$19,482	NA
		EP study and catheter ablation, treatment of AF by PVI	5213	93656	NA	\$24,532	\$26,704	8.9%	NA	\$20,256	NA
	EP Studies	Comprehensive EP study without induction	5212	93619	NA	\$7,588	\$7,969	5.0%	NA	NA	NA
Cardiac Rhythm Management	Implantable Cardiac Monitor (ICM)	ICM implantation		33282	NA	NA	NA	NA	NA	NA	NA
			5222	33285	NA	\$8,276	\$8,455	2.2%	\$7,028	\$7,176	2.1%
		ICM Removal	5071	33286	NA	\$704	\$723	2.7%	\$378	\$389	2.9%
	Pacemaker Systems	System Implant or Replacement - Single Chamber (Ventricular)	5223	33207	NA	\$10,465	\$10,678	2.0%	\$7,589	\$7,565	-0.3%
		System Implant or Replacement - Dual Chamber	5223	33208	NA	\$10,465	\$10,678	2.0%	\$7,690	\$7,739	0.6%
	Leadless Pacemakers	Insertion of single chamber leadless pacemaker, atrial	5224	0823T	NA	\$19,071	\$19,679	3.2%	NA	NA	NA
		Insertion of dual chamber leadless pacemaker	5224	0795T	NA	\$19,071	\$19,679	3.2%	NA	NA	NA
		AR insertion to upgrade to a dual chamber (existing VR)	5224	0796T	NA	\$19,071	\$19,679	3.2%	NA	NA	NA
		VR insertion to upgrade to a dual chamber (existing AR)	5224	0797T	NA	\$19,071	\$19,679	3.2%	NA	NA	NA
		Removal of permanent dual chamber leadless pacemaker	5183	0798T	NA	\$3,148	\$3,226	2.5%	NA	NA	NA
		Removal of permanent dual chamber leadless pacemaker (atrial component only)	5183	0799T	NA	\$3,148	\$3,226	2.5%	NA	NA	NA
		Removal of right atrial leadless pacemaker, single chamber	5183	0824T	NA	\$3,148	\$3,226	2.5%	NA	NA	NA
		Removal of permanent dual chamber leadless pacemaker (ventricular component only)	5183	0800T	NA	\$3,148	\$3,226	2.5%	NA	NA	NA
		Removal and replacement of dual chamber leadless pacemaker (atrial and ventricular)	5224	0801T	NA	\$19,071	\$19,679	3.2%	NA	NA	NA
		Removal and replacement of dual chamber leadless pacemaker (atrial only)	5224	0802T	NA	\$19,071	\$19,679	3.2%	NA	NA	NA
		Removal and replacement of permanent single chamber leadless pacemaker, atrial	5224	0825T	NA	\$19,071	\$19,679	3.2%	NA	NA	NA
		Removal and replacement of dual chamber leadless pacemaker (ventricular only)	5224	0803T	NA	\$19,071	\$19,679	3.2%	NA	NA	NA
		Leadless Pacemaker Removal	5183	33275	NA	\$3,148	\$3,226	2.5%	NA	NA	NA
		Leadless Pacemaker Implant	5224	33274	NA	\$19,071	\$19,679	3.2%	NA	NA	NA
	Pacemaker Battery	Battery Replacement - Single Chamber	5222	33227	NA	\$8,276	\$8,455	2.2%	\$6,424	\$6,436	0.2%
		Battery Replacement - Dual Chamber	5223	33228	NA	\$10,465	\$10,678	2.0%	\$7,532	\$7,554	0.3%
	Implantable Cardioverter Defibrillator (ICD)	System Implant or Replacement	5232	33249	NA	\$32,062	\$32,069	0.0%	\$24,924	\$24,776	-0.6%
		Battery Replacement - Single Chamber	5231	33262	NA	\$22,446	\$22,725	1.2%	\$18,723	\$18,921	1.1%
		Battery Replacement - Dual Chamber	5231	33263	NA	\$22,446	\$22,725	1.2%	\$18,856	\$18,963	0.6%
	Sub-Q ICD	Insertion of Subcutaneous ICD system	5232	33270	NA	\$32,062	\$32,069	0.0%	\$25,448	\$25,175	-1.1%
	Leads Only Pacemaker, ICD, SICD, CRT	Single lead, Pacemaker, ICD, or SICD	5222	33216	NA	\$8,276	\$8,455	2.2%	\$5,903	\$5,909	0.1%
		CRT	5223	33224	NA	\$10,465	\$10,678	2.0%	\$7,637	\$7,699	0.8%

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

Franchise	Technology	Procedure	Primary APC	CPT+ Code	ASC Complexity Adj. CPT+ Code	Hospital Outpatient (OPPS)			Ambulatory Surgery Center (ASC)		
						2025 ¹ Reimbursement	2026 ³ Reimbursement	% Change	2025 ² Reimbursement	2026 ⁴ Reimbursement	% Change
Cardiac Rhythm Management	Leadless Pacemaker Monitoring	Programming and Remote Monitoring	5741	93279	NA	\$37	\$38	2.7%	NA	NA	NA
		Programming device evaluation (in person), dual chamber leadless pacemaker	5741	0804T	NA	\$37	\$38	2.7%	NA	NA	NA
		Programming device evaluation (in person), single chamber leadless pacemaker, atrial	5741	0826T	NA	\$37	\$38	2.7%	NA	NA	NA
		Interrogation device evaluation (in person), single or dual chamber leadless pacemaker	5741	93288	NA	\$37	\$38	2.7%	NA	NA	NA
	Core CRM Monitoring	Interrogation device evaluation (remote) single or dual chamber implantable defibrillator	NA	93295	NA	NA	NA	NA	NA	NA	NA
		Interrogation device evaluation (remote) single or dual chamber transvenous or leadless pacemaker system	5741	93296	NA	\$37	\$38	2.7%	NA	NA	NA
		Interrogation device evaluation (remote), implantable cardiovascular physiologic monitoring system	5741	93297	NA	\$37	\$38	2.7%	NA	NA	NA
		Interrogation device evaluation (remote), subcutaneous cardiac rhythm monitor system	5741	93298	NA	\$37	\$38	2.7%	NA	NA	NA
	CRT-P	System Implant or Replacement	5224	33208 + 33225	C7539	\$19,071	\$19,679	3.2%	\$11,187	\$11,508	2.9%
		Battery Replacement	5224	33229	NA	\$19,071	\$19,679	3.2%	\$13,222	\$13,528	2.3%
	CRT-D	System Implant or Replacement	5232	33249 + 33225	NA	\$32,062	\$32,069	0.0%	\$24,924	\$24,776	-0.6%
		Battery Replacement	5232	33264	NA	\$32,062	\$32,069	0.0%	\$25,154	\$24,920	-0.9%
Heart Failure	CardioMEMS	Sensor Implant	5200	C2624	NA	NA	NA	NA	NA	NA	NA
			5200	33289	NA	\$28,428	\$29,305	3.1%	\$25,212	\$26,145	3.7%
		Electronic Analysis of Devices	5741	93264	NA	\$37	\$38	2.7%	NA	NA	NA
	LVAD	Interrogation, in person	5742	93750	NA	\$92	\$97	5.4%	NA	NA	NA
Advance care planning		5822	99497	NA	\$93	\$104	11.8%	NA	NA	NA	
Coronary	Coronary PCI	Angioplasty without stent	5192	92920	NA	\$5,702	\$5,815	2.0%	\$3,628	\$3,849	6.1%
		Atherectomy without stent	5193	92924	NA	\$11,341	\$11,794	4.0%	NA	\$8,448	NA
		Angioplasty with intracoronary stent; one distinct coronary lesion or segment	5193	92928	NA	\$11,341	\$11,794	4.0%	\$6,994	\$7,309	4.5%
		Angioplasty w stent; two distinct intracoronary lesions or segments	5194	92930	NA	NA	\$18,729	NA	NA	\$12,842	NA
		Atherectomy with intracoronary stent	5194	92933	NA	\$17,957	\$18,729	4.3%	NA	\$12,965	NA
		Revascularization of or through bypass graft, any combination of intracoronary stent, atherectomy and angioplasty	5193	92937	NA	\$11,341	\$11,794	4.0%	NA	\$7,423	NA
		Revascularization during AMI, any combination of intracoronary stent, atherectomy and angioplasty	NA	92941	NA	NA	NA	NA	NA	NA	NA
		Revascularization of CTO, any combination of intracoronary stent, atherectomy and angioplasty, antegrade approach	5193	92943	NA	\$11,341	\$11,794	4.0%	NA	\$7,883	NA
		Revascularization of CTO, any combination of intracoronary stent, atherectomy and angioplasty, combined antegrade and retrograde approach	5193	92945	NA	NA	\$11,794	4.0%	NA	\$7,438	NA

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

Franchise	Technology	Procedure	Primary APC	CPT+ Code	ASC Complexity Adj. CPT+ Code	Hospital Outpatient (OPPS)			Ambulatory Surgery Center (ASC)		
						2025 ¹ Reimbursement	2026 ³ Reimbursement	% Change	2025 ² Reimbursement	2026 ⁴ Reimbursement	% Change
Coronary	Coronary PCI	Angioplasty with DES	5193	C9600	NA	\$11,341	\$11,794	4.0%	\$7,062	\$7,500	6.2%
		Angioplasty with DES, additional branch (add-on)	NA	+C9601	NA	Packaged	Packaged	NA	Packaged	Packaged	
		Atherectomy with DES	5194	C9602	NA	\$17,957	\$18,729	4.3%	NA	\$13,206	NA
		Atherectomy with DES, additional branch (add-on)	NA	+C9603	NA	Packaged	Packaged	NA	NA	Packaged	NA
		Revascularization of or through bypass graft, any combination of DES, atherectomy and angioplasty	5193	C9604	NA	\$11,341	\$11,794	4.0%	NA	\$7,354	NA
		Revascularization of or through bypass graft, additional branch	NA	+C9605	NA	Packaged	Packaged	NA	NA	Packaged	NA
		Revascularization during AMI, any combination of DES, atherectomy and angioplasty	NA	C9606	NA	NA	NA	NA	NA	NA	NA
		Revascularization of CTO, any combination of DES, atherectomy and angioplasty	5194	C9607	NA	\$17,957	\$18,729	4.3%	NA	\$12,790	NA
		Revascularization of CTO, additional branch (add-on)	NA	+C9608	NA	Packaged	Packaged	NA	NA	Packaged	NA
		Coronary IVL (add-on)	NA	+92972	NA	Packaged	Packaged	NA	NA	NA	NA
		Therapeutic drug delivery by DCB, including angioplasty, IVUS/OCT, single artery or branch	5193	0913T	NA	\$5,702	\$11,794	106.8%	\$3,333	\$7,438	123.2%
		Therapeutic drug delivery by DCB performed on separate target lesion, including angioplasty, IVUS/OCT, single artery or branch (add-on)	NA	+0914T	NA	Packaged	Packaged	NA	Packaged	Packaged	NA
	Coronary Angiography	Coronary angiography without heart cath	5191	93454	NA	\$3,216	\$3,312	3.0%	\$1,656	\$1,708	3.1%
		Coronary angiography with angiography of bypass graft, without heart cath	5191	93455	NA	\$3,216	\$3,312	3.0%	\$1,656	\$1,708	3.1%
		Coronary angiography with right heart cath	5191	93456	NA	\$3,216	\$3,312	3.0%	\$1,656	\$1,708	3.1%
		Coronary angiography with angiography of bypass graft, with right heart cath	5191	93457	NA	\$3,216	\$3,312	3.0%	\$1,656	\$1,708	3.1%
		Coronary angiography with left heart cath	5191	93458	NA	\$3,216	\$3,312	3.0%	\$1,656	\$1,708	3.1%
		Coronary angiography with angiography of bypass graft, with left heart cath	5191	93459	NA	\$3,216	\$3,312	3.0%	\$1,656	\$1,708	3.1%
		Coronary angiography with left and right heart cath	5191	93460	NA	\$3,216	\$3,312	3.0%	\$1,656	\$1,708	3.1%
		Coronary angiography with angiography of bypass graft, with left and right heart cath	5191	93461	NA	\$3,216	\$3,312	3.0%	\$1,656	\$1,708	3.1%
	Physiology Testing With Stress Agent (FFR, CFR, IMR, Spasm, Bridging)	Intravascular Doppler velocity and/or pressure derived coronary flow reserve management (coronary vessel or graft) during coronary angiography, including pharmacologically induced stress; initial vessel (add-on)	NA	+93571	NA	Packaged	Packaged	NA	NA	NA	NA
		additional vessel (add-on)	NA	+93572	NA	Packaged	Packaged	NA	NA	NA	NA
		Right heart angiography with "flow reserve" (ASC)	NA	C7522	NA	NA	NA	NA	\$2,630	\$2,727	3.7%
		Left heart angiography with "flow reserve" (ASC)	NA	C7524	NA	NA	NA	NA	\$2,630	\$2,727	3.7%
		Coronary angiography in graft with left heart angiography with "flow reserve" (ASC)	NA	C7526	NA	NA	NA	NA	\$2,630	\$2,727	3.7%

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

Franchise	Technology	Procedure	Primary APC	CPT [†] Code	ASC Complexity Adj. CPT [†] Code	Hospital Outpatient (OPPS)			Ambulatory Surgery Center (ASC)		
						2025 ¹ Reimbursement	2026 ³ Reimbursement	% Change	2025 ² Reimbursement	2026 ⁴ Reimbursement	% Change
Coronary	Physiology Testing With Stress Agent (FFR, CFR, IMR, Spasm, Bridging)	Coronary angiography with right and left heart angiography with "flow reserve" (ASC)	NA	C7528	NA	NA	NA	NA	\$2,630	\$2,727	3.7%
		Coronary angiography in graft with right and left heart angiography with "flow reserve" (ASC)	NA	C7529	NA	NA	NA	NA	\$2,630	\$2,727	3.7%
	Coronary Imaging IVUS/OCT	Intravascular ultrasound (coronary vessel or graft) or optical coherence tomography (OCT) during diagnostic evaluation and/or therapeutic intervention; initial vessel (add-on)	NA	+92978	NA	Packaged	Packaged	NA	NA	NA	NA
		additional vessel (add-on)	NA	+92979	NA	Packaged	Packaged	NA	NA	NA	NA
		Coronary angiography with IVUS or OCT (ASC)	NA	C7516	NA	NA	NA	NA	\$2,630	\$2,727	3.7%
		Right heart angiography with IVUS or OCT (ASC)	NA	C7521	NA	NA	NA	NA	\$2,630	\$2,727	3.7%
		Left heart angiography with IVUS or OCT (ASC)	NA	C7523	NA	NA	NA	NA	\$2,630	\$2,727	3.7%
		Coronary angiography in graft with left heart angiography with IVUS or OCT (ASC)	NA	C7525	NA	NA	NA	NA	\$2,630	\$2,727	3.7%
		Coronary angiography with right and left heart angiography with IVUS or OCT (ASC)	NA	C7527	NA	NA	NA	NA	\$2,630	\$2,727	3.7%
		Peripheral Angioplasty	Angioplasty (Iliac) Straightforward lesion	5192	37254	NA	\$5,702	\$5,815	2.0%	\$3,426	\$3,587
Angioplasty (Iliac) Straightforward lesion, Addt'l Vessel	NA	+37255	NA	NA	NA	NA	NA	NA	NA	NA	
Angioplasty (Iliac) Complex lesion	5192	37256	NA	\$5,702	\$5,815	2.0%	\$3,426	\$3,587	4.7%		
Angioplasty (Iliac) Complex lesion, Addt'l Vessel	NA	+37257	NA	NA	NA	NA	NA	NA	NA	NA	
Angioplasty (Fem/Pop) Straightforward lesion	5192	37263	NA	\$5,702	\$5,815	2.0%	\$3,640	\$3,796	4.3%		
Angioplasty (Fem/Pop) Straightforward lesion, Addt'l vessel	NA	+37264	NA	NA	NA	NA	NA	NA	NA	NA	
Angioplasty (Fem/Pop) Complex lesion	5192	37265	NA	\$5,702	\$5,815	2.0%	\$3,640	\$3,796	4.3%		
Angioplasty (Fem/Pop) Complex lesion, Addt'l Vessel	NA	+37266	NA	NA	NA	NA	NA	NA	NA	NA	
Angioplasty (Tib/Per) Straightforward lesion	5193	37280	NA	\$11,341	\$11,794	4.0%	\$6,603	\$7,078	7.2%		
Angioplasty (Tib/Per) Straightforward lesion, Addt'l vessel	NA	+37281	NA	NA	NA	NA	NA	NA	NA	NA	
Angioplasty (Tib/Per) Complex lesion	5193	37282	NA	\$11,341	\$11,794	4.0%	\$6,603	\$7,078	7.2%		
Angioplasty (Tib/Per) Complex lesion, Addt'l Vessel	NA	+37283	NA	NA	NA	NA	NA	NA	NA	NA	
Angioplasty (Inframalleolar) Straightforward lesion	5193	37296	NA	NA	\$11,794	NA	NA	NA	\$7,078	NA	
Angioplasty (Inframalleolar) Straightforward lesion, Addt'l Vessel	NA	+37297	NA	NA	NA	NA	NA	NA	NA	NA	
Angioplasty (Inframalleolar) Complex lesion	5193	37298	NA	NA	\$11,794	NA	NA	NA	\$7,078	NA	
Angioplasty (Inframalleolar) Complex lesion, Addt'l Vessel	NA	+37299	NA	NA	NA	NA	NA	NA	NA	NA	
Peripheral Stenting	Angioplasty + Stent (Iliac) Straightforward lesion	5193	37258	NA	\$11,341	\$11,794	4.0%	\$7,176	\$7,665	6.8%	
	Angioplasty + Stent (Iliac) Straightforward lesion, Addt'l Vessel	NA	+37259	NA	NA	NA	NA	NA	NA	NA	
	Angioplasty + Stent (Iliac) Complex lesion	5193	37260	NA	\$11,341	\$11,794	4.0%	\$7,176	\$7,665	6.8%	

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

Franchise	Technology	Procedure	Primary APC	CPT [†] Code	ASC Complexity Adj. CPT [†] Code	Hospital Outpatient (OPPS)			Ambulatory Surgery Center (ASC)		
						2025 ¹ Reimbursement	2026 ³ Reimbursement	% Change	2025 ² Reimbursement	2026 ⁴ Reimbursement	% Change
Peripheral Vascular	Peripheral Stenting	Angioplasty + Stent (Iliac) Complex lesion, Addt'l Vessel	NA	+37261	NA	NA	NA	NA	NA	NA	NA
		Angioplasty + Stent (Fem/Pop) Straightforward lesion	5193	37267	NA	\$11,341	\$11,794	4.0%	\$7,579	\$8,066	6.4%
		Angioplasty + Stent (Fem/Pop) Straightforward lesion, Addt'l Vessel	NA	+37268	NA	NA	NA	NA	NA	NA	NA
		Angioplasty + Stent (Fem/Pop) Complex lesion	5193	37269	NA	\$11,341	\$11,794	4.0%	\$7,579	\$8,066	6.4%
		Angioplasty + Stent (Fem/Pop) Complex lesion, Addt'l Vessel	NA	+37270	NA	NA	NA	NA	NA	NA	NA
		Angioplasty + Stent (Tib/Per) Straightforward lesion	5194	37284	NA	\$17,957	\$18,729	4.3%	\$11,439	\$12,207	6.7%
		Angioplasty + Stent (Tib/Per) Straightforward lesion, Addt'l Vessel	NA	+37285	NA	NA	NA	NA	NA	NA	NA
		Angioplasty + Stent (Tib/Per) Complex lesion	5194	37286	NA	\$17,957	\$18,729	4.3%	\$11,439	\$12,207	6.7%
		Angioplasty + Stent (Tib/Per) Complex lesion, Addt'l Vessel	NA	+37287	NA	NA	NA	NA	NA	NA	NA
	Peripheral Atherectomy	Angioplasty + Atherectomy (Iliac)	5194	0238T	NA	\$17,957	\$18,729	4.3%	\$11,532	\$13,842	20.0%
		Angioplasty + Atherectomy (Fem/Pop) Straightforward lesion	5194	37271	NA	\$17,957	\$18,729	4.3%	\$12,445	\$13,100	5.3%
		Angioplasty + Atherectomy (Fem/Pop) Straightforward lesion, Addt'l Vessel	NA	+37272	NA	NA	NA	NA	NA	NA	NA
		Angioplasty + Atherectomy (Fem/Pop) Complex lesion	5194	37273	NA	\$17,957	\$18,729	4.3%	\$12,445	\$13,100	5.3%
		Angioplasty + Atherectomy (Fem/Pop) Complex lesion, Addt'l Vessel	NA	+37274	NA	NA	NA	NA	NA	NA	NA
		Angioplasty + Atherectomy (Tib/Per) Straightforward lesion	5194	37288	NA	\$17,957	\$18,729	4.3%	\$11,855	\$12,373	4.4%
		Angioplasty + Atherectomy (Tib/Per) Straightforward lesion, Addt'l Vessel	NA	+37289	NA	NA	NA	NA	NA	NA	NA
		Angioplasty + Atherectomy (Tib/Per) Complex lesion	5194	37290	NA	\$17,957	\$18,729	4.3%	\$11,855	\$12,373	4.4%
		Angioplasty + Atherectomy (Tib/Per) Complex lesion, Addt'l Vessel	NA	+37291	NA	NA	NA	NA	NA	NA	NA
	Peripheral Atherectomy and Stenting	Angioplasty + Stent + Atherectomy (Fem/Pop) Straightforward lesion	5194	37275	NA	\$17,957	\$18,729	4.3%	\$12,540	\$13,205	5.3%
		Angioplasty + Stent + Atherectomy (Fem/Pop) Straightforward lesion, Addt'l Vessel	NA	+37276	NA	NA	NA	NA	NA	NA	NA
		Angioplasty + Stent + Atherectomy (Fem/Pop) Complex lesion	5194	37277	NA	\$17,957	\$18,729	4.3%	\$12,540	\$13,205	5.3%
		Angioplasty + Stent + Atherectomy (Fem/Pop) Complex lesion, Addt'l Vessel	NA	+37278	NA	NA	NA	NA	NA	NA	NA
		Angioplasty + Stent + Atherectomy (Tib/Per) Straightforward lesion	5194	37292	NA	\$17,957	\$18,729	4.3%	\$12,261	\$12,901	5.2%
		Angioplasty + Stent + Atherectomy (Tib/Per) Straightforward lesion, Addt'l Vessel	NA	+37293	NA	NA	NA	NA	NA	NA	NA
		Angioplasty + Stent + Atherectomy (Tib/Per) Complex lesion	5194	37294	NA	\$17,957	\$18,729	4.3%	\$12,261	\$12,901	5.2%
		Angioplasty + Stent + Atherectomy (Tib/Per) Complex lesion, Addt'l Vessel	NA	+37295	NA	NA	NA	NA	NA	NA	NA

Franchise	Technology	Procedure	Primary APC	CPT+ Code	ASC Complexity Adj. CPT+ Code	Hospital Outpatient (OPPS)			Ambulatory Surgery Center (ASC)			
						2025 ¹ Reimbursement	2026 ³ Reimbursement	% Change	2025 ² Reimbursement	2026 ⁴ Reimbursement	% Change	
Peripheral Vascular	Peripheral Intravascular Lithotripsy (IVL)	IVL + Angioplasty (iliac or fem/pop)	5193	C9764	NA	\$11,341	\$11,794	4.0%	\$7,753	\$8,249	6.4%	
		IVL + Angioplasty + Stent (iliac or fem/pop)	5194	C9765	NA	\$17,957	\$18,729	4.3%	\$12,497	\$13,269	6.2%	
		IVL + Angioplasty + Atherectomy (iliac or fem/pop)	5194	C9766	NA	\$17,957	\$18,729	4.3%	\$12,749	\$13,628	6.9%	
		IVL + Angioplasty + Atherectomy + Stenting (iliac or fem/pop)	5194	C9767	NA	\$17,957	\$18,729	4.3%	\$12,668	\$13,908	9.8%	
		IVL + Angioplasty (tib/per)	5193	C9772	NA	\$11,341	\$11,794	4.0%	\$7,574	\$8,000	5.6%	
		IVL + Angioplasty + Stent (tib/per)	5194	C9773	NA	\$17,957	\$18,729	4.3%	\$11,636	\$12,025	3.3%	
		IVL + Angioplasty + Atherectomy (tib/per)	5194	C9774	NA	\$17,957	\$18,729	4.3%	\$11,882	\$13,064	9.9%	
	Vascular Plugs	IVL + Angioplasty + Atherectomy + Stenting (tib/per)	5194	C9775	NA	\$17,957	\$18,729	4.3%	\$13,114	\$14,121	7.7%	
		Venous embolization or occlusion	5193	37241	NA	\$11,341	\$11,794	4.0%	\$6,454	\$6,866	6.4%	
		Arterial embolization or occlusion	5194	37242	NA	\$17,957	\$18,729	4.3%	\$11,861	\$11,449	-3.5%	
		Embolization or occlusion for tumors, organ ischemia, or infarction	5193	37243	NA	\$11,341	\$11,794	4.0%	\$6,530	\$5,419	-17.0%	
	Structural Heart	PDA Closure	Embolization or occlusion for arterial or venous hemorrhage or lymphatic extravasation	5193	37244	NA	\$11,341	\$11,794	4.0%	NA	\$6,866	NA
ASD/PFO closure			5194	93580	NA	\$17,957	\$18,729	4.3%	NA	NA	NA	
ASD			5194	93580	NA	\$17,957	\$18,729	4.3%	NA	NA	NA	
VSD			5194	93581	NA	\$17,957	\$18,729	4.3%	NA	NA	NA	
Chronic Pain	Spinal Cord Stimulation and DRG Stimulation	PDA closure	5194	93582	NA	\$17,957	\$18,729	4.3%	NA	NA	NA	
		Single Lead Trial: percutaneous	5462	63650	NA	\$6,563	\$6,511	-0.8%	\$5,084	\$5,031	-1.0%	
		Dual Lead Trial: percutaneous	5462	63650	NA	\$6,563	\$6,511	-0.8%	\$10,168	\$10,062	-1.0%	
		Surgical Lead Trial	5464	63655	NA	\$21,444	\$19,820	-7.6%	\$18,105	\$14,406	-20.4%	
		Full System - Single lead - Percutaneous	5465	63685	NA	\$30,474	\$31,526	3.5%	\$31,366	\$32,517	3.7%	
		Full System - Dual Lead - Percutaneous	5465	63685	NA	\$30,474	\$31,526	3.5%	\$36,450	\$37,548	3.0%	
		Full System IPG - Laminectomy	5465	63685	NA	\$30,474	\$31,526	3.5%	\$44,387	\$41,892	-5.6%	
		IPG implant or replacement	5465	63685	NA	\$30,474	\$31,526	3.5%	\$26,282	\$27,486	4.6%	
		Single lead	5462	63650	NA	Packaged	Packaged	NA	\$5,084	\$5,031	-1.0%	
	Dual lead	5462	63650	NA	Packaged	Packaged	NA	\$5,084	\$5,031	-1.0%		
	Analysis of IPG, Simple Programming	5742	95971	NA	\$92	\$97	5.4%	NA	NA	NA		
	Peripheral Nerve Stimulation	Full System - Single lead - Percutaneous	Full System - Single lead - Percutaneous	5464	64590	NA	\$21,444	\$19,820	-7.6%	\$19,672	\$16,224	-17.5%
			Full System - Dual Lead - Percutaneous	5462	64555	NA	\$6,563	\$6,511	-0.8%	\$5,853	\$5,775	-1.3%
			Full System - Dual Lead - Percutaneous	5464	64590	NA	\$21,444	\$19,820	-7.6%	\$19,672	\$16,224	-17.5%
			Full System - Dual Lead - Percutaneous	5462	64555	NA	\$6,563	\$6,511	-0.8%	\$5,853	\$5,775	-1.3%
			IPG replacement	5464	64590	NA	\$21,444	\$19,820	-7.6%	\$19,672	\$16,224	-17.5%
	RF Ablation	Cervical Spine / Thoracic Spine	Cervical Spine / Thoracic Spine	5431	64633	NA	\$1,953	\$1,995	2.2%	\$925	\$949	2.6%
			Lumbar Spine	5431	64635	NA	\$1,953	\$1,995	2.2%	\$925	\$949	2.6%
Other Peripheral Nerves			5443	64640	NA	\$890	\$904	1.6%	\$170	\$197	15.9%	
Radiofrequency Ablation			5431	64625	NA	\$1,953	\$1,995	2.2%	\$925	\$949	2.6%	
Movement Disorders	DBS	IPG Placement - Single Array	5465	61885	NA	\$21,444	\$31,526	47.0%	\$20,102	\$27,985	39.2%	
		IPG Placement - Two Single Array IPGs	5465	61885	NA	\$21,444	\$31,526	47.0%	\$20,102	\$27,985	39.2%	
			5465	61885	NA	\$21,444	\$31,526	47.0%	\$20,102	\$27,985	39.2%	
		IPG Placement - Dual Array	5465	61886	NA	\$30,474	\$31,526	3.5%	\$26,290	\$27,402	4.2%	
		Analysis of IPG, No Programming	5734	95970	NA	\$129	\$136	5.4%	NA	NA	NA	
		Analysis of IPG, Simple Programming; first 15 Min	5742	95983	NA	\$92	\$97	5.4%	NA	NA	NA	
Analysis of IPG, Simple Programming; additional 15 Min		95984	NA	NA	NA	NA	NA	NA	NA			

Disclaimer

This material and the information contained herein is for general information purposes only and is not intended, and does not constitute, legal, reimbursement, business, clinical, or other advice. Furthermore, it is not intended to and does not constitute a representation or guarantee of reimbursement, payment, or charge, or that reimbursement or other payment will be received. It is not intended to increase or maximize payment by any payer. Abbott makes no express or implied warranty or guarantee that the list of codes and narratives in this document is complete or error-free. Similarly, nothing in this document should be viewed as instructions for selecting any particular code, and Abbott does not advocate or warrant the appropriateness of the use of any particular code. The ultimate responsibility for coding and obtaining payment/reimbursement remains with the customer. This includes the responsibility for accuracy and veracity of all coding and claims submitted to third-party payers. In addition, the customer should note that laws, regulations, and coverage policies are complex and are updated frequently and is subject to change without notice. The customer should check with its local carriers or intermediaries often and should consult with legal counsel or a financial, coding, or reimbursement specialist for any questions related to coding, billing, reimbursement, or any related issues. This material reproduces information for reference purposes only. It is not provided or authorized for marketing use.

Sources:

1. CY2025 Hospital Outpatient Prospective Payment-Final Rule with Comment: <https://www.cms.gov/medicare/payment/prospective-payment-systems/hospital-outpatient/regulations-notices/cms-1809-fc>
2. CY2025 Ambulatory Surgical Center Payment-Final Rule Payment Rates: <https://www.cms.gov/medicare/payment/prospective-payment-systems/ambulatory-surgical-center-asc/asc-regulations-and/cms-1809-fc>
3. CY2026 Hospital Outpatient Prospective Payment-Final Rule with Comment: <https://www.cms.gov/medicare/payment/prospective-payment-systems/hospital-outpatient/regulations-notices/cms-1834-fc>
4. CY2026 Ambulatory Surgical Center Payment-Final Rule Payment Rates: <https://www.cms.gov/medicare/payment/prospective-payment-systems/ambulatory-surgical-center-asc/asc-regulations-and-notices/cms-1834-fc>
5. CY 2026 OPps and ASC Final Rule CMS-1834-FC - Hospital Price Transparency Policy Changes: <https://www.cms.gov/newsroom/fact-sheets/cy-2026-opps-ambulatory-surgical-center-final-rule-hospital-price-transparency-policy-changes>

CAUTION: Product(s) intended for use by or under the direction of a physician. Prior to use, reference to the Instructions for Use, inside the product carton (when available) or at <https://www.eifu.abbott/> for more detailed information on Indications, Contraindications, Warnings, Precautions and Adverse Events.

Information contained herein for **DISTRIBUTION** in the U.S. ONLY.

Abbott

One St. Jude Medical Dr., St. Paul, MN 55117, USA, Tel: 1 651 756 2000

™ Indicates a trademark of the Abbott group of companies.

‡ Indicates a third party trademark, which is property of its respective owner.

www.cardiovascular.abbott

©2026 Abbott. All rights reserved. MAT-1901573 v8.0.

HE&R approved for non-promotional use only.

