



Medtronic

Engineering the extraordinary

FY26 Medicare hospital inpatient prospective payment system (IPPS) updates and changes

Cardiac rhythm management and cardiac ablation solutions
(based on Final Rule)

Updated for October 1, 2025

Medtronic Health Economics, Policy, and Reimbursement

Disclaimer

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. The provider has the responsibility to determine medical necessity and to submit appropriate 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.

This document provides assistance for FDA approved or cleared indications. Where reimbursement is sought for use of a product that may be inconsistent with, or not expressly specified in, the FDA cleared or approved labeling (e.g., instructions for use, operator's manual or package insert), consult with your billing advisors or payers on handling such billing issues. Some payers may have policies that make it inappropriate to submit claims for such items or related service.

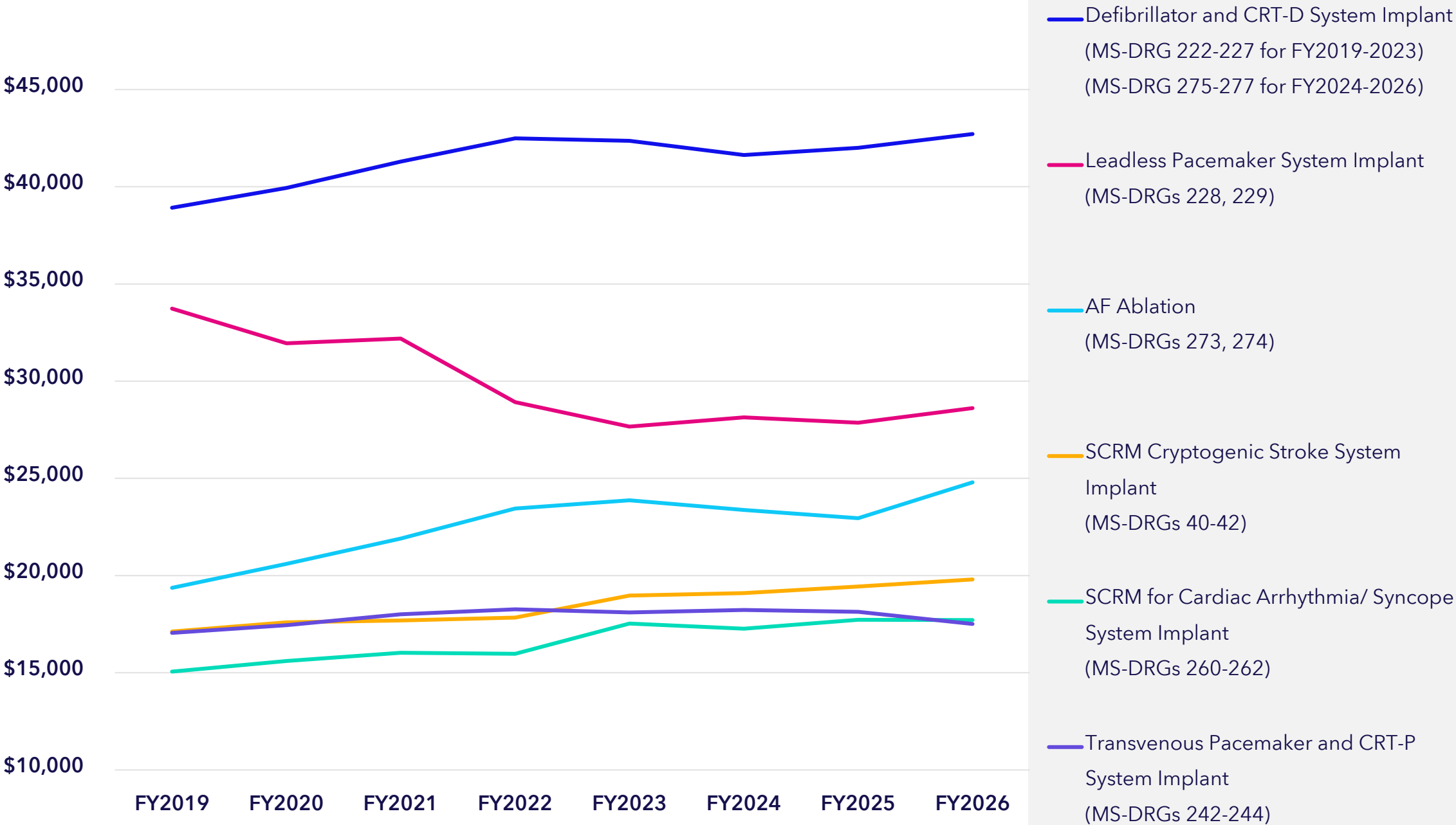
Medicare FY2026 summary

National average Medicare rates over time

CMS MS-DRG Payments FY2022-2026

This summary includes the national volume-weighted average rates across relevant MS-DRGs representing these procedures and the corresponding changes over time, from Federal Fiscal Year 2022 - 2026. These rates have increased slightly over this timeframe.

Rates represent the volume-weighted average rates across relevant DRGs representing these procedures.



Acute inpatient PPS, CMS <https://www.cms.gov/medicare/medicare-fee-for-service-payment/acuteinpatientpps>

IPPS rate changes for cardiac rhythm management and ablation therapies

FY2025 to FY2026

This highlights the percent of change in payment for major cardiac rhythm management, cardiac catheter ablation, and cardiac diagnostic service procedures between the IPPS 2025 payment year and 2026 payment year. This is a blend of all MS-DRGs associated with the typical case for the procedures listed. The following pages will walk through MS-DRG-specific changes. For information on which procedures fall into these MS-DRGs, please contact Medtronic Reimbursement Customer Support.

Transvenous pacemakers & CRT-P system implants	-3.5%	Cardiac catheter ablations	7.7%
Leadless pacemaker implants	1.5%	Ventricular assist device implant	1.9%
ICD, EV-ICD & CRT-D system implants	1.4%	Subcutaneous cardiac rhythm monitors	-0.2% (arrhythmia & syncope)
			2.0% (stroke)

Rates represent the volume-weighted average rates across relevant DRGs representing these procedures.

The IPPS FY2026 national payment rates are based on information published in the IPPS final rule CMS-1833-F and corresponding tables and data files which was published on August 4, 2025. IPPS Final Rule Home Page cms.gov <https://www.cms.gov/medicare/payment/prospective-payment-systems/acute-inpatient-pps/fy-2026-ipp-final-rule-home-page>. Accessed August 21, 2025.

**Medtronic's
PulseSelect™ Pulsed
Field Ablation System
to treat atrial
fibrillation received
NTAP approval began
in FY2025.**

NTAP is a temporary incremental payment program that provides hospitals, in limited and specific cases, with an additional payment for Medicare inpatient procedures that utilize new, high-cost technologies.

New Technology Add-on Payment (NTAP)

CMS will continue NTAP for another year for PulseSelect Pulsed Field Ablation (PFA) catheter.

Year **2** of **3**

This NTAP became effective October 1, 2024 and is scheduled to sunset by September 30, 2026.

The IPPS FY2026 national payment rates are based on information published in the IPPS final rule CMS-1833-F and corresponding tables and data files which was published on August 4, 2025. IPPS Final Rule Home Page [cms.gov](https://www.cms.gov/medicare/payment/prospective-payment-systems/acute-inpatient-pps/fy-2026-ipp-final-rule-home-page)
<https://www.cms.gov/medicare/payment/prospective-payment-systems/acute-inpatient-pps/fy-2026-ipp-final-rule-home-page>. Accessed August 21, 2025.

Medicare FY2026 IPPS national reimbursement rates

Transvenous pacemakers

Insertion/Replacement

MS-DRG	MS-DRG description	FY2025 ¹ national rate	FY2026 ² national rate	Percent of change
242	Permanent cardiac pacemaker implant w/ MCC	\$24,141	\$23,233	-4.0%
243	Permanent cardiac pacemaker implant w/ CC	\$16,033	\$15,506	-3.6%
244	Permanent cardiac pacemaker implant w/o CC/MCC	\$12,844	\$13,153	2.1%

MS-DRG	MS-DRG description	FY2025 ¹ national rate	FY2026 ² national rate	Percent of change
258	Cardiac pacemaker device replacement w/ MCC	\$19,966	\$22,864	14.2%
259	Cardiac pacemaker device replacement w/o MCC	\$12,509	\$14,714	17.3%

¹ The IPPS FY2025 national payment rates are based on information published in the IPPS final rule CMS-1808-F and corresponding tables and data files which was published on August 1, 2024.
<https://www.cms.gov/medicare/payment/prospective-payment-systems/acute-inpatient-pps/fy-2025-ipp-final-rule-home-page>. Updated August 2024. Accessed August 29, 2024.

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<https://www.cms.gov/medicare/payment/prospective-payment-systems/acute-inpatient-pps/fy-2026-ipp-final-rule-home-page>. Accessed August 21, 2025.

Transvenous pacemakers

Revision

MS-DRG	MS-DRG description	FY2025 ¹ national rate	FY2026 ² national rate	Percent of change
260	Cardiac pacemaker revision except device replacement w/ MCC	\$24,246	\$23,670	-2.6%
261	Cardiac pacemaker revision except device replacement w/ CC	\$13,504	\$13,757	1.6%
262	Cardiac pacemaker revision except device replacement w/o CC/MCC	\$10,802	\$11,860	9.5%

¹ The IPPS FY2025 national payment rates are based on information published in the IPPS final rule CMS-1808-F and corresponding tables and data files which was published on August 1, 2024. <https://www.cms.gov/medicare/payment/prospective-payment-systems/acute-inpatient-pps/fy-2025-ipp-final-rule-home-page>. Updated August 2024. Accessed August 29, 2024.

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Leadless (intracardiac) pacemaker

Insertion

MS-DRG	MS-DRG description	FY2025 ¹ national rate	FY2026 ² national rate	Percent of change
228	Other cardiothoracic procedures w/ MCC	\$35,463	\$36,001	1.2%
229	Other cardiothoracic procedures w/o MCC	\$22,106	\$22,918	3.4%

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Implantable cardioverter defibrillators/CRT-D, including EV-ICD

Insertion

MS-DRG	MS-DRG description	FY2025 ¹ national rate	FY2026 ² national rate	Percent of change
275	Cardiac defibrillator implant with cardiac catheterization and MCC	\$50,292	\$51,886	2.9%
276	Cardiac defibrillator implant with MCC or carotid sinus neurostimulator	\$44,083	\$43,709	-1.1%
277	Cardiac defibrillator implant without MCC	\$33,110	\$33,608	1.2%

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Implantable cardioverter defibrillators

Generator and lead procedures

MS-DRG	MS-DRG description	FY2025 ¹ national rate	FY2026 ² national rate	Percent of change
245	AICD generator procedures	\$34,777	\$33,199	-4.8%
265	AICD lead procedures	\$25,386	\$26,329	3.4%

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Cardiac catheter ablation

Percutaneous/Concomitant procedures

MS-DRG	MS-DRG description	FY2025 ¹ national rate	FY2026 ² national rate	Percent of change
273	Percutaneous and other intracardiac procedures w/ MCC	\$27,828	\$30,020	7.6%
274	Percutaneous and other intracardiac procedures w/o MCC	\$22,211	\$23,953	7.5%

MS-DRG	MS-DRG description	FY2025 ¹ national rate	FY2026 ² national rate	Percent of change
317	Concomitant left atrial appendage closure and cardiac ablation	\$44,026	\$48,656	10.2%

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Mechanical circulatory support

Insertion/Removal

MS-DRG	MS-DRG description	FY2025 ¹ national rate	FY2026 ² national rate	Percent of change
001	Heart transplant or implant of heart assist system w/ MCC	\$200,461	\$203,923	1.4%
002	Heart transplant or implant of heart assist system w/o MCC	\$78,427	\$82,459	4.9%

MS-DRG	MS-DRG description	FY2025 ¹ national rate	FY2026 ² national rate	Percent of change
268	Aortic and heart assist procedures except pulsation balloon w/ MCC	\$47,451	\$50,049	5.2%
269	Aortic and heart assist procedures except pulsation balloon w/o MCC	\$29,610	\$30,731	3.5%

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Subcutaneous cardiac rhythm monitor

For cardiac diagnoses

MS-DRG	MS-DRG description	FY2025 ¹ national rate	FY2026 ² national rate	Percent of change
260	Cardiac pacemaker revision except device replacement w/ MCC	\$24,246	\$23,670	-2.6%
261	Cardiac pacemaker revision except device replacement w/ CC	\$13,504	\$13,757	1.6%
262	Cardiac pacemaker revision except device replacement w/o CC/MCC	\$10,802	\$11,860	9.5%

¹ The IPPS FY2025 national payment rates are based on information published in the IPPS final rule CMS-1808-F and corresponding tables and data files which was published on August 1, 2024. <https://www.cms.gov/medicare/payment/prospective-payment-systems/acute-inpatient-pps/fy-2025-ipp-final-rule-home-page>. Updated August 2024. Accessed August 29, 2024.

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Subcutaneous cardiac rhythm monitor

For use in patients with cryptogenic stroke

MS-DRG	MS-DRG description	FY2025 ¹ national rate	FY2026 ² national rate	Percent of change
040	Peripheral, cranial nerve and other nervous system procedures w/ MCC	\$26,844	\$28,097	4.4%
041	Peripheral, cranial nerve and other nervous system procedures w/ CC or peripheral neurostimulator	\$16,075	\$15,999	-0.7%
042	Peripheral, cranial nerve and other nervous system procedures w/o CC/MCC	\$12,508	\$12,572	0.2%

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Additional resources


Medtronic economic resources

Cardiac rhythm management and cardiac ablation solutions


Consult with [Regional Economic Managers](#) to access best-in-class healthcare economic tools and resources




U.S. reimbursement, health policy, and payment reform




Procedure and service line economics




Disease state economics



Economic value of Medtronic technology



Value-based healthcare partnerships



Local market assessments

Reimbursement customer support

Call us Monday – Friday
from 8 a.m. – 4 p.m. CT
866-877-4102

Email us at
rs.healthcareeconomics@medtronic.com

Chat with us on our website at:
www.Medtronic.com/CRHFreimbursement

Reimbursement foundations

www.Medtronic.com/CRHFreimbursement

Education

Reimbursement update presentations

- 2024 Medicare hospital inpatient changes for cardiac rhythm management and cardiac catheter ablation
- 2024 Medicare hospital outpatient and physician fee schedule updates and changes
- Watch reimbursement foundations video

Prior authorization tools and resources


- Prior authorization guide
- Prior authorization resources: Aurora EV-ICD™ system
- Prior authorization resources: LINQ™ subcutaneous cardiac rhythm monitors
- Prior authorization resources: Micra™ leadless pacemakers
- Prior authorization resources: PulseSelect™ PFA catheter system

Cost effectiveness analysis video

- Video: cost effectiveness analysis – an introduction

Educational video outlining:

- Reimbursement fundamentals
- Physician reimbursement
- Facility reimbursement
- Medtronic economic resources



SCAN ME

C-code finder

Search for C-codes

Medicare provides C-codes, a type of HCPCS II code, for hospital use in billing Medicare for some medical devices and supplies in the hospital outpatient setting. The C-code finder is a database of commonly used Medtronic products and their corresponding C-codes.

The objective of this information is to provide Medtronic customers with resources to assist with C-coding for our devices.

Medtronic provides this information for your convenience only. Information provided is gathered from third-party sources and is subject to change without notice due to frequently changing billing mechanisms. 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. The provider has the responsibility to determine medical necessity and to submit appropriate codes for care provided. Please contact your Medicare contractor, other payers, reimbursement specialists and/or legal counsel for interpretation of coding policies.

This document provides assistance for FDA approved or cleared indications. Where reimbursement is sought for use of a product that may be inconsistent with, or not expressly specified in, the FDA cleared or approved labeling (e.g., instructions for use, operator's manual or package insert), consult with your billing advisors or payers on handling such billing issues.

Search on model number, product name, C-code, C-code description, or product category. Add an asterisk (*) to the end of a partial number or search term to find all potential matches.

Looking for other HCPCS resources? Find them here.

- Medical surgical HCPCS billing and coding guide [↗](#)
- Spine C-code HCPCS Level II coding guide [↗](#)

Find C-codes by:

- Product name
- Model number
- Product category

www.Medtronic.com/c-code



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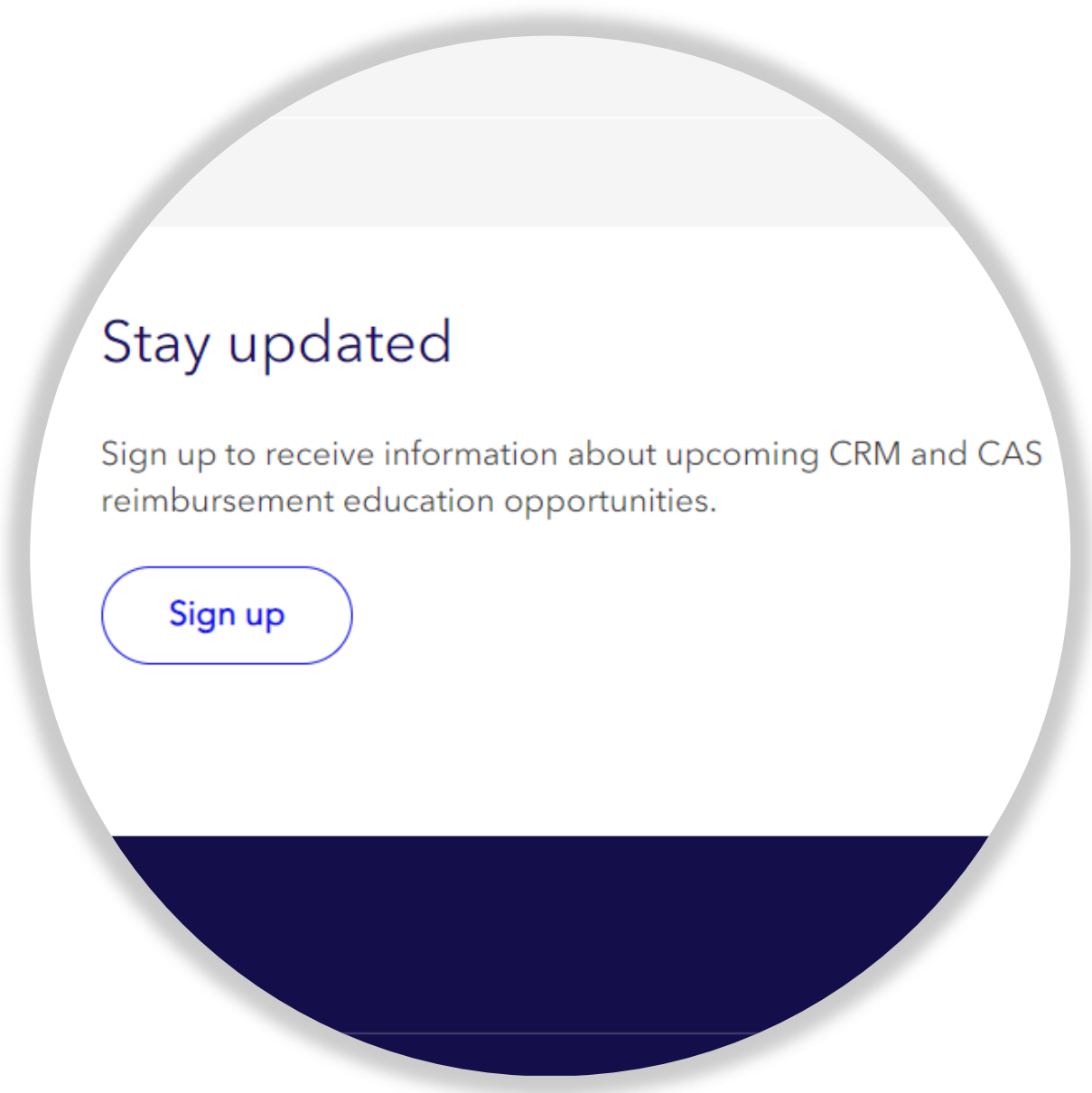
We are making improvements to our Medtronic cardiac rhythm management and cardiac ablation therapy reimbursement website. In order to continue to receive up-to-date information about upcoming reimbursement educational opportunities, please complete the email sign up form linked below.

Scan the
QR code



-or-

Click here: [Reimbursement educational email sign up form](#)



Appendix

Resource links



[CMS FY2026 IPPS Final Rule Home Page](#)



[CMS Coverage Policies: MCD Search](#)



[CMS ICD-10-CM/PCS MS-DRG v42.1 Definitions Manual](#)



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