

# 2010 Proposed Outpatient, ASC and Physician Fee Schedule

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## Cardiac Rhythm Management and Electrophysiology Reimbursement Update

### Updated July 2009

On July 1, 2009, the Centers for Medicare and Medicaid Services (CMS) released the CY 2010 Outpatient Prospective Payment System (OPPS) and Physician Fee Schedule (PFS) proposed rules. Changes affecting Cardiac Rhythm Management (CRM) and Electrophysiology (EP) therapy payments are detailed below. The final rule will be released in October 2009 and go into effect in January 2010.

#### Proposed OPPS and ASC Highlights

Proposed hospital outpatient payment and ASC rates are stable for CRM procedures and will result in upper single-digit increases for EP procedures:

- Outpatient and ASC CRT-D payments are proposed to **increase** 5% from last year.
- Outpatient and ASC ICD payments are proposed to remain **flat** from last year.
- Outpatient and ASC PM payments are proposed to remain **flat** from last year.
- Outpatient and ASC cardiac ablation payments are proposed to **increase** 6 to 10% from last year.

Typically, ASC payments for CRM services are ~85%–95% of outpatient payments.

#### Proposed Medicare Physician Fee Schedule Highlights

Proposed changes are expected to reduce payment rates to all physicians, in all specialties, by 21.5%. Medicare is required by law to use a specific formula that has resulted in drastic reductions since 2002. Congress has, however, intervened each year since then to reverse these cuts.

This year, in addition to the overall cuts, Medicare has proposed reduced payments for CRM and EP procedures. The proposal to shift dollars to primary care is part of the broader effort among policy makers and payers to incentivize primary care in the US.

The scope of the physician payment rate cuts, even without the impact of the 21.5% reduction are below:

- Physician payments for ICD and PM implants are proposed to **decrease** by 4.5%.
- Physician payments for device monitoring of ICD and PM are proposed to **decrease** by 15 to 20%.
- Physician payments for EP evaluations and catheter ablations are proposed to **decrease** by 11%.
- Of the 22 new quality measures recommended for physicians to report, 3 are focused on heart failure.

## Base Payment Changes for Outpatient CRM and EP Services Proposed for 2010

The table below shows a sample of the proposed 2010 APC rates for CRM procedures compared to 2009 APC rates and the base payment rates for CRM and EP APCs.

APC	Descriptor <sup>^</sup>	CY* 2010 vs CY 2009 Change	CY 2010 Proposed Base Reimbursement Rate**
<b>CRM</b>			
089	Pacemaker – Single chamber system	1%	\$7,885
090	Pacemaker – Single chamber PG only	3%	\$6,567
0655	Pacemaker – Dual chamber system	0%	\$9,535
0654	Pacemaker – Dual chamber PG only	2%	\$7,375
0108	ICD system implant	-3%	\$27,499
0107	ICD PG only	1%	\$21,352
0418+0108†	CRT-D system implant	5%	\$34,399
0418	LV lead only	51%	\$13,802

\*The percent changes shown are base payments and will vary for individual hospitals.

\*\*Final rates may vary due to geographic wage differences.

<sup>^</sup>CPT 2009 short descriptor

†50% discount applied to 0418 due to "T" status: "Significant Procedure, Multiple Reduction Applies."

See addendum D1 in OPSS regulation and notices.

## Base Payment Changes for Outpatient CRM and EP Services Proposed for 2010

The table below shows a sample of the proposed 2010 CPT code payment rates for CRM and EP procedures compared to 2009 rates and the base reimbursement rate.

APC	Descriptor <sup>^</sup>	CY* 2010 vs CY 2009 Change	CY 2010 Proposed Base Reimbursement Rate**
<b>EP</b>			
8000	Cardiac Electrophysiologic Eval and Ablation Composite	6%	\$10,019
0084	Level I EP Procedures	4%	\$715
0085	Level II EP Procedures	9%	\$3,542
0086	Level III EP Procedures	11%	\$7,374

\*The percent changes shown are base payments and will vary for individual hospitals.

\*\*Final rates may vary due to geographic wage differences.

<sup>^</sup>CPT 2009 short descriptor

## Base Payment Changes for Physician CRM and EP Services Proposed for 2010

The table below shows a sample of the proposed 2010 CPT rates for CRM and EP procedures compared to 2009 rates and the base reimbursement rate.

CPT	Procedure	CY 2010 vs CY 2009	CY 2010 Proposed Base Reimbursement Rate*
<b>Pacemaker</b>			
33208	Insertion or replacement of permanent pacemaker with transvenous electrode(s); atrial and ventricular	-4%	\$511
33214	Upgrade of implanted pacemaker system, conversion of single-chamber system to dual chamber system (includes removal of previously placed pulse generator, testing of existing lead, insertion of new lead, insertion of new pulse generator)	-4%	\$469
33224	Insertion of pacing electrode, cardiac venous system, for left ventricular pacing, with attachment to previously placed pacemaker or pacing cardioverter-defibrillator pulse generator (including revision of pocket, removal, insertion, and/or replacement of generator)	-8%	\$476
33225	Insertion of pacing electrode, cardiac venous system, for left ventricular pacing, at time of insertion of pacing cardioverter-defibrillator or pacemaker pulse generator (including upgrade to dual chamber system) (List separately in addition to code for primary procedure)	-9%	\$424
33226	Repositioning of previously implanted cardiac venous system (left ventricular) electrode (including removal, insertion, and/or replacement of generator)	-8%	\$458
33249	Insertion or repositioning of electrode lead(s) for single- or dual-chamber pacing cardioverter defibrillator and insertion of pulse generator	-5%	\$875
33240	Insertion of single- or dual-chamber pacing cardioverter-defibrillator pulse generator	-5%	\$447
71090-26	Insertion of pacemaker, fluoroscopy and radiography, radiological supervision and interpretation	-9%	\$27

\*Final rates may vary due to geographic wage differences.

CPT	Procedure	CY 2010 vs CY 2009	CY 2010 Proposed Base Reimbursement Rate*
<b>Electrophysiology</b>			
93609-26	Intraventricular and/or intra-atrial mapping of tachycardia site(s) with catheter manipulation to record from multiple sites to identify origin of tachycardia (List separately in addition to code for primary procedure)	-11%	\$250
93613	Intracardiac electrophysiologic 3-dimensional mapping (List separately)	-11%	\$350
93619-26	Comprehensive electrophysiologic evaluation with right atrial pacing and recording, right ventricular pacing and recording, His bundle recording, including insertion and repositioning of multiple electrode catheters, without induction or attempted induction of arrhythmia	-12%	\$366
93620-26	Comprehensive electrophysiologic evaluation including insertion and repositioning of multiple electrode catheters with induction or attempted induction of arrhythmia; with right atrial pacing and recording, right ventricular pacing and recording, His bundle recording	-12%	\$580
93621-26	;with left atrial pacing and recording from coronary sinus or left atrium (List separately in addition to code for primary procedure)	-11%	\$105
93622-26	;with left ventricular pacing and recording (List separately in addition to code for primary procedure)	-10%	\$155
93623-26	Programmed stimulation and pacing after intravenous drug infusion (List separately in addition to code for primary procedure)	-11%	\$143
93650	Intracardiac catheter ablation of atrioventricular node function, atrioventricular conduction for creation of complete heart block, with or without temporary pacemaker placement	-11%	\$534
93651	Intracardiac catheter ablation of arrhythmogenic focus; for treatment of supraventricular tachycardia by ablation of fast or slow atrioventricular pathways, accessory atrioventricular connections or other atrial foci, singly or in combination	-11%	\$813
93652	Intracardiac catheter ablation of arrhythmogenic focus; for treatment of ventricular tachycardia	-11%	\$883
93662-26	Intracardiac echocardiography during therapeutic/ diagnostic intervention, including imaging supervision and interpretation (List separately in addition to code for primary procedure)	-9%	\$140

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## Additional Information

[Medicare's press release](#)

[2010 OPPTS and ASC proposed rule](#)

[2010 PFS proposed rule](#)

For questions related to the reimbursement of CRM and EP products, call 1.800.CARDIAC (227.3422) and ask for the Reimbursement Customer Support Line.

## Sources

Centers for Medicare and Medicaid Services. Medicare Claims Processing. July 2009 Update of the 2010 proposed Physician Fee Schedule (PFS) payments: Medicare Program; Payment Policies Under the Physician Fee Schedule and Other Revisions to Part B for CY 2009; E-Prescribing Exemption for Computer-Generated Facsimile Transmissions; and Payment for Certain Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS). July 1, 2009. Available at: <http://www.cms.hhs.gov/PhysicianFeeSched/PFSFRN/itemdetail.asp?filterType=none&filterByDID=0&sortByDID=4&sortOrder=descending&itemID=CMS1216674&intNumPerPage=10>. Accessed July 2009.

Centers for Medicare and Medicaid Services. Medicare Program; Medicare FY 2010 Hospital Outpatient Prospective Payment System Proposed Rule. July 1, 2009. Available at: <http://www.cms.hhs.gov/apps/media/press/factsheet.asp?Counter=3449&intNumPerPage=10&checkDate=&checkKey=&srchType=1&numDays=3500&srchOpt=0&srchData=&keywordType=All&chkNewsType=6&intPage=&showAll=&pYear=&year=&desc=&cboOrder=date>. Accessed July 1, 2009.

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CRM5-1304-0709