

CORONARY PHYSIOLOGY OUTPATIENT CODING GUIDE

Effective Dates: January 1, 2025 to December 31, 2025

HOSPITAL OUTPATIENT VASCULAR AMBULATORY PAYMENT CLASSIFICATIONS (C-APCS) AND COMPLEXITY ADJUSTMENTS

Effective January 1, 2025

INTRODUCTION

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. Additional resources can be found at:

<https://www.cardiovascular.abbott/us/en/hcp/reimbursement/vas.html>

REIMBURSEMENT HOTLINE

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HOSPITAL OUTPATIENT VASCULAR AMBULATORY PAYMENT CLASSIFICATIONS (C-APCS) AND COMPLEXITY ADJUSTMENTS³

Centers for Medicare & Medicaid Services (CMS) adopted a C-APC payment policy effective CY2015. The C-APC payment policy makes a single payment for all related or adjunctive hospital items and services provided to a patient receiving certain primary procedures that take place in the hospital outpatient.¹ Hospital outpatient claims that contain at least one J1 procedure code are assigned to C-APCs.² C-APC claims that contain two or more J1 procedures or that contain certain add-on procedure codes may be eligible for complexity adjustments that promotes the claim to the next higher cost APC within the primary procedure’s clinical family.

Presented in the table below are CMS CY2025 National Reimbursement Rates for Endovascular Procedure C-APCs. These C-APCs apply to both coronary and peripheral vascular procedures.

CY2025 C-APC ²	DESCRIPTION	CY2025 CMS NATIONAL REIMBURSEMENT RATE
5191	Level 1 Endovascular Procedures	\$3,216
5192	Level 2 Endovascular Procedures	\$5,702

HOSPITAL OUTPATIENT VASCULAR AMBULATORY PAYMENT CLASSIFICATIONS (C-APCS) AND COMPLEXITY ADJUSTMENTS³

COMPLEXITY ADJUSTMENTS FOR CORONARY PHYSIOLOGY ASSESSMENTS

When certain Diagnostic Cardiac Catheterization procedures are performed in conjunction with fractional flow reserve (FFR) or coronary flow reserve (CFR), CMS will allow for a complexity adjustment from APC 5191 (Level 1 Endovascular Procedures) to APC 5192 (Level 2 Endovascular Procedures).

Presented in the table below are a list of applicable CMS CY2025 Complexity Adjustments.

Primary CPT [†] Code	Short Description	Primary CPT [†] Code C-APC	Secondary CPT [†] Code	Short Description	Complexity Adjusted C-APC ^a	Final National Reimbursement Rate	Qualifying Complexity Adjustment ^a
93454	Coronary artery angio s&i	5191	+93571	Coronary flow reserve measure	5191	\$3,216	NO
93455	Coronary art/grft angio s&i	5191	+93571	Coronary flow reserve measure	5192	\$5,702	YES
93456	R hrt coronary artery angio	5191	+93571	Coronary flow reserve measure	5192	\$5,702	YES
93457	R hrt art/grft angio	5191	+93571	Coronary flow reserve measure	5191	\$3,216	NO
93458	L hrt artery/ventricle angio	5191	+93571	Coronary flow reserve measure	5192	\$5,702	YES
93459	L hrt art/grft angio	5191	+93571	Coronary flow reserve measure	5192	\$5,702	YES
93460	R&L hrt art/ventricle angio	5191	+93571	Coronary flow reserve measure	5192	\$5,702	YES
93461	R&L hrt art/ventricle angio	5191	+93571	Coronary flow reserve measure	5192	\$5,702	YES

a All complexity adjustment combination codes are found in Addendum J of the OPPS Final Rule
(+) = Indicates add-on code. List add-on code separately in addition to code for primary procedure.

HOSPITAL OUTPATIENT VASCULAR AMBULATORY PAYMENT CLASSIFICATIONS (C-APCS) AND COMPLEXITY ADJUSTMENTS³

CORONARY ANGIOGRAPHY PRIMARY CPT[‡] CODES WITH DESCRIPTION

CPT [‡] CODE	CPT [‡] CODE DESCRIPTION	C-APC	MEDICARE REIMBURSEMENT
CORONARY ANGIOGRAPHY			
93454	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation	5191	\$3,216
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	5191	\$3,216
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	5191	\$3,216
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	5191	\$3,216
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	5191	\$3,216
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	5191	\$3,216
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	5191	\$3,216
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	5191	\$3,216

HOSPITAL OUTPATIENT VASCULAR AMBULATORY PAYMENT CLASSIFICATIONS (C-APCS) AND COMPLEXITY ADJUSTMENTS³

PHYSIOLOGY ASSESSMENT CPT[‡] CODES WITH DESCRIPTION

CPT [‡] CODE ³	CPT [‡] CODE DESCRIPTION	C-APC	MEDICARE REIMBURSEMENT
CORONARY PHYSIOLOGY ASSESSMENT			
+93571	Intravascular Doppler velocity and/or pressure derived coronary flow reserve measurement (coronary vessel or graft) during coronary angiography including pharmacologically induced stress; initial vessel (List separately in addition to code for primary procedure)	N/A ^a	Packaged ^a
+93572	Intravascular Doppler velocity and/or pressure derived coronary flow reserve measurement (coronary vessel or graft) during coronary angiography including pharmacologically induced stress; each additional vessel (List separately in addition to code for primary procedure)	N/A ^a	Packaged ^a

a All complexity adjustment combination codes are found in Addendum J of the OPPS Final Rule
(+) = Indicates add-on code. List add-on code separately in addition to code for primary procedure.

HOSPITAL OUTPATIENT VASCULAR AMBULATORY PAYMENT CLASSIFICATIONS (C-APCS) AND COMPLEXITY ADJUSTMENTS

Coronary microvascular dysfunction is formally recognized as a diagnosis through the creation of four ICD-10-CM codes. Visit the [CDC’s website](#) for a comprehensive list of ICD-10-CM codes.

ICD-10-CM CODES ⁴	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

References

1. CMS. 2014. CMS Finalizes Hospital Outpatient and Ambulatory Surgical Centers Policy and Payment Changes for 2015. <https://www.cms.gov/newsroom/fact-sheets/cms-finalizes-hospital-outpatient-and-ambulatory-surgical-centers-policy-and-payment-changes-2015>. Accessed January 24, 2023
2. CMS. 2021. Medicare CY 2021 Outpatient Prospective Payment System (OPPS) Proposed Rule Claims Accounting. <https://www.cms.gov/files/document/2021-nprm-opps-claims-accounting.pdf>. Accessed January 24, 2023
3. CMS. 2025. CY2025 OPPS Final Rule Home Page. U.S. Centers for Medicare and Medicaid Services CMS-1809-FC. <https://www.cms.gov/medicare/payment/prospective-payment-systems/hospital-outpatient/regulations-notice/cms-1809-f>
4. CMS 2025 ICD-10-CM Files. <https://www.cms.gov/files/document/fy-2025-icd-10-cm-coding-guidelines.pdf>

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