

PATIENT:

PHYSICIAN:

PRIMARY DIAGNOSIS:

PROCEDURE DATE:

SECONDARY DIAGNOSIS:

CPT® codes, descriptions and other data only are copyright 2024 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.

CPT® Code	Description	2025 Work RVU	Common modifiers that may apply					Case Notes
Surgical Arterial Access			-50	-51	-62	-80	-AS	
+34713	Perc access and closure of femoral artery, unilateral	2.5	-50	-	-62	-80	-AS	
+34714	Open femoral exposure with creation of conduit, unilateral	5.25	-50	-	-62	-80	-AS	
+34812	Open femoral exposure, unilateral	4.13	-50	-	-62	-80	-AS	
+34820	Open iliac exposure, including abd/retroperitoneal incision, unilateral	7	-50	-	-62	-80	-AS	
+34833	Open iliac exposure with creation of conduit, including abd/retroperitoneal incision, unilateral	8.16	-50	-	-62	-80	-AS	
+34834	Open brachial exposure, unilateral	2.65	-50	-	-62	-80	-AS	
Placement of Wires, Catheters, Sheaths								
36200	Catheter/sheath placement into aorta; nonselective	2.77	-50	-51	-	-	-	
36215	Catheter/sheath placement; selective, first order	4.17	-	-51	-	-	-	
36216	Catheter/sheath placement; selective, second order	5.27	-	-51	-	-	-	
36217	Catheter/sheath placement; selective, third order	6.29	-	-51	-	-	-	
Placement and Deployment of Aortic Endograft								
33880	Endo TAA repair, w LSA coverage, extensions to celiac if required	34.58	-	-51	-62	-80	-AS	
75956-26	Rad S&l, endovascular TAA repair (use with 33880)	7	-	-	-	-	-	
33881	Endo TAA repair wo LSA coverage, extensions to celiac if required	29.58	-	-51	-62	-80	-AS	
75957-26	Rad S&l, endovascular TAA repair (use with 33881)	6	-	-	-	-	-	
33883	Placement of extension, proximal, initial extension	21.09	-	-51	-62	-80	-AS	
75958-26	Rad S&l, extension (use with 33883)	4	-	-	-	-	-	
+33884	Placement of extension, proximal, each addl extension	8.2	-	-	-62	-80	-AS	
75958-26	Rad S&l, extension (use with 33884)	4	-	-	-	-	-	
33886	Placement of extension, distal, <i>delayed</i> after initial endo TAA repair	18.09	-	-51	-62	-80	-AS	
75959-26	Rad S&l, extension prosthesis, delayed placement (use with 33886)	3.5	-	-	-	-	-	
Ancillary Procedures								
+37252	IVUS noncoronary, initial vessel	1.8	-	-	-62	-80	-AS	
+37253	IVUS noncoronary, each additional vessel	1.44	-	-	-62	-80	-AS	
37242	Arterial embolization/coiling (non-hemorrhage/tumor), outside tx zone	9.8	-	-51	-	-	-	
62272	Spinal puncture, therapeutic (lumbar drain)	1.58	-	-51	-	-	-	
37236	Non-coronary arterial stent, outside treatment zone, initial artery	8.75	-50	-51	-	-80	-AS	
+37237	Non-coronary arterial stent, each addl artery	4.25	-50	-	-	-80	-AS	
33889	Transposition, open, subclavian to carotid, by neck incision w endo TAA	15.92	-50	-51	-62	-80	-AS	
33891	Bypass graft, carotid-carotid , by neck incision with endo TAA	20	-50	-51	-62	-80	-AS	
34712	Trans catheter delivery of enhanced fixation device, eg, anchor	12	-	-51	-62	-80	-AS	

Modifier	Description	Modifier	Description
-26	Professional component	-62	Co-surgeons: separate group and specialty (62.5%)
-50	Bilateral procedure	-78	Unplanned return to OR for related procedure during post-op period
-51	Multiple procedures (50% reduction)	-79	Unrelated procedure during post-op period
-59	Distinct procedure service	-80	Assistant surgeon (16%)
-XE	Distinct service - separate encounter	-AS	Assistant-at-surgery (non-physician practitioner) (85% of 16%)
-XS	Distinct service - separate organ/structure		
-XP	Distinct service - different practitioner		
-XU	Distinct service - unusual, eg, non-overlapping		

Hospital Inpatient Coding- Endovascular Repair of the Thoracic Aorta

Definition	Code	Description
ICD-10-CM Diagnosis Codes	i71.010–i71.019	Dissection of thoracic aorta
	i71.10–i71.13	Thoracic aortic aneurysm <i>ruptured</i>
	i71.20–i71.23	Thoracic aortic aneurysm <i>without rupture</i>
	S25.01XA	Minor laceration of thoracic aorta, initial encounter
	S25.02XA	Major laceration of thoracic aorta, initial encounter
	S25.09XA	Other specified injury of thoracic aorta, initial encounter
ICD-10-PCS Procedure Code	02VW3DZ	Restriction of thoracic aorta with intraluminal device, percutaneous approach
HCPCS (C-Code)	N/A	The procedure associated with this device is approved in the inpatient setting only. C-Codes are reported with device-dependent procedures on outpatient claims; therefore no C-Code applies

www.medtronic.com
Medtronic
3576 Unocal Place
Santa Rosa, CA 95403
USA
Tel: 707.525.0111

Product Services
Tel: 888.283.7868
Fax: 800.838.3103

Reimbursement Information
Telephone: 877.347.9662
www.medtronic.com/cvreimbursement

CPT® codes, descriptions and other data only are copyright 2024 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.

Medtronic does not represent or guarantee that this information is complete, accurate, or applicable to any particular patient or third party payer. Medtronic disclaims all liability for any consequence resulting from reliance on this document. The final decision of billing for any service must be made by the health care provider considering the medical necessity of the service furnished as well as the requirements of third-party payers and any local, state, or federal laws and regulations that apply. Medtronic is providing this information in an educational capacity with the understanding that Medtronic is not engaged in rendering accounting, or other professional services. Medtronic encourages all health care providers to consult with their own advisors regarding coding and payment. Medtronic doesn’t offer products with approved indications for all procedures listed. For more information, contact the Cardiovascular Health Economics, Policy & Reimbursement Team.

Cardiovascular coding, coverage, and reimbursement resources are available online at www.medtronic.com/cvreimbursement. For questions or more information, contact Medtronic Vascular Health Economics, Policy & Payment at (866) 260-3987 or rs.cardiovascularhealththeconomics@medtronic.com.

