



## **Summary of Final FY2026 Medicare Policy and Payment Changes Hospital Inpatient Prospective Payment System (IPPS)**

On July 31st, the Centers for Medicare and Medicaid Services (CMS) released the final rule for the FY2026 Medicare Hospital Inpatient Prospective Payment System (IPPS). FY2026 reimbursement rates and policy updates are effective for hospital discharges on or after October 1, 2025. Overall, Medicare operating payment rates for hospital inpatient services will increase 2.6 % in FY2026.

The table on page 2 of this document lists the final national average payment rates and percentage changes for selected Atrial Fibrillation Solutions (AFS) procedures.

### **Policy Updates**

The PulseSelect™ New Technology Add-On Payment (NTAP) will remain active for FY 2026. The NTAP will continue to be applicable to FARAPULSE with a maximum payment of \$6,337.50 and is set to expire on September 30, 2027.

### **Payment Updates for Select Procedures of Interest**

Per the final rule, national base inpatient payment rates for LAAC and intracardiac ablation procedures will increase effective October 1. Facility-specific rates may vary based on geographic adjustments and hospital characteristics.

- The final payment for MS-DRG 273, Percutaneous and Other Intracardiac Procedures with MCC, is \$30,020, reflecting an 8% increase.
- The final payment for MS-DRG 274, Percutaneous and Other Intracardiac Procedures without MCC, is \$23,953, reflecting an 8% increase.
- The final payment for MS-DRG 317, Concomitant Left Atrial Appendage Closure and Cardiac Ablation, is \$48,656, reflecting a 10% increase.

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Table 1. FY2026 Final Hospital Inpatient Payment Rate Changes for Key MS-DRGs

Medicare Hospital Inpatient Payment Rates: FY2025 Final vs FY2026 Final						
MS-DRG	DRG Description	FY2025 Final Rate*	FY2026 Final Rate**	FY2025 Final vs FY2026 Final	FY2025 Final vs FY2026 Final	FY2025 Final vs FY2026 Final
				\$	%	Weighted Avg. %
AF Solutions (AFS)						
Intracardiac Ablation and Watchman LAA Closure						8%
273	Percutaneous and Other Intracardiac Procedures w MCC	\$27,906	\$30,020	\$2,114	8%	
274	Percutaneous and Other Intracardiac Procedures w/o MCC	\$22,273	\$23,953	\$1,680	8%	
Concomitant Watchman and Ablation						10%
317	Concomitant Left Atrial Appendage Closure and Cardiac Ablation	\$44,149	\$48,656	\$4,507	10%	

\*FY2025 Final (IFC) calculated rates assume the hospital submits quality data and is a meaningful EHR user  
\*FY2025 Correction Notice payment rate is calculated using the 10% cap applied.  
\*\*FY 2026 Final calculated rates assume the hospital submits quality data and is a meaningful EHR user (2.0% increase)  
\*\*FY 2026 Final payment rate is calculated using the 10% cap applied.

Legend
Greater than -10% decrease
Between -5% to -10% decrease
Between 5% to 10% increase
Greater than 10% increase

Comments/Questions

If you have questions or would like additional information, contact:

WATCHMAN	AF Solutions
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Read the full FY2026 Final IPPS Rule (CMS-1833-F) at the following link: [FY 2026 IPPS Final Rule Home Page | CMS](#)

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It is also always the provider's responsibility to understand and comply with Medicare national coverage determinations (NCD), Medicare local coverage determinations (LCD), and any other coverage requirements established by relevant payers which can be updated frequently. Boston Scientific recommends that you consult with your payers, reimbursement specialists, and/or legal counsel regarding coding, coverage, and reimbursement matters.

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