HEALTH ECONOMICS & REIMBURSEMENT

SURGICAL HEART VALVES CODING GUIDE

Hospital Inpatient

Effective October 1, 2026 to September 30, 2027

Hospital Outpatient and Physician

Effective January 1, 2026 to December 31, 2026

MAT-2600953 v18

TABLE OF CONTENTS

OVERVIEW 3
HOSPITAL INPATIENT 4
PHYSICIAN 5
RESOURCES 6
Acronym Definitions 6

OVERVIEW

This content is intended to provide reference material related to general guidelines for reimbursement when used consistently with the product's labeling. This content includes information regarding coverage, coding and reimbursement.

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, therefore, 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.

IMPORTANT NOTE

Medicare participation varies by provider. The payment rates shown are the National Average Medicare payment rates. Reimbursement listed may not apply to all institutions despite Medicare participation.

REIMBURSEMENT SUPPORT

REIMBURSEMENT HOTLINE

Abbott offers a reimbursement hotline, which provides live coding and reimbursement information from dedicated reimbursement specialists. Coding and reimbursement assistance is provided subject to the disclaimers set forth in this guide.

8 a.m. to 5 p.m. CT, Monday – Friday
Call (855) 569-6430
Email hce@abbott.com

This content and supporting documents are available at
www.cardiovascular.abbott/us/en/hcp/reimbursement

REIMBURSEMENT FIELD TEAM

To contact a reimbursement specialist for coverage, coding or payment questions, scan the QR code or send an email to abbotteconomics@abbott.com.

HOSPITAL INPATIENT[1]

Effective October 1, 2026 to September 30, 2027

MEDICARE NATIONAL AVERAGE REIMBURSEMENT INFORMATION

The rates in the table below are the national average reimbursement rates.[1] For hospital specific rates, please contact your local Abbott representative.

TYPICAL MS-DRG	MEDICARE RATE
CARDIAC VALVE AND OTHER MAJOR CARDIOTHORACIC PROCEDURES WITH CARDIAC CATHETERIZATION	
216 with MCCs	$73,020
217 without CCs	$50,284
218 without MCCs	$50,284
CARDIAC VALVE AND OTHER MAJOR CARDIOTHORACIC PROCEDURES WITHOUT CARDIAC CATHETERIZATION	
219 with MCCs	$56,455
220 with CCs	$40,685
221 without CC/MCC	$34,827
CONCOMITANT AORTIC AND MITRAL VALVE PROCEDURES	
212	$84,542
Note: 212 - This new diagnosis related group (DRG) includes hospital stays with combined surgical atrioventricular (AV) repair/replacement + surgical mitral valve (MV) repair/replacement + third procedure (e.g. coronary artery bypass grafting (CABG), tricuspid)	

INPATIENT ONLY PROCEDURE

Surgical heart valve procedures are not allowed in outpatient or non-facility settings. In addition, there is no designated ambulatory payment classification (APC) payment for surgical heart valve procedures nor a C-Code for surgical heart valve procedures.

PROCEDURE CODES[2]

ICD-10-PCS CODE	DESCRIPTION
SURGICAL HEART VALVES AND ANNULOPLASTY RINGS	
02QF0ZZ	Repair aortic valve, open approach
02UF0JZ	Supplement aortic valve with synthetic substitute, open approach
02QG0ZZ	Repair mitral valve, open approach
02UG0JZ	Supplement mitral valve with synthetic substitute, open approach
02QJ0ZZ	Repair tricuspid valve, open approach
02UJ0JZ	Supplement tricuspid valve with synthetic substitute, open approach
02RF0JZ	Replacement of aortic valve with synthetic substitute, open approach
02RF08Z	Replacement of aortic valve with zooplastic tissue, open approach
02RG0JZ	Replacement of mitral valve with synthetic substitute, open approach
02RG08Z	Replacement of mitral valve with zooplastic tissue, open approach

PHYSICIAN[3]

Effective January 1, 2026 to December 31, 2026

PHYSICIAN IMPLANTER[3]		PHYSICIAN		
CPT‡ CODE[4]	DESCRIPTION	WORK RVU	FACILITY RATE	OFFICE RATE
SURGICAL HEART VALVES AND ANNULOPLASTY RINGS				
33405	Replacement, aortic valve, open, with cardiopulmonary bypass; with prosthetic valve other than homograft or stentless valve	40.29	$2,125	NA
33425	Valvuloplasty, mitral valve, with cardiopulmonary bypass	48.71	$2,549	NA
33426	Valvuloplasty, mitral valve, with cardiopulmonary bypass; with prosthetic ring	42.20	$2,231	NA
33427	Valvuloplasty, mitral valve, with cardiopulmonary bypass; radical reconstruction, with or without ring	43.71	$2,273	NA
33430	Replacement, mitral valve, with cardiopulmonary bypass	49.66	$2,622	NA
33464	Valvuloplasty, tricuspid valve, with ring insertion	43.50	$2,272	NA

NA: There is no established Medicare payment in this setting

RESOURCES

ACRONYM DEFINITIONS

ACRONYM	DEFINITION
APC	Ambulatory Payment Classification
AV	Atrioventricular
CC	Complications or Comorbidities
CMS	Centers for Medicare & Medicaid Services
CPT‡	Current Procedural Terminology
DRG	Diagnosis Related Group
MCC	Major Complications or Comorbidities
MS-DRG	Medicare Severity Diagnosis Related Group
MV	Mitral Valve

REFERENCES

1. Hospital Inpatient Prospective Payment-Final Rule Home Page FY 2027 CMS-1849-F. https://www.cms.gov/medicare/payment/prospective-payment-systems/acute-inpatient-pps/fy-2027-ipps-final-rule-home-page
2. CMS 2027 ICD-10-PCS. https://www.cms.gov/files/document/2027-official-icd-10-pcs-coding-guidelines.pdf
3. Revisions to Payment Policies under the Medicare Physician Fee Schedule, Quality Payment Program and Other Revisions to Part B for CY 2026. CMS-1832-F. https://www.cms.gov/medicare/payment/fee-schedules/physician/federal-regulation-notices/cms-1832-f
4. CPT‡ Coding Guidelines. American Medical Association. https://www.ama-assn.org/

CAUTION: This product is intended for use by or under the direction of a physician. Prior to use, reference the Instructions for Use, inside the product carton (when available) or at manuals.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
3200 Lakeside Dr., Santa Clara, CA 95054 USA, Tel: 1 800 277 9902
www.cardiovascular.abbott

Abbott