

# 2025 Coronary Diagnostic and Intervention Coding Sheet

**Medtronic**

**Reimbursement  
Information Line**  
Tel: 877.347.9662

Patient:	Date of Birth:	Date of Procedure:
Referring MD:	DX:	

DIAGNOSTIC (NON-CONGENITAL)	
93451	Right heart catheterization, w/o coronary angiography
93452	Left heart catheterization, w/o coronary angiography, including left ventriculography
93453	Combined left and right heart catheterization, w/o coronary angiography, including left ventriculography
93454	Coronary angiography, w/o heart catheterization
93455	Coronary angiography w/angiography of bypass graft(s), w/o heart catheterization
93456	Coronary angiography w/ right heart catheterization
93457	Coronary angiography w/ angiography of bypass graft(s) w/ right heart catheterization
93458	Coronary angiography w/ left heart catheterization, including left ventriculography
93459	Coronary angiography w/ angiography of bypass graft(s) w/ left heart catheterization including left ventriculography
93460	Coronary angiography w/ left & right heart catheterization, including left ventriculography
93461	Coronary angiography w/ angiography of bypass graft(s) w/ left & right heart catheterization, including left ventriculography
DIAGNOSTIC (CONGENITAL)	
93593	Right heart catheterization for congenital heart defect(s) including imaging guidance, normal native connections
93594	Right heart catheterization for congenital heart defect(s) including imaging guidance, abnormal native connections
93595	Left heart catheterization for congenital heart defect(s) including imaging guidance, normal or abnormal native connections
93596	Right and left heart catheterization for congenital heart defect(s) including imaging, normal native connections
93597	Right and left heart catheterization for congenital heart defect(s) including imaging, abnormal native connections
+93598	Cardiac output measurement(s), thermodilution or other indicator dilution method, performed during cardiac catheterization for evaluation of congenital heart defects
+93563	Coronary angiography during heart catheterization for congenital cardiac anomalies
+93564	Bypass graft angiography, venous or arterial, free grafts or in situ (eg, internal mammary artery), during heart catheterization for congenital cardiac anomalies
+93565	Left ventriculography or left atrial angiography during heart catheterization for congenital cardiac anomalies
ADDITIONAL ANGIOGRAPHY (NON-CONGENITAL & CONGENITAL)	
+93566	Right ventriculography or right atrial angiography
+93567	Supravalvular aortography
+93568	Pulmonary artery angiography

CPT® codes, descriptions and other data only are copyright 2023 American Medical Association. All Rights Reserved. Applicable FARS/HHSARS apply. Fee schedules, relative value units, conversion factors and/or related components aren't assigned by the AMA, aren't part of CPT®, and the AMA isn't recommending their use. The AMA doesn't directly or indirectly practice medicine or dispense medical services. The AMA assumes no liability for data contained or not contained herein.

## MODERATE (CONSCIOUS) SEDATION

Moderate sedation codes are based on the documented physician face-to-face time beginning when the patient is administered sedation and ends when the patient no longer requires physician monitoring, or when the physician leaves the room.

99151	Physician/QHP performing procedure, initial 15 min intra-service time, < 5 years old
99152	Physician/QHP performing procedure, initial 15 min intra-service time, ≥ 5 years old
+99153	+ each additional 15 min intra-service time
99155	Physician/QHP not performing procedure, initial 15 minutes intra-service time, < 5 years old
99156	Physician/QHP not performing procedure, initial 15 minutes intra-service time, ≥ 5 years old
+99157	+ each additional 15 minutes intra-service time

## ADDITIONAL PROCEDURES &amp; SELECTED INTERVENTIONS

+92978	Intravascular ultrasound (IVUS) or optical coherence tomography (OCT), coronary vessel or graft, initial vessel
+92979	+ IVUS or OCT, coronary vessel or graft, each additional vessel
+93462	Left heart catheterization by transseptal puncture
+92972	Percutaneous transluminal coronary lithotripsy
+93463	Pharmacologic agent administration, including assessment of hemodynamic measurements*
+93464	Physiologic exercise study, including assessment of hemodynamic measurements
93503	Insertion and placement of flow-directed catheter for monitoring purposes (Swan-Ganz)
93505	Endomyocardial biopsy
+93571	Intravascular Doppler velocity and/or pressure-derived coronary flow reserve measurement (FFR, wire-derived), during coronary angiography, initial vessel
+93572	+ each additional vessel
0523T	Intraprocedural coronary FFR w/ 3D functional mapping of color-coded FFR values for coronary tree, derived from coronary angiogram data (FFRangio, FFR-3D QCA)
G0278	Iliac and/or femoral artery angiography, nonselective, bilateral or ipsilateral to catheter insertion during cardiac catheterization or coronary angiography
G0269	Placement of closure device into venous or arterial access site
+92973	Percutaneous transluminal coronary thrombectomy, mechanical**
+92974	Transcatheter placement of radiation delivery device for subsequent coronary intravascular brachytherapy
92975	Thrombolysis, coronary, by intracoronary infusion, including selective coronary angiography
92997	Percutaneous transluminal pulmonary artery balloon angioplasty, single vessel
+92998	+ each additional vessel

**NOTES:** \*Report 93463 only once per left or right heart cath procedure. Code 93463 can be reported with transcatheter closure of septal defect but may not be reported with coronary artery interventions such as thrombolysis, angioplasty, atherectomy or stenting.

\*\*Code 92973 can only be used for mechanical thrombectomy, e.g. Via Angio jet. Aspiration thrombectomy is not separately codable.

CPT codes and descriptions only are copyright ©2023 American Medical Association. All rights reserved. No fee schedules are included in CPT. The American Medical Association assumes no liability for data contained or not contained herein.

# 2025 Coronary Diagnostic and Intervention Coding Sheet

**Medtronic**

**Reimbursement  
Information Line**  
Tel: 877.347.9662

PHYSICIAN CODING			2025 FACILITY RVUs			
CPT	Description	Work	PE	MP	TOTAL	
92920	Coronary angioplasty single major coronary artery or branch	9.85	3.42	2.22	15.49	
+92921	+ each additional branch	bundled for physicians				
92924	Coronary atherectomy single major coronary artery or branch	11.74	4.07	2.64	18.45	
+92925	+ each additional branch	bundled for physicians				
92928	Placement of coronary stent	10.96	3.80	2.45	17.21	
+92929	+ each additional branch	bundled for physicians				
92933	Placement of coronary stent w/atherectomy	12.29	4.26	2.77	19.32	
+92934	+ each additional branch	bundled for physicians				
92937	Revascularization, of or through coronary artery bypass graft, any PCI or combination, single vessel	10.95	3.80	2.45	17.20	
+92938	+ each additional branch	bundled for physicians				
92941	Coronary revascularization, during AMI, any PCI or combination, single vessel	12.31	4.27	2.76	19.34	
92943	Coronary revascularization, CTO, any PCI or combination, single vessel	12.31	4.26	2.77	19.34	
+92944	+ each additional branch	bundled for physicians				

## HOSPITAL OUTPATIENT CODING

HCPCS II	Description
Note: Hospitals use the regular CPT stent codes to report placement of bare metal/non-drug-eluting stents only. They use the HCPCS II C-codes below to report placement of drug-eluting stents (DES). Physicians do not use C-codes and report the regular CPT codes for placement of all stents.	
C9600	Placement of drug-eluting coronary stent, single major coronary artery or branch
+C9601	+ each additional branch
C9602	Placement of drug-eluting coronary stent (DES), w/atherectomy, single major coronary artery or branch
+C9603	+ each additional branch
C9604	Revascularization, of or through coronary artery bypass graft, any PCI or combination with drug-eluting stent, single vessel
+C9605	+ each additional branch
C9606	Coronary revascularization, during AMI, any PCI or combination with drug-eluting stent, single vessel
C9607	Coronary revascularization, CTO, any PCI or combination with drug-eluting stent, single vessel
C9608	+ each additional branch

CPT codes and descriptions only are copyright ©2023 American Medical Association. All rights reserved. No fee schedules are included in CPT. The American Medical Association assumes no liability for data contained or not contained herein.

MAJOR CORONARY ARTERIES & BRANCHES				BASIC CODING RULES
<ul style="list-style-type: none"> <li>• The PCI codes are set up as base codes and add-on codes.</li> <li>• Base codes are assigned for the five major coronary arteries.</li> <li>• Add-on codes are assigned for branches of the major coronary arteries. Only two branches of each major coronary artery can be coded.</li> </ul>	Major Coronary Artery	HCPCS Modifier	Branches	<p>All PCI codes are bundled and include vascular access, selective catheterization, traversing the lesion, radiological S&amp;I, completion imaging, and closure.</p> <ul style="list-style-type: none"> <li>• PCI within a single major artery is reported with one code, regardless of whether several discrete lesions were treated.</li> <li>• For PCI on a major artery and one of its branches, a base code and an add-on code are assigned.</li> <li>• For PCI on two different major arteries, two base codes are assigned. Use modifiers to differentiate the major arteries.</li> <li>• For PCI on a major artery and the branch of another, two base codes are assigned.</li> <li>• When a single lesion bridges two vessels but is treated with a single intervention, only one code is reported.</li> <li>• When bifurcation lesions are treated, intervention codes are reported for both vessels.</li> <li>• Codes for atherectomy and stenting include coronary angioplasty when performed.</li> <li>• Cardiac catheterization and coronary angiography may be coded separately only when specifically diagnostic.</li> </ul>
	Left main coronary artery	LM	None	
	Left anterior descending coronary artery	LD	Diagonal 1	
			Diagonal 2	
	Left circumflex coronary artery	LC	Obtuse marginal 1	
			Obtuse marginal 2	
	Right coronary artery	RC	Right posterior descending	
			Right posterolateral	
	Ramus intermedius coronary artery	RI	None	

CPT® codes, descriptions and other data only are copyright 2023 American Medical Association. All Rights Reserved. Applicable FARS/HHSARS apply. Fee schedules, relative value units, conversion factors and/or related components aren't assigned by the AMA, aren't part of CPT®, and the AMA isn't recommending their use. The AMA doesn't directly or indirectly practice medicine or dispense medical services. The AMA assumes no liability for data contained or not contained herein. Code descriptions have been abbreviated in this document. For specific AMA descriptions of current CPT® coding, please refer to the most recent version of the CPT® Coding Book.

CY2024 PFS Final Rule CMS-1807-F Addenda updated 11/01/2024: <https://www.cms.gov/medicare/payment/fee-schedules/physician/federal-regulation-notice/cms-1807-f>

Medtronic provides this information for your convenience only. It does not constitute legal advice or a recommendation regarding clinical practice. Information provided is gathered from third-party sources and is subject to change without notice due to frequently changing laws, rules, and regulations. As a result, Medtronic does not represent or guarantee that this information is complete, accurate, or applicable to any particular patient or third-party payer or guarantees payment. The provider has the responsibility to determine medical necessity and to submit appropriate documentation, codes and charges for care provided. Medtronic makes no guarantee that the use of this information will prevent differences of opinion or disputes with Medicare or other payers as to the correct form of billing or the amount that will be paid to providers of service. Please contact your Medicare contractor, other payers, reimbursement specialists and/or legal counsel for interpretation of coding, coverage and payment policies and any applicable laws or regulations that may apply.

Note: Medtronic doesn't offer products with approved indications for all procedures listed