

Penditure™ left atrial appendage exclusion system

2024 coding and reimbursement reference

Index

Reimbursement disclaimer	. 3
Hospital inpatient coding and reimbursement	. 4
Left atrial appendage exclusion DRGs	5
Medicare physician coding and reimbursement	. 6

Reimbursement disclaimer

The Medtronic Penditure[™] LAA Exclusion System is indicated for the exclusion of the heart's left atrial appendage, performed under direct visualization and in conjunction with other cardiac surgical procedures. Direct visualization, in this context, requires that the surgeon is able to see the heart directly, with or without assistance from a camera, endoscope, etc., or any other appropriate viewing technology.

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.

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.

CPT** ©2023 American Medical Association (AMA). All rights reserved. CPT is a trademark of the American Medical Association. Applicable FARS/DFARS Restrictions Apply to Government Use. Fee schedules, relative values units, conversion factors, and/or related components are not assigned by the AMA, are not part of CPT, and the AMA is not recommending their use. AMA does not directly or indirectly practice medicine or dispense medical services. AMA assumes no liability for data contained or not contained herein.

Hospital inpatient coding and reimbursement

FY24 (Effective October 1, 2023 to September 30, 2024)

Note: The ICD-10 PCS code shown reflects the typical procedure, using known Medtronic devices where appropriate. Theoretical possibilities are not shown, e.g., approaches that are not common, and device types that are not currently on the market. Please refer to clinical documentation for appropriate ICD-10 PCS code selection.

ICD-10 PCS procedure code ¹	ICD-10 PCS code description ¹
02L70CK	Occlusion of left atrial appendage with extraluminal device, open

Left atrial appendage exclusion DRGs

When the left atrial appendage is excluded during open cardiac surgery, reimbursement for the procedure is bundled into the payment for the primary procedure. The DRGs below represent reimbursement scenarios where the Penditure device is used in a concomitant cardiac procedure such as a cardiac valve procedure, coronary artery bypass surgery, or surgical cardiac tissue ablation.

Concomitant surgical valve procedures with left atrial appendage exclusion

MS-DRG	Description	FY2024 Medicare national final unadjusted payment ²	
216	Cardiac valve and other major cardiothoracic procedure w/cardiac cath w/MCC	\$67,953	
217	Cardiac valve and other major cardiothoracic procedure w/cardiac cath w/CC	\$44,567	
218	Cardiac valve and other major cardiothoracic procedure w/cardiac cath w/o CC/MCC	\$39,886	
219	Cardiac valve and other major cardiothoracic procedure w/o cardiac cath w/MCC	\$53,991	
220	Cardiac valve and other major cardiothoracic procedure w/o cardiac cath w/CC	\$36,721	
221	Cardiac valve and other major cardiothoracic procedure w/o cardiac cath w/o CC/MCC	\$36,721	
Aggregate		\$49,042	

MCC = Major complication or comorbidity

CC = Complication or comorbidity

Concomitant CABG with left atrial appendage exclusion

MS-DRG	Description	FY2024 Medicare national final unadjusted payment ²
231	Coronary bypass w/PTCA w/MCC	\$56,819
232	Coronary bypass w/PTCA w/o MCC	\$41,650
233	Coronary bypass w/cardiac cath w/MCC	\$54,610
234	Coronary bypass w/cardiac cath w/o MCC	\$36,394
235	Coronary bypass w/o cardiac cath w/MCC	\$41,174
236	Coronary bypass w/o cardiac cath w/o MCC	\$28,295
Aggregate		\$39,107

Concomitant surgical ablation with left atrial appendage exclusion

MS-DRG	Description	FY2024 Medicare national final unadjusted payment ²
228	Other cardiothoracic procedures w/MCC	\$35,279
229	Other cardiothoracic procedures w/o MCC	\$22,262
Aggregate		\$28,134

Medicare physician coding and reimbursement

CPT procedure code

The following CPT code will be paid as inpatient procedures ONLY. Note: The CPT code shown reflects the typical procedure, using known Medtronic devices where appropriate. Please refer to clinical documentation for appropriate CPT code selection.

CY 2024 payment was calculated with the Conversion Factor (CF) of \$32.7442. CMS may make adjustments to any or all of the data inputs from time to time without notice.

CPT code [†]	Description	CY 2024 Medicare national unadjusted avg payment ³
+33268	Exclusion of the left atrial appendage, open, performed at the time of other sternotomy or thoracotomy procedure(s), any method (e.g., excision, isolation via stapling, oversewing, ligation, plication, clip) (List separately in addition to code for primary procedure)	\$124

Exclusion of the left atrial appendage is included in MAZE and most mitral valve procedures and is not coded separately. If an atrial appendage procedure is performed with a cardiac procedure other than MAZE or mitral valve, then it may be reported separately.

References

- ¹2024 ICD-10 PCS American Medical Association.
- ² FY 2024 IPPS Final Rule Home Page. Centers for Medicare & Medicaid Services. Available at: https://www.cms.gov/medicare/payment/prospective-payment-systems/acute-inpatient-pps/fy-2024-ipps-final-rule-home-page. Accessed on January 23, 2024.
- ³ CMS CY 2024 Medicare Physician Fee Schedule Final Rule. Available at: https://www.cms.gov/medicare/medicare-fee-service-payment/physicianfeesched/pfs-federal-regulation-notices/cms-1784-f. Accessed on January 23, 2024. CMS may make adjustments to any or all of the data inputs from time to time without notice.

The Medtronic CardioVascular Coding Hotline is available to respond to your coding questions at 866-616-8400.

Medtronic

710 Medtronic Parkway Minneapolis, MN 55432-5604 USA

Toll-free in USA: 800.633.8766 Worldwide: +1.763.514.4000 LifeLine
CardioVascular Technical Support
Tel: 877.526.7890

Tel: 763.526.7890 Fax: 763.526.7888

rs.structuralheart@medtronic.com

©2024 Medtronic. Medtronic, Medtronic logo, and Engineering the extraordinary are trademarks of Medtronic. **Third-party brands are trademarks of their respective owners. All other brands are trademarks of a Medtronic company.

UC202400827a EN 01/2024