

HEALTH ECONOMICS & REIMBURSEMENT

CORONARY CODING GUIDE

Hospital Inpatient

Effective October 1, 2026 to September 30, 2027

Hospital Outpatient, Ambulatory Surgical Center, Physician

Effective January 1, 2026 to December 31, 2026

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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

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NATIONAL MEDICARE PAYMENT RATES

The payment rates shown are the National Average Medicare payment rates for all sites of service.

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

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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.



MEDICARE

NATIONAL COVERAGE DETERMINATION

National Coverage Determination (NCD) 20.7, section B1, covers percutaneous transluminal angioplasty (PTA) for the treatment of atherosclerotic obstructive lesions of a single coronary artery for patients whom the likely alternative treatment is coronary bypass surgery and who exhibit the following characteristics:

- Angina refractory to optimal medical management;
- Objective evidence of myocardial ischemia; and
- Lesions amenable to angioplasty

See detailed information through the following link:

www.cms.gov/medicare-coverage-database/view/ncd.aspx?NCDId=201

There is currently no Medicare National Coverage Determination (NCD) for coronary atherectomy and stenting.

LOCAL COVERAGE DETERMINATION

Local Medicare Administrative Contractors (MACs) may have their own coverage policies for percutaneous coronary interventions and revascularization procedures. Please contact your local Medicare Contractor for information on their specific coverage policies for interventional cardiology. Most local Medicare Contractors, Fiscal Intermediaries and/or Carriers have posted their Local Coverage Determinations (LCD) on interventional cardiology on their websites.

L34761 Percutaneous Coronary Interventions (PCI) at [LCD - Percutaneous Coronary Interventions \(L34761\)](#) and A57479 Billing and Coding: Percutaneous Coronary Interventions at [Article - Billing and Coding: Percutaneous Coronary Interventions \(A57479\)](#) are applicable to Wisconsin Physician Service Insurance Corporation (WPS) for the following states:

- Iowa, Indiana, Kansas, Michigan, Missouri, Nebraska

L33623 Percutaneous Coronary Intervention at [LCD - Percutaneous Coronary Intervention \(L33623\)](#) and A56823 Billing and Coding: Percutaneous Coronary Intervention [Article - Billing and Coding: Percutaneous Coronary Intervention \(A56823\)](#) are applicable to National Government Services, Inc. (NGS) for the following states:

- Connecticut, Illinois, Maine, Montana, Minnesota, New Hampshire, New York, Rhode Island, Vermont, Wisconsin

Percutaneous coronary intervention (PCI) may be indicated in the management of:

- patients with acute coronary syndrome (eg acute myocardial infarction, unstable angina)
- patients with a history of significant obstructive atherosclerotic disease
- patients with restenosis of a coronary artery previously treated with intracoronary stent or other revascularization procedure
- patients with chronic angina
- patients with silent ischemia

MEDICARE ADVANTAGE AND COMMERCIAL PAYERS

Medicare Advantage plans are required to follow Medicare coverage policies, such as NCD or LCD. Please reach out directly to Medicare Advantage plan administrators to understand any specific prior authorization/pre-certification requirements that may apply.

Commercial payers plans vary significantly in coverage and compliance requirements. Commercial payers should be consulted in advance of the procedure to verify terms and conditions of coverage.

HOSPITAL INPATIENT¹

Effective October 1, 2026 to September 30, 2027

PROCEDURE	TYPICAL MS-DRG	DESCRIPTION	MS-DRG RATE
CORONARY PCI WITHOUT INTRALUMINAL DEVICE (STENT)	250	Percutaneous cardiovascular procedures without intraluminal device with MCC	\$17,284
	251	Percutaneous cardiovascular procedures without intraluminal device without MCC	\$12,295
	318	Percutaneous coronary atherectomy without intraluminal device	\$19,347
	325	Coronary intravascular lithotripsy without intraluminal device	\$24,645
CORNARY PCI WITH INTRALUMINAL DEVICE (STENT)	321	Percutaneous cardiovascular procedures with intraluminal device with MCC or 4+ arteries/ intraluminal devices	\$20,059
	322	Percutaneous cardiovascular procedures with intraluminal device without MCC	\$13,114
	323	Coronary intravascular lithotripsy with intraluminal device with MCC	\$32,773
	324	Coronary intravascular lithotripsy with intraluminal device without MCC	\$23,578
	359	Percutaneous coronary atherectomy with intraluminal device with MCC	\$24,964
	360	Percutaneous coronary atherectomy with intraluminal device without MCC	\$17,290

Disclaimer: This is not an all-inclusive list of possible MS-DRGs. MS-DRG assignment is based on many factors including documented patient conditions, as well as services rendered during an inpatient admission.

HOSPITAL OUTPATIENT-ASC-PHYSICIAN²⁻⁴

Effective January 1, 2026 to December 31, 2026

		HOSPITAL OUTPATIENT			ASC			PHYSICIAN		
CPT [†] & HCPCS CODE ⁵	DESCRIPTION	SI	APC	APC RATE	PI	MPPR	ASC RATE	WORK RVU	FACILITY RATE	OFFICE RATE
CORONARY PCI WITHOUT INTRALUMINAL DEVICE (STENT)										
92920	Percutaneous transluminal coronary angioplasty; single major coronary artery and/or its branch(es)	J1	5192	\$5,815	J8	Yes	\$3,849	8.14	\$387	NA
92924	Percutaneous transluminal coronary atherectomy, with coronary angioplasty when performed; single major coronary artery and/or its branch(es)	J1	5193	\$11,794	J8	Yes	\$8,448	9.88	\$469	NA
CORONARY PCI WITH INTRALUMINAL DEVICE (STENT)										
92928	Percutaneous transcatheter placement of intracoronary stent(s), with coronary angioplasty when performed; single major coronary artery and/or its branch(es); 1 lesion involving 1 or more coronary segments	J1	5193	\$11,794	J8	Yes	\$7,309	9.75	\$463	NA
92930	Percutaneous transcatheter placement of intracoronary stent(s), with coronary angioplasty when performed, single major coronary artery and/or its branch(es); 2 or more distinct coronary lesions with 2 or more coronary stents deployed in 2 or more coronary segments, or a bifurcation lesion requiring angioplasty and/or stenting in both the main artery and the side branch	J1	5194	\$18,729	J8	Yes	\$12,842	12.00	\$505	NA
92933	Percutaneous transluminal coronary atherectomy, with intracoronary stent, with coronary angioplasty when performed; single major coronary artery and/or its branch(es)	J1	5194	\$18,729	J8	Yes	\$12,965	11.64	\$553	NA
92937	Percutaneous transluminal revascularization of or through coronary artery bypass graft (internal mammary, free arterial, venous), any combination of intracoronary stent, atherectomy and angioplasty, including distal protection when performed; single major coronary artery and/or its branch(es)	J1	5193	\$11,794	J8	Yes	\$7,423	11.02	\$524	NA
92941	Percutaneous transluminal revascularization of acute total/subtotal occlusion during acute myocardial infarction, any combination of intracoronary stent, atherectomy and angioplasty, including aspiration thrombectomy when performed, single major coronary artery and/or its branches or single bypass graft and/or its subtended branches	C	Not paid under OPPI			Not paid in ASC		12.40	\$589	NA
92943	Percutaneous transluminal revascularization of chronic total occlusion, single coronary artery, coronary artery branch, or coronary artery bypass graft, and/or subtended major coronary artery branches of the bypass graft, any combination of intracoronary stent, atherectomy and angioplasty; antegrade approach	J1	5193	\$11,794	J8	Yes	\$7,883	13.35	\$634	NA
92945	Percutaneous transluminal revascularization of chronic total occlusion, single coronary artery, coronary artery branch, or coronary artery bypass graft, and/or subtended major coronary artery branches of the bypass graft, any combination of intracoronary stent, atherectomy and angioplasty; combined antegrade and retrograde approaches	J1	5193	\$11,794	J8	Yes	\$7,438	15.00	\$632	NA
C9600	Percutaneous transcatheter placement of drug eluting intracoronary stent(s), with coronary angioplasty when performed; single major coronary artery or branch	J1	5193	\$11,794	J8	Yes	\$7,500	NA		
+C9601	Percutaneous transcatheter placement of drug-eluting intracoronary stent(s), with coronary angioplasty when performed; each additional branch of a major coronary artery (list separately in addition to code for primary procedure)	N	NA	Packaged	N1	No	Packaged	NA		

(+): Indicates add-on code. List add-on code separately in addition to code for primary procedure

MPPR: Multiple procedure payment reduction

NA: There is no established Medicare payment in this setting

PI: Payment indicator

SI: Status indicator

C: Inpatient procedures

J1: Hospital part B services paid through a comprehensive APC

J8: Device-intensive procedure; paid at adjusted rate

N1: Packaged service/item; no separate payment made

HOSPITAL OUTPATIENT-ASC-PHYSICIAN²⁻⁴

Effective January 1, 2026 to December 31, 2026

		HOSPITAL OUTPATIENT			ASC			PHYSICIAN		
CPT [†] & HCPCS CODE ⁵	DESCRIPTION	SI	APC	APC RATE	PI	MPPR	ASC RATE	WORK RVU	FACILITY RATE	OFFICE RATE
CORONARY PCI WITH INTRALUMINAL DEVICE (STENT) CONTINUED										
C9602	Percutaneous transluminal coronary atherectomy, with drug eluting intracoronary stent, with coronary angioplasty when performed; single major coronary artery or branch	J1	5194	\$18,729	J8	Yes	\$13,206	NA		
+C9603	Percutaneous transluminal coronary atherectomy, with drug-eluting intracoronary stent, with coronary angioplasty when performed; each additional branch of a major coronary artery (list separately in addition to code for primary procedure	N	NA	Packaged	N1	No	Packaged	NA		
C9604	Percutaneous transluminal revascularization of or through coronary artery bypass graft (internal mammary, free arterial, venous), any combination of drug-eluting intracoronary stent, atherectomy and angioplasty, including distal protection when performed; single vessel	J1	5193	\$11,794	J8	Yes	\$7,354	NA		
+C9605	Percutaneous transluminal revascularization of or through coronary artery bypass graft (internal mammary, free arterial, venous), any combination of drug-eluting intracoronary stent, atherectomy and angioplasty, including distal protection when performed; each additional branch subtended by the bypass graft (list separately in addition to code for primary procedure	N	NA	Packaged	N1	N	Packaged			
C9606	Percutaneous transluminal revascularization of acute total/ subtotal occlusion during acute myocardial infarction, coronary artery or coronary artery bypass graft, any combination of drug-eluting intracoronary stent, atherectomy and angioplasty, including aspiration thrombectomy when performed, single vessel	C	Not paid under OPPS		Not paid in ASC			NA		
C9607	Percutaneous transluminal revascularization of chronic total occlusion, coronary artery, coronary artery branch, or coronary artery bypass graft, any combination of drug-eluting intracoronary stent, atherectomy and angioplasty; single vessel	J1	5194	\$18,729	J8	Yes	\$12,790	NA		
+C9608	Percutaneous transluminal revascularization of chronic total occlusion, coronary artery, coronary artery branch, or coronary artery bypass graft, any combination of drug-eluting intracoronary stent, atherectomy and angioplasty; each additional coronary artery, coronary artery branch, or bypass graft (list separately in addition to code for primary procedure)	N	NA	Packaged	N1	No	Packaged			
ADDITIONAL CORONARY INTERVENTIONS										
+92972	Percutaneous transluminal coronary lithotripsy (List separately in addition to code for primary procedure)	N	NA	Packaged	NA			2.9	\$122	NA
0913T	Percutaneous transcatheter therapeutic drug delivery by intracoronary drug-delivery balloon (eg, drug-coated, drug-eluting), including mechanical dilation by nondrug-delivery balloon angioplasty, endoluminal imaging using intravascular ultrasound (IVUS) or optical coherence tomography (OCT) when performed, imaging supervision, interpretation, and report, single major coronary artery or branch	J1	5193	\$11,794	J8	Yes	\$7,438	Carrier Priced		

(+) : Indicates add-on code. List add-on code separately in addition to code for primary procedure

MPPR: Multiple procedure payment reduction

NA: There is no established Medicare payment in this setting

PI: Payment indicator

SI: Status indicator

C: Inpatient procedures

J1: Hospital part B services paid through a comprehensive APC

J8: Device-intensive procedure; paid at adjusted rate

N: Items or services packaged into APC rates

N1: Packaged service/item; no separate payment made

HOSPITAL OUTPATIENT-ASC-PHYSICIAN²⁻⁴

Effective January 1, 2026 to December 31, 2026

		HOSPITAL OUTPATIENT			ASC			PHYSICIAN		
CPT ⁺ & HCPCS CODE ⁵	DESCRIPTION	SI	APC	APC RATE	PI	MPPR	ASC RATE	WORK RVU	FACILITY RATE	OFFICE RATE
ADDITIONAL CORONARY INTERVENTIONS CONTINUED										
+0914T	Percutaneous transcatheter therapeutic drug delivery by intracoronary drug-delivery balloon (eg, drug-coated, drug-eluting) performed on a separate target lesion from the target lesion treated with balloon angioplasty, coronary stent placement or coronary atherectomy, including mechanical dilation by nondrug-delivery balloon angioplasty, endoluminal imaging using intravascular ultrasound (IVUS) or optical coherence tomography (OCT) when performed, imaging supervision, interpretation, and report, single major coronary artery or branch (List separately in addition to code for percutaneous coronary stent or atherectomy intervention)	N	NA	Packaged	N1	No	Packaged	Carrier Priced		
ANGIOGRAPHY / DIAGNOSTIC CARDIAC CATHETERIZATION										
93454	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation	J1	5191	\$3,312	G2	Yes	\$1,708	4.43	\$233	\$878
93455	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) including intraprocedural injection(s) for bypass graft angiography	J1	5191	\$3,312	G2	Yes	\$1,708	5.16	\$272	\$980
93456	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with right heart catheterization	J1	5191	\$3,312	G2	Yes	\$1,708	5.75	\$303	\$1,095
93457	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) including intraprocedural injection(s) for bypass graft angiography and right heart catheterization	J1	5191	\$3,312	G2	Yes	\$1,708	6.47	\$341	\$1,194
93458	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed	J1	5191	\$3,312	G2	Yes	\$1,708	5.46	\$287	\$1,011
93459	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed, catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) with bypass graft angiography	J1	5191	\$3,312	G2	Yes	\$1,708	6.19	\$326	\$1,088
93460	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with right and left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed	J1	5191	\$3,312	G2	Yes	\$1,708	6.92	\$364	\$1,206

(+): Indicates add-on code. List add-on code separately in addition to code for primary procedure

MPPR: Multiple procedure payment reduction

NA: There is no established Medicare payment in this setting

PI: Payment indicator

SI: Status indicator

J1: Hospital part B services paid through a comprehensive APC

G2: Non-office-based surgical procedure added in CY 2008 or later; payment based on OPFS relative payment weight

N1: Packaged service/item; no separate payment made

HOSPITAL OUTPATIENT-ASC-PHYSICIAN²⁻⁴

Effective January 1, 2026 to December 31, 2026

		HOSPITAL OUTPATIENT			ASC			PHYSICIAN		
CPT [†] & HCPCS CODE ⁵	DESCRIPTION	SI	APC	APC RATE	PI	MPPR	ASC RATE	WORK RVU	FACILITY RATE	OFFICE RATE
ANGIOGRAPHY / DIAGNOSTIC CARDIAC CATHETERIZATION										
93461	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with right and left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed, catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) with bypass graft angiography	J1	5191	\$3,312	G2	Yes	\$1,708	7.65	\$402	\$1,330

MPPR: Multiple procedure payment reduction

PI: Payment indicator

SI: Status indicator

J1: Hospital part B services paid through a comprehensive APC

G2: Non-office-based surgical procedure added in CY 2008 or later; payment based on OPPS relative payment weight

HOSPITAL OUTPATIENT-ASC-PHYSICIAN²⁻⁴

Effective January 1, 2026 to December 31, 2026

		ASC		
CPT [†] & HCPCS CODE ⁵	DESCRIPTION	PI	MPPR	ASC RATE
ANGIOGRAPHY WITH CORONARY PHYSIOLOGY				
C7519	Catheter placement in coronary artery(ies) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation, with catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) including intraprocedural injection(s) for bypass graft angiography with intravascular doppler velocity and/or pressure derived coronary flow reserve measurement (initial coronary vessel or graft) during coronary angiography including pharmacologically induced stress	G2	Yes	\$2,727
C7522	Catheter placement in coronary artery(ies) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation with right heart catheterization, with intravascular doppler velocity and/or pressure derived coronary flow reserve measurement (initial coronary vessel or graft) during coronary angiography including pharmacologically induced stress	G2	Yes	\$2,727
C7524	Catheter placement in coronary artery(ies) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation, with left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed, with intravascular doppler velocity and/or pressure derived coronary flow reserve measurement (initial coronary vessel or graft) during coronary angiography including pharmacologically induced stress	G2	Yes	\$2,727
C7526	Catheter placement in coronary artery(ies) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation, with left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed, catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) with bypass graft angiography with intravascular doppler velocity and/or pressure derived coronary flow reserve measurement (initial coronary vessel or graft) during coronary angiography including pharmacologically induced stress	G2	Yes	\$2,727
C7528	Catheter placement in coronary artery(ies) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation, with right and left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed, with intravascular doppler velocity and/or pressure derived coronary flow reserve measurement (initial coronary vessel or graft) during coronary angiography including pharmacologically induced stress	G2	Yes	\$2,727
C7529	Catheter placement in coronary artery(ies) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation, with right and left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed, catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) with bypass graft angiography with intravascular doppler velocity and/or pressure derived coronary flow reserve measurement (initial coronary vessel or graft) during coronary angiography including pharmacologically induced stress	G2	Yes	\$2,727
ANGIOGRAPHY WITH OCT/IVUS				
C7516	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, with endoluminal imaging of initial coronary vessel or graft using intravascular ultrasound (IVUS) or optical coherence tomography (OCT) during diagnostic evaluation and/or therapeutic intervention including imaging supervision, interpretation and report	G2	Yes	\$2,727
C7518	Catheter placement in coronary artery(ies) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation, with catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) including intraprocedural injection(s) for bypass graft angiography with endoluminal imaging of initial coronary vessel or graft using intravascular ultrasound (IVUS) or optical coherence tomography (OCT) during diagnostic evaluation and/or therapeutic intervention including imaging, supervision, interpretation and report	G2	Yes	\$2,727
C7521	Catheter placement in coronary artery(ies) for coronary angiography, including intraprocedural injection(s) for coronary angiography with right heart catheterization with endoluminal imaging of initial coronary vessel or graft using intravascular ultrasound (IVUS) or optical coherence tomography (OCT) during diagnostic evaluation and/or therapeutic intervention including imaging supervision, interpretation and report	G2	Yes	\$2,727
C7523	Catheter placement in coronary artery(ies) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation, with left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed, with endoluminal imaging of initial coronary vessel or graft using intravascular ultrasound (IVUS) or optical coherence tomography (OCT) during diagnostic evaluation and/or therapeutic intervention including imaging supervision, interpretation and report	G2	Yes	\$2,727

MPPR: Multiple procedure payment reduction

PI: Payment indicator

G2: Non-office-based surgical procedure added in CY 2008 or later; payment based on OPFS relative payment weight

HOSPITAL OUTPATIENT-ASC-PHYSICIAN²⁻⁴

Effective January 1, 2026 to December 31, 2026

		ASC		
CPT [‡] & HCPCS CODE ⁵	DESCRIPTION	PI	MPPR	ASC RATE
ANGIOGRAPHY WITH OCT/IVUS, CONTINUED				
C7525	Catheter placement in coronary artery(ies) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation, with left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed, catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) with bypass graft angiography with endoluminal imaging of initial coronary vessel or graft using intravascular ultrasound (IVUS) or optical coherence tomography (OCT) during diagnostic evaluation and/or therapeutic intervention including imaging supervision, interpretation and report	G2	Yes	\$2,727
C7527	Catheter placement in coronary artery(ies) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation, with right and left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed, with endoluminal imaging of initial coronary vessel or graft using intravascular ultrasound (IVUS) or optical coherence tomography (OCT) during diagnostic evaluation and/or therapeutic intervention including imaging supervision, interpretation and report	G2	Yes	\$2,727

MPPR: Multiple procedure payment reduction

PI: Payment indicator

G2: Non-office-based surgical procedure added in CY 2008 or later; payment based on OPPS relative payment weight

HOSPITAL OUTPATIENT-ASC-PHYSICIAN²⁻⁴

Effective January 1, 2026 to December 31, 2026

COMPLEXITY ADJUSTMENTS		HOSPITAL OUTPATIENT			PHYSICIAN*		
ADD-ON CPT [‡] CODE ⁵	ADD-ON CODE DESCRIPTION	SI	APC	APC RATE	WORK RVU	FACILITY RATE	OFFICE RATE
ANGIOGRAPHY WITH CORONARY PHYSIOLOGY (INITIAL VESSEL) CPT [‡] PRIMARY CODES 93454, 93455, 93456, 93458, 93459, 93460, 93461							
+93571	Intravascular Doppler velocity and/or pressure derived coronary flow reserve management (coronary vessel or graft) during coronary angiography, including pharmacologically induced stress, when performed; initial vessel (List separately in addition to code for primary procedure)	N	5192	\$5,815	1.76	\$93	Carrier Priced
ANGIOGRAPHY WITH CORONARY PHYSIOLOGY (INITIAL VESSEL) CPT [‡] PRIMARY CODES 93457							
+93571	Intravascular Doppler velocity and/or pressure derived coronary flow reserve management (coronary vessel or graft) during coronary angiography, including pharmacologically induced stress, when performed; initial vessel (List separately in addition to code for primary procedure)	N	5191	\$3,312	1.76	\$93	Carrier Priced
ANGIOGRAPHY WITH CORONARY PHYSIOLOGY (ADDITIONAL VESSEL) CPT [‡] PRIMARY CODES 93454, 93455, 93456, 93457, 93458, 93459, 93460, 93461							
+93572	Intravascular Doppler velocity and/or pressure derived coronary flow reserve management (coronary vessel or graft) during coronary angiography, including pharmacologically induced stress, when performed; each additional vessel (List separately in addition to code for primary procedure)	N	NA	Packaged	1.40	\$73	Carrier Priced
ANGIOGRAPHY WITH OCT/IVUS (INITIAL VESSEL) CPT [‡] PRIMARY CODES 93454, 93455, 93456, 93458, 93459, 93460							
+92978	Endoluminal imaging of coronary vessel or graft using intravascular ultrasound (IVUS) or optical coherence tomography (OCT) during diagnostic evaluation and/or therapeutic intervention including imaging supervision, interpretation and report; initial vessel (List separately in addition to code for primary procedure)	N	5192	\$5,815	1.76	\$93	Carrier Priced
ANGIOGRAPHY WITH OCT/IVUS (INITIAL VESSEL) CPT [‡] PRIMARY CODES 93457, 93461							
+92978	Endoluminal imaging of coronary vessel or graft using intravascular ultrasound (IVUS) or optical coherence tomography (OCT) during diagnostic evaluation and/or therapeutic intervention including imaging supervision, interpretation and report; initial vessel (List separately in addition to code for primary procedure)	N	5191	\$3,312	1.76	\$93	Carrier Priced
ANGIOPLASTY WITH OCT/IVUS (INITIAL VESSEL) CPT [‡] PRIMARY CODES 92920							
+92978	Endoluminal imaging of coronary vessel or graft using intravascular ultrasound (IVUS) or optical coherence tomography (OCT) during diagnostic evaluation and/or therapeutic intervention including imaging supervision, interpretation and report; initial vessel (List separately in addition to code for primary procedure)	N	5193	\$11,794	1.76	\$93	Carrier Priced
OCT/IVUS (ADDITIONAL VESSEL) CPT [‡] PRIMARY CODES 92920, 93454, 93455, 93456, 93457, 93458, 93459, 93460, 93461							
+92979	Endoluminal imaging of coronary vessel or graft using intravascular ultrasound (IVUS) or optical coherence tomography (OCT) during diagnostic evaluation and/or therapeutic intervention including imaging supervision, interpretation and report; each additional vessel (List separately in addition to code for primary procedure)	N	NA	Packaged	1.40	\$73	Carrier Priced

*Physician payment rate for add-on code only. There is separate physician payment for the primary procedure. When reporting physician claims in facility with +93571, +93572, +92978, and +92979, use -26 modifier. No modifier needed for physician claims in non-facility/ office.

(+): Indicates add-on code. List add-on code separately in addition to code for primary procedure

N: Items and services packaged into APC rates

NA: There is no established Medicare payment in this setting

SI: Status indicator

HCPCS⁶ CODES

Level II HCPCS codes, including C-codes, are used in conjunction with the Medicare Prospective Payment System for outpatient procedures only. Medicare Hospital Outpatient Prospective Payment System (OPPS) requires providers to report device category C-codes on claims to improve the claims data used to annually update the OPPS payment rates.

The codes below may be used to identify devices in coronary procedures. These are commonly reported under Revenue Code 0278 (Medical/Surgical Supplies and Devices-Other Implants).

Commercial/Private payers may utilize HCPCS codes and may reimburse separately per contractual arrangement with the hospital.

C-CODE	DESCRIPTION
C1724	Catheter, Transluminal, Atherectomy, Rotational
C1725	Catheter, Transluminal, Angioplasty, Non-Laser (May include guidance, infusion/perfusion capability)
C1760	Closure Device, Vascular (Implantable/Insertable)
C1769	Guidewire
C1874	Stent, Coated/Covered, with Delivery System
C1876	Stent, Non-Coated/Non-Covered, with Delivery System
C1884	Embolization Protection System
C1887	Catheter, Guiding (May include infusion/ perfusion capability)
C1889	Implantable/ Insertable Device, not otherwise classified
C1894	Introducer/ Sheath, other than guiding, other than intracardiac, electrophysiological, non-laser
C2623	Catheter, Transluminal, Angioplasty, Non-Laser

RESOURCES

ACRONYM DEFINITIONS

ACRONYM	DEFINITION
APC	Ambulatory Payment Classification
ASC	Ambulatory Surgical Center
CC	Complications or Comorbidities
CMS	Centers for Medicare & Medicaid Services
CPT [†]	Current Procedural Terminology
GHA	Government Health Administrators
HCPCS	Healthcare Common Procedure Coding System
LCD	Local Coverage Determination
MCC	Major Complications or Comorbidities
MPPR	Multiple Procedure Payment Reduction
MS-DRG	Medicare Severity Diagnosis Related Group
NCD	National Coverage Determination
PI	Payment Indicator
RVU	Relative Value Unit
SI	Status Indicator
WPS	Wisconsin Physician Service Insurance Corporation (WPS)

ICD-10-CM⁷ CODES

Diagnosis codes for all sites of service (e.g., Inpatient, Outpatient) ICD-10-CM codes. Coronary microvascular dysfunction (CMD) is formally recognized as a diagnosis through four ICD-10-CM codes. Refer to ICD-10-CM 2026: The Complete Official Codebook for comprehensive list of ICD-10-CM codes.

ICD-10-CM CODE	DESCRIPTION
I20.81	Angina pectoris with coronary microvascular dysfunction
I21.B	Myocardial infarction with coronary microvascular dysfunction
I24.81	Acute coronary microvascular dysfunction
I25.85	Chronic coronary microvascular dysfunction

RESOURCES

HOSPITAL INPATIENT PROCEDURE CODES

ICD-10-PCS⁸ TABLES

IMAGING

Section **B** Imaging
 Body System **2** Heart
 Type **3** Computerized Tomography (CT Scan): computer reformatted digital display of multiplanar images developed from the capture of multiple exposures of external ionizing radiation

Body	Contrast	Qualifier	Qualifier
1 Coronary Arteries, Multiple	Z None	2 Intravascular Optical Coherence	Z None

PHYSIOLOGY

Section **4** Measurement and Monitoring
 Body System **A** Physiological Systems
 Type **0** Measurement: Determining the level of a physiological or physical function at a point in time

Body	Approach	Device	Qualifier
3 Arterial	3 Percutaneous	B Pressure	C Coronary

DILATION

Section **0** Medical and Surgical
 Body System **2** Heart and Great Vessels
 Type **7** Dilation: Expanding an orifice or the lumen of tubular body

Body	Approach	Device	Qualifier
0 Coronary Artery, One Artery 1 Coronary Artery, Two Arteries 2 Coronary Artery, Three Arteries 3 Coronary Artery, Four or More Arteries	0 Open 3 Percutaneous 4 Percutaneous Endoscopic	4 Intraluminal Device, Drug-eluting 5 Intraluminal Device, Drug-eluting, Two 6 Intraluminal Device, Drug-eluting, Three 7 Intraluminal Device, Drug-eluting, Four or More D Intraluminal Device E Intraluminal Device, Two G Intraluminal Device, Four or More T Intraluminal Device, Radioactive Z No Device	6 Bifurcation Z No Qualifier

EXTIRPATION

Section **0** Medical and Surgical
 Body System **2** Heart and Great Vessels
 Type **C** Extirpation: Taking or cutting out solid matter from a body part

Body	Contrast	Qualifier	Qualifier
0 Coronary Artery, One Artery 1 Coronary Artery, Two Arteries 2 Coronary Artery, Three Arteries 3 Coronary Artery, Four or More Arteries	3 Percutaneous	Z No Device	6 Bifurcation 7 Orbital Atherectomy Technique Z No Qualifier

FRAGMENTATION

Section **4** Measurement and Monitoring
 Body System **A** Physiological Systems
 Type **0** Measurement: Determining the level of a physiological or physical function at a point in time

Body	Contrast	Qualifier	Qualifier
0 Coronary Artery, One Artery 1 Coronary Artery, Two Arteries 2 Coronary Artery, Three Arteries 3 Coronary Artery, Four or More Arteries	3 Percutaneous	Z No Device	6 Bifurcation 7 Orbital Atherectomy Technique Z No Qualifier

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3200 Lakeside Dr., Santa Clara, CA 95054 USA, Tel: 1 800 277 9902

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