

Three tables follow listing the national Medicare payments for certain peripheral vascular procedures. To accurately report a peripheral intervention, multiple/additional codes may be needed.

Peripheral Vascular Ablation

2009

Physician Payments

These payments are for procedures performed in the hospital/ASC setting.

ICD-9 DIAGNOSIS	CPT CODE	PHYSICIAN PAYMENT	DESCRIPTION
440.20			Atherosclerosis of the extremities, unspecified
440.21			Atherosclerosis of the extremities with intermittent claudication
440.22			Atherosclerosis of the extremities with rest pain
440.23			Atherosclerosis of the extremities with ulceration
440.24			Atherosclerosis of the extremities with gangrene
440.4			Chronic total occlusion of artery of the extremities*
	35470	\$463	Transluminal balloon angioplasty, percutaneous; tibioperoneal trunk or branches, each vessel
	35474	\$396	Transluminal balloon angioplasty, percutaneous; femoral-popliteal
	35493	\$457	Transluminal peripheral atherectomy, percutaneous; femoral-popliteal
	35495	\$529	Transluminal peripheral atherectomy, percutaneous; tibioperoneal trunk and branches
	36245	\$254	Selective catheter placement, arterial system; each first order abdominal, pelvic, or lower extremity artery branch, within a vascular family
	36246	\$277	Selective catheter placement, arterial system; initial second order abdominal, pelvic, or lower extremity artery branch, within a vascular family
	36247	\$330	Selective catheter placement, arterial system; initial third order or more selective abdominal, pelvic, or lower extremity artery branch, within a vascular family
	36248	\$53	Selective catheter placement, arterial system; additional second order, third order, and beyond, abdominal, pelvic, or lower extremity artery branch, within a vascular family
	37205	\$445	Transcatheter placement of an intravascular stent(s), (non-coronary vessel), percutaneous; initial vessel
	37206	\$217	Transcatheter placement of an intravascular stent(s), (non-coronary vessel), percutaneous; each additional vessel
	75960	\$268	Transcatheter introduction of intravascular stent(s) (except coronary, carotid, and vertebral vessel), percutaneous and/or open radiological supervision & interpretation each vessel
	75962	\$28	Transluminal balloon angioplasty, peripheral artery, radiological supervision and interpretation
	75964	\$19	Transluminal balloon angioplasty, each additional peripheral artery, radiological supervision and interpretation
	75992	\$28	Transluminal atherectomy, peripheral artery, radiological supervision and interpretation
	75993	\$19	Transluminal atherectomy, each additional peripheral artery, radiological supervision and interpretation

Hospital Inpatient Payments

ICD-9 DIAGNOSIS	ICD-9 PROCEDURE	DRG	MS-DRG PAYMENT	DESCRIPTION
440.20				Atherosclerosis of the extremities, unspecified
440.21				Atherosclerosis of the extremities with intermittent claudication
440.22				Atherosclerosis of the extremities with rest pain
440.23				Atherosclerosis of the extremities with ulceration
440.24				Atherosclerosis of the extremities with gangrene
440.4				Chronic total occlusion of artery of the extremities*
	39.50			Angioplasty or atherectomy of non-coronary vessel(s); PTA of non-coronary vessels
	00.40			Procedure on single vessel
	00.41			Procedure on two vessels
	00.42			Procedure on three vessels
	00.43			Procedure on four or more vessels
	39.90			Insertion of non-drug-eluting peripheral vessel stent(s)
		252	\$16,396	Other vascular procedures w/ MCC
		253	\$12,509	Other vascular procedures w/ CC
		254	\$8,559	Other vascular procedures w/o CC/MCC

* Manifestation code only – code first arteriosclerosis of arteries of extremities

Peripheral Vascular Ablation

2009

Hospital Outpatient Payments

ICD-9 DIAGNOSIS	CPT CODE	APC CODE	APC PAYMENT	DESCRIPTION
440.20				Atherosclerosis of the extremities, unspecified
440.21				Atherosclerosis of the extremities with intermittent claudication
440.22				Atherosclerosis of the extremities with rest pain
440.23				Atherosclerosis of the extremities with ulceration
440.24				Atherosclerosis of the extremities with gangrene
440.4				Chronic total occlusion of artery of the extremities
	35470	0083	\$3,195	Transluminal balloon angioplasty, percutaneous; tibioperoneal trunk or branches, each vessel
	35474	0083	\$3,195	Transluminal balloon angioplasty, percutaneous; femoral-popliteal
	35493	0082	\$5,962	Transluminal peripheral atherectomy, percutaneous; femoral-popliteal
	35495	0082	\$5,962	Transluminal peripheral atherectomy, percutaneous; tibioperoneal trunk and branches
	36245	N/A [†]	-----	Selective catheter placement, arterial system; each first order abdominal, pelvic, or lower extremity artery branch, within a vascular family
	36246	N/A [†]	-----	Selective catheter placement, arterial system; initial second order abdominal, pelvic, or lower extremity artery branch, within a vascular family
	36247	N/A [†]	-----	Selective catheter placement, arterial system; initial third order or more selective abdominal, pelvic, or lower extremity artery branch, within a vascular family
	36248	N/A [†]	-----	Selective catheter placement, arterial system; additional second order, third order, and beyond, abdominal, pelvic, or lower extremity artery branch, within a vascular family
	37205	229	\$6,094	Transcatheter placement of an intravascular stent(s), (non-coronary vessel), percutaneous; initial vessel
	37206	229	\$6,094	Transcatheter placement of an intravascular stent(s), (non-coronary vessel), percutaneous; each additional vessel
	75960	N/A [†]	-----	Transcatheter introduction of intravascular stent(s) (except coronary, carotid, and vertebral vessel), percutaneous and/or open radiological supervision & interpretation each vessel
	75962	0083 ^{††}	\$3,195	Transluminal balloon angioplasty, peripheral artery, radiological supervision and interpretation
	75964	N/A [†]	-----	Transluminal balloon angioplasty, each additional peripheral artery, radiological supervision and interpretation
	75992	N/A [†]	-----	Transluminal atherectomy, peripheral artery, radiological supervision and interpretation
	75993	N/A [†]	-----	Transluminal atherectomy, each additional peripheral artery, radiological supervision and interpretation

[†] Status Indicator N - Packaged into other APC codes, not paid separately

^{††} Status indicator Q - no separate payment when performed during same session as a status indicator "T" procedure (i.e.angioplasty)

HCPCS	Code	Description	Code	Description
	C1885	Turbo Elite® Laser Ablation Catheter	C1887	Cross-Pilot® 0.9mm Turbo Elite Support Catheter
	C1887	Turbo-Booster® Guide Catheter	C1769	SafeCross TLX™ RF CTO Crossing Wire
	C1887	Quick-Cross® Support Catheter	C1757	QuickCat™ Extraction Catheter
	C1887	Quick-Cross® Extreme Support Catheter		

All codes supplied in this guide are for information purposes only and represent no statement or guarantee by The Spectranetics Corporation that these codes will be appropriate or that reimbursement will be made in a particular situation. It is always the provider's responsibility to determine and submit appropriate codes, charges, and modifiers for services that are rendered. All coding and reimbursement information is subject to change without notice, and specific payers may have their own coding and reimbursement requirements and policies. Listed Medicare payments are unadjusted national rates, and actual rates will vary by locality and provider characteristics.

It is recommended that providers stay current with NCCI coding manual narratives and edits. Before filing any claims, providers should verify current requirements and policies with the payer.

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Sources:

- International Classification of Diseases (ICD-9-CM) 2008, Hospital Volumes 1, 2, and 3, 9th Revision-Clinical Modification.
- 2009 National Physician Fee Schedule Relative Value File. January 2009 release. This file contains the revisions identified in the Physician Fee Schedule Final Regulation published November 2008.
- Outpatient Prospective Payment System CY 2009 Final Rule, Federal Register, Vol 73, No. 223, November 18, 2008. Inpatient Prospective Payment System CY 2009 Final Rule, Federal Register, Vol 73, No. 193, October 3, 2008.



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