

VASCULAR

# HCPCS DEVICE CATEGORY C-CODES CODING GUIDE

2024



# HCPCS DEVICE CATEGORY C-CODES

## INTRODUCTION

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The Medicare Hospital Outpatient Prospective Payment System (OPPS) requires providers to report device category C-codes on claims in order to improve the claims data used to annually update the OPPS payment rates. Based on the CY2020 OPPS Final Rule, CMS will no longer implement specific procedure-to-device or device-to-procedure edits for any APCs. Instead, CMS has created claims processing edits that require any device codes used in previous device-to-procedure edits to be included on claims that include procedure codes assigned to device-dependent APCs.

## HCPCS AND REVENUE CODES

Level II HCPCS codes, including C-codes are used in conjunction with the Medicare prospective payment system for outpatient procedures only.

Revenue codes help hospitals categorize services provided by revenue center. Medicare utilizes revenue codes for cost reporting purposes. For Medicare, revenue codes must be included for each service on a CMS 1450 (UB-04) claim form. It may be appropriate for hospitals to capture the cost of products used for the procedures described above within Revenue Code 0278 (Medical/Surgical Supply – Other Implant) or Revenue Code 0360 (Operating Room Services - General). Health Care Common Procedural Coding System (HCPCS) codes include level I codes (CPT<sup>®</sup> Code, described above) and level II codes (other products, supplies, and services not included in CPT<sup>®</sup> Code).

VASCULAR CATEGORY C-CODES

C-CODE	DEVICE
CATHETER, TRANSLUMINAL ATHERECTOMY, ROTATIONAL	
C1724	Diamondback 360 Peripheral Orbital Atherectomy System
	Diamondback 360 Peripheral Orbital Atherectomy System, Exchangeable Series
	Diamondback 360 Coronay Orbital Atherectomy System
	Stealth 360 Peripheral Orbital Atherectomy System
CATHETERS, TRANSLUMINAL, ANGIOPLASTY, NON-LASER (MAY INCLUDE GUIDANCE, INFUSION/PERFUSION CAPABILITY)	
C1725	Armada PTA Catheter (14, 35, 35 LL)
	Fox Plus PTA Catheter
	Fox sv PTA Catheter
	FoxCross .035 PTA Catheter
	JADE PTA Balloon Catheter
	MINI TREK/ MINI TREK II Coronary Dilatation Catheter (RX/OTW)
	NC TREK Coronary Dilatation Catheter (OTW/RX)
	TREK Coronary Dilatation Catheter (RX / OTW)
	Teleport Microcatheter
	Sapphire NC Plus and Sapphire NC24 Coronary Balloon Dilation Catheter
	Sapphire PRO Ballon Dilatation
	Scoreflex NC Scoring PTCA Catheter
	Viatrac 14 Plus Peripheral Dilatation Catheter
	ViperCross Support Catheter
	VIPERCATH XC Peripheral Exchange Catheter

VASCULAR CATEGORY C-CODES

C-CODE	DEVICE
CATHETERS, THROMBECTOMY / EMBOLECTOMY	
C1757	JETi AIO Peripheral thrombectomy System
CLOSURE DEVICE, VASCULAR (IMPLANTABLE/INSERTABLE)	
C1760	Perclose A-T Suture-Mediated Closure System
	Perclose ProGlide Suture-Mediated Closure System
	Perclose ProStyle Suture-Mediated Closure System
	Prostar XL10F Percutaneous Vascular Surgical System
	Starclose SE Vascular Closure System
GUIDEWIRE	
C1769	AMPLATZER™ Guidewire 9-GW-001, 9-GW-002, 9-GW-003, 9GW-004
	PressureWire™ 12006, 12306, 12056, 12356, 12058, 12358
	Command Guide Wire (Hi-Torque Guide Wire)
	Connect Guide Wire (Hi-Torque Guide Wire)
	FLEX-T Guide Wire system
	BareWire Filter Delivery Wires
	Shepherd™ Perpheral Guidewires
	Spartacore Peripheral Guide Wire (Hi-Torque Guide Wire)
	Steelcore Peripheral Guide Wire (Hi-Torque Guide Wire)
	Supra Core Peripheral Guide Wire (Hi-Torque Guide Wire)
	Surepath Guidewire
	Viper Wire Advance Guidewire and ViperWire Advance with Flex Tip Guidewide (to be used with the Diamonback 360 and Stealth 360 Systems)
	Zilient Peripheral Guidewire



VASCULAR CATEGORY C-CODES

C-CODE	DEVICE
STENT, COATED/COVERED, WITH DELIVERY SYSTEM	
C1874	Esprit™ BTK Everolimus Eluting Resorbable Scaffold
	GRAFTMASTER RX Coronary Stent Graft System
	JOSTENT GRAFTMASTER Coronary Stent Graft System
	XIENCE Alpine Everolimus Eluting Coronary Stent System (RX/OTW)
	XIENCE Sierra Everolimus Eluting Coronary Stent System (RX/OTW)
	XIENCE Skypoint Everolimus Eluting Coronary Stent System (RX/OTW)
	XIENCE Xpedition Everolimus Eluting Coronary Stent System (RX)
	JOSTENT GRAFTMASTER Coronary Stent Graft System (HUD)
STENT, NON-COATED/NON-COVERED, WITH DELIVERY SYSTEM	
C1876	Absolute Pro Vascular Self-Expanding Stent System (OTW)
	Acculink Carotid Stent System (RX)
	Herculink Elite Renal Stent System (RX)
	MULTI-LINK MINI VISION Coronary Stent System (/RX)
	MULTI-LINK ULTRA Coronary Stent System (/RX)
	Omnilink Elite Vascular Balloon-Expandable Stent System
	Supera Peripheral Stent System
	Xact Carotid Stent System
EMBOLIZATION PROTECTION SYSTEM	
C1884	Accunet Embolic Protection System (RX)
	Emboshield NAV6 Embolic Protection System

VASCULAR CATEGORY C-CODES

C-CODE	DEVICE
CATHETER, GUIDING (MAY INCLUDE INFUSION/PERFUSION CAPABILITY)	
	Teleport Microcatheter
C1887	VIPERCATH XC Peripheral Exchange Catheter
	ViperCross Support Catheter
INTRODUCER/SHEATH,OTHER THAN GUIDING, OTHER THAN INTRACARDIAC, ELECTROPHYSIOLOGICAL, NONLASER	
C1894	Guide Wire Introducer
CATHETER, TRANSLUMINAL, ANGIOPLASTY, NON-LASER	
C2623	SurVeil Drug-Coated Balloon

**REFERENCE:**

CMS, 2020 Alpha-Numeric Index HCPCS file: <https://www.cms.gov/Medicare/Coding/HCPCSReleaseCodeSets/Alpha-Numeric-HCPCS-Items/2020-Alpha-Numeric-HCPCS-File>

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