



## JETSTREAM

# 2023 CODING AND REIMBURSEMENT GUIDE

**The procedure codes listed below are applicable to Femoral/Proximal Popliteal cases involving Jetstream.**

Claims must contain the appropriate CPT/HCPCS/ICD-10-PCS code(s) for the specific site of service to indicate the items and services that are furnished. The tables below contain a list of possible CPT/HCPCS/ICD-10-PCS codes that may be used to bill for Jetstream. Providers should select the most appropriate code(s) and modifier(s) with the highest level of detail to describe the service(s) actually rendered. CPT © Copyright 2022 American Medical Association. All rights reserved. CPT is a registered trademark of the American Medical Association.

### HOSPITAL OUTPATIENT CY2023 (01/1/2023-12/31/2023)

Service Provided		Hospital Outpatient		Physician Fee Schedule <sup>1</sup>	
CPT® Code	CPT® Description	APC	Payment <sup>3</sup>	RVUs	Facility
37225	Revascularization, endovascular, open or percutaneous, femoral, popliteal artery(s), unilateral; with atherectomy, includes angioplasty within the same vessel, when performed	5193	\$10,615	11.75	\$589
37227	Revascularization, endovascular, open or percutaneous, femoral, popliteal artery(s), unilateral; with transluminal stent placement(s) and atherectomy, includes angioplasty within the same vessel, when performed	5194	\$17,178	14.25	\$707
37229	Revascularization, endovascular, open or percutaneous, tibial, peroneal artery, unilateral, initial vessel; with atherectomy, includes angioplasty within the same vessel, when performed	5194	\$17,178	13.80	\$684
37231	Revascularization, endovascular, open or percutaneous, tibial, peroneal artery, unilateral, initial vessel; with transluminal stent placement(s) and atherectomy, includes angioplasty within the same vessel, when performed	5194	\$17,178	14.75	\$723
+37233	Revascularization, endovascular, open or perc, tibial/ peroneal artery, uni, ea add'l vessel; w atherectomy, incl PTA same vessel (Add-on code)	NA	NA	6.50	\$318
+37235	Revascularization, endovascular, open or perc, tibial/ peroneal artery, uni, ea add'l vessel; w stent(s) & atherectomy, incl PTA same vessel (Add-on code)	NA	NA	7.80	\$365

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C-codes are used to report devices used in combination with device-related procedures for hospital outpatient services.

- **C1714** – Catheter, transluminal atherectomy, rotational. This applies to both the JetStream SC and XC Atherectomy Catheters. There is no C-code for the console.

### HOSPITAL INPATIENT FY2023 (10/1/2022-09/30/2023)

Service Provided		Hospital Inpatient		Physician Fee Schedule <sup>1</sup>	
CPT®	CPT® Description	MS DRG <sup>4</sup>	Payment <sup>5</sup>	Facility	
37226	Revascularization, endovascular, open or percutaneous, femoral, popliteal artery(s), unilateral; with transluminal stent placement(s), includes angioplasty within the same vessel, when performed	• 252	\$22,933	\$511	
		• 253	\$18,342		
		• 254	\$12,543		
37227	Revascularization, endovascular, open or percutaneous, femoral, popliteal artery(s), unilateral; with transluminal stent placement(s) and atherectomy, includes angioplasty within the same vessel, when performed	• 270	\$35,070	\$707	
		• 271	\$23,897		
		• 272	\$17,810		

- Denotes DRG assigned to patient w/ MCC (Major Complications or Comorbidities)
- Denotes DRG assigned to patient w/ CC (Complications or Comorbidities)
- Denotes DRG assigned to patient w/o MCC or CC

The Medicare Reimbursement values for each MS-DRG, while specific to your hospital, do not include pass-through payments or New Technology Add-On Payment (NTAP) as these are calculated on a case-by-case basis.

## HOSPITAL INPATIENT ICD-10-PCS CODES

	ICD- PCS- Description
03CY3ZZ	Extirpation of Matter from Upper Artery, Perc Approach
04CK3ZZ	Extirpation of Matter from Right Femoral Artery, Perc Approach
04CL3ZZ	Extirpation of Matter from Left Femoral Artery, Perc Approach
04CM3ZZ	Extirpation of Matter from Right Popliteal Artery, Perc Approach
04CN3ZZ	Extirpation of Matter from Left Popliteal Artery, Perc Approach
04CP3ZZ	Extirpation of Matter from Right Anterior Tibial Artery, Perc Approach
04CQ3ZZ	Extirpation of Matter from Left Anterior Tibial Artery, Perc Approach
04CR3ZZ	Extirpation of Matter from Right Posterior Tibial Artery, Perc Approach
04CS3ZZ	Extirpation of Matter from Left Posterior Tibial Artery, Perc Approach
04CT3ZZ	Extirpation of Matter from Right Peroneal Artery, Perc Approach
04CU3ZZ	Extirpation of Matter from Left Peroneal Artery, Perc Approach
04CY3ZZ	Extirpation of Matter from Lower Artery, Perc Approach

The coding options listed within this guide are commonly used codes and are not intended to be an all-inclusive list. We recommend consulting your relevant manuals for appropriate coding options

### SOURCES:

- 2023 Physician Fee Schedule. CMS-1770-F. <https://www.cms.gov/medicare/medicare-fee-service-payment/physicianfeeschedpfs-federal-regulation-notices/cms-1770-f>  
2023 Conversion Factor of \$33.8872
- 2023 ASC Payment. CMS-1772-FC ASC. <https://www.cms.gov/medicare/medicare-fee-service-payment/ascpaymentasc-regulations-and-notices/cms-1772-fc>
- 2023 OPPS Payment. CMS-1772-FC. <https://www.cms.gov/medicare/medicare-fee-service-payment/hospitaloutpatientppshospital-outpatient-regulations-and-notices/cms-1772-fc>
- MS-DRG V40.0 <https://www.cms.gov/files/zip/icd10-ms-drg-definitions-manual-text-files-v40.zip>
- 2023 IPPS Payment. CMS-1771-FC. <https://www.cms.gov/medicare/acute-inpatient-pps/fy-2023-ipp-pps-final-rule-home-page#Data>

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