

# 2024 Reimbursement and Coding Guide

Surgical Heart Valve Therapy



Edwards

# Surgical Valve Repair and Replacement Procedures

## Physician Billing Codes

Clinicians use Current Procedural Terminology (CPT)<sup>1</sup> codes to bill for procedures and services. Each CPT code is assigned unique Relative Value Units (RVUs), which are used to determine payment by the Centers for Medicare & Medicaid Services (CMS) and other payers. Some commonly billed CPT codes used to describe procedures related to Edwards Lifesciences' Heart Valve technologies are listed below.<sup>2</sup> This list may not be comprehensive or complete. These procedures may be subject to the CMS multiple procedure reduction rule. When applicable, a payment reduction of 50% is applied to all payment amounts except the procedure with the greatest RVUs, which is paid at 100% unless exempt by CPT instructions or payer policy. CPT payments have not been adjusted for sequestration.

CPT Code <sup>1</sup>	Description	CY2024 Medicare National Average Physician Payment <sup>2</sup> Facility Setting
<b>Aortic</b>		
33390	Valvuloplasty, aortic valve, open, with cardiopulmonary bypass; simple <i>(ie, valvotomy, debridement, debulking, and/or simple commissural resuspension)</i> <i>(1st of 2 replacements for 33400, 33401, 33403)</i>	\$1,880
33391	Valvuloplasty, aortic valve, open, with cardiopulmonary bypass; complex <i>(eg, leaflet extension, leaflet resection, leaflet reconstruction, or annuloplasty)</i> <i>(2nd of 2 replacements for 33400, 33401, 33403)</i>	\$2,228
33405	Replacement, aortic valve, open, with cardiopulmonary bypass; with prosthetic valve other than homograft or stentless valve	\$2,222
33406	Replacement, aortic valve, with cardiopulmonary bypass; with allograft valve (freehand)	\$2,823
33410	Replacement, aortic valve, with cardiopulmonary bypass; with stentless tissue valve	\$2,486
33411	Replacement, aortic valve; with aortic annulus enlargement, noncoronary sinus	\$3,275
33412	Replacement, aortic valve; with transventricular aortic annulus enlargement (Konno procedure)	\$3,060
33413	Replacement, aortic valve; by translocation of autologous pulmonary valve with allograft replacement of pulmonary valve (Ross procedure)	\$3,137
92986	Percutaneous balloon valvuloplasty; aortic valve	\$1,298
<b>Bentall</b>		
33863	Ascending aorta graft, with cardiopulmonary bypass, with aortic root replacement using valved conduit and coronary reconstruction <i>(e.g. Bentall)</i>	\$3,068
<b>Mitral</b>		
33420	Valvotomy, mitral valve; closed heart	\$1,419
33422	Valvotomy, mitral valve; open heart, with cardiopulmonary bypass	\$1,626
33425	Valvuloplasty, mitral valve, with cardiopulmonary bypass	\$2,671
33426	Valvuloplasty, mitral valve, with cardiopulmonary bypass; with prosthetic ring	\$2,333
33427	Valvuloplasty, mitral valve, with cardiopulmonary bypass; radical reconstruction, with or without ring	\$2,385
33430	Replacement, mitral valve, with cardiopulmonary bypass	\$2,742
92987	Percutaneous balloon valvuloplasty; mitral valve	\$1,337
<b>Tricuspid</b>		
33460	Valvectomy, tricuspid valve, with cardiopulmonary bypass	\$2,336
33463	Valvuloplasty, tricuspid valve; without ring insertion	\$3,006
33464	Valvuloplasty, tricuspid valve; with ring insertion	\$2,384
33465	Replacement, tricuspid valve, with cardiopulmonary bypass	\$2,693
33468	Tricuspid valve repositioning and plication for Ebstein anomaly	\$2,399
<b>Pulmonary</b>		
33471	Valvotomy, pulmonary valve, closed heart; via pulmonary artery	\$1,306
33475	Replacement pulmonary valve	\$2,271
33999	Unlisted procedure, cardiac surgery	Contractor Priced
92990	Percutaneous balloon valvuloplasty; pulmonary valve	\$1,071

# Surgical Valve Repair and Replacement Procedures

## Inpatient Hospital Billing DRGs

Medicare reimburses inpatient hospital services under the Inpatient Prospective Payment System (IPPS), which bases payment on Medicare Severity-Diagnosis Related Groups (MS-DRGs). All services and supplies provided during the inpatient admission are bundled into a single MS-DRG payment rate for each patient regardless of the length of stay, intensity of treatments, or number of procedures performed. MS-DRG assignment is usually determined based on the patient's primary diagnosis or procedure performed, as indicated by the ICD-10-PCS codes on the billing form. DRG payments have not been adjusted for sequestration.

MS-DRG <sup>3</sup>	Description	FY2024 Medicare National Average Payment
212	Concomitant Aortic and Mitral Valve Procedures	\$75,412
216	Cardiac valve procedures and other major cardiothoracic procedures with cardiac catheterization with MCC	\$67,953
217	Cardiac valve procedures and other major cardiothoracic procedures with cardiac catheterization with CC	\$44,567
218	Cardiac valve procedures and other major cardiothoracic procedures with cardiac catheterization without MCC or CC	\$39,886
219	Cardiac valve procedures and other major cardiothoracic procedures without cardiac catheterization with MCC	\$53,991
220	Cardiac valve procedures and other major cardiothoracic procedures without cardiac catheterization with CC	\$36,721
221	Cardiac valve procedures and other major cardiothoracic procedures without cardiac catheterization without MCC or CC	\$32,548

## ICD - 10 - PCS Procedure Codes for Inpatient Hospital Billing

### ICD-10-PCS<sup>4</sup> Description

#### Aortic

02RF07Z	Replacement of Aortic Valve with Autologous Tissue Substitute, Open Approach
02RF0KZ	Replacement of Aortic Valve with Nonautologous Tissue Substitute, Open Approach
02RF0JZ	Replacement of Aortic Valve with Synthetic Substitute, Open Approach
02RF08Z	Replacement of Aortic Valve with Zooplastic Tissue, Open Approach
02RF47Z	Replacement of Aortic Valve with Autologous Tissue Substitute, Percutaneous Endoscopic Approach
02RF48Z	Replacement of Aortic Valve with Zooplastic Tissue, Percutaneous Endoscopic Approach
02RF4KZ	Replacement of Aortic Valve with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach
02RF4JZ	Replacement of Aortic Valve with Synthetic Substitute, Percutaneous Endoscopic Approach

#### Rapid Deployment Valves

02RF08N	Replacement of Aortic Valve with Zooplastic Tissue, using Rapid Deployment Technique, Open Approach
02RF48N	Replacement of Aortic Valve with Zooplastic Tissue, using Rapid Deployment Technique, Percutaneous Endoscopic Approach

#### Bentall (Use both of these codes together for Bentall procedures utilizing KONECT RESILIA aortic valved conduit)

02RF08Z	Replacement of Aortic Valve with Zooplastic Tissue, Open Approach
02RX0JZ	Replacement of Thoracic Aorta, Ascending/Arch with Synthetic Substitute, Open Approach

# ICD - 10 - PCS Procedure Codes for Inpatient Hospital Billing

## ICD-10-PCS<sup>4</sup> Description

### Mitral Valve Replacement

02RG08Z	Replacement of Mitral Valve with Zooplastic Tissue, Open Approach
02RG0JZ	Replacement of Mitral Valve with Synthetic Substitute, Open Approach
02RG0KZ	Replacement of Mitral Valve with Nonautologous Tissue Substitute, Open Approach
02RG07Z	Replacement of Mitral Valve with Autologous Tissue Substitute, Open Approach

## ICD-10-PCS<sup>4</sup> Description

### Mitral Valve Repair

02UG07E	Supplement Mitral Valve created from Left Atrioventricular Valve with Autologous Tissue Substitute, Open Approach
02UG07Z	Supplement Mitral Valve with Autologous Tissue Substitute, Open Approach
02UG08E	Supplement Mitral Valve created from Left Atrioventricular Valve with Zooplastic Tissue, Open Approach
02UG08Z	Supplement Mitral Valve with Zooplastic Tissue, Open Approach
02UG0JE	Supplement Mitral Valve created from Left Atrioventricular Valve with Synthetic Substitute, Open Approach
02UG0JZ	Supplement Mitral Valve with Synthetic Substitute, Open Approach
02UG0KE	Supplement Mitral Valve created from Left Atrioventricular Valve with Nonautologous Tissue Substitute, Open Approach
02UG0KZ	Supplement Mitral Valve with Nonautologous Tissue Substitute, Open Approach
02WG07Z	Revision of Autologous Tissue Substitute in Mitral Valve, Open Approach
02WG08Z	Revision of Zooplastic Tissue in Mitral Valve, Open Approach
02WG0JZ	Revision of Synthetic Substitute in Mitral Valve, Open Approach
02WG0KZ	Revision of Nonautologous Tissue Substitute in Mitral Valve, Open Approach
02QG0ZE	Repair of Mitral Valve created from Left Atrioventricular Valve, Open Approach
02QG0ZZ	Repair of Mitral Valve, Open Approach

## ICD-10-PCS<sup>4</sup> Description

### Pulmonary

02NH0ZZ	Release Pulmonary Valve, Open Approach
02QH0ZZ	Repair Pulmonary Valve, Open Approach
02RH07Z	Replacement of Pulmonary Valve with Autologous Tissue Substitute, Open Approach
02RH0KZ	Replacement of Pulmonary Valve with Nonautologous Tissue Substitute, Open Approach
02RH0JZ	Replacement of Pulmonary Valve with Synthetic Substitute, Open Approach

## ICD-10-PCS<sup>4</sup> Description

### Tricuspid

02NJ0ZZ	Release Tricuspid Valve, Open Approach
02QJ0ZZ	Repair Tricuspid Valve, Open Approach
02RJ07Z	Replacement of Tricuspid Valve with Autologous Tissue Substitute, Open Approach
02RJ0KZ	Replacement of Tricuspid Valve with Nonautologous Tissue Substitute, Open Approach
02RJ0JZ	Replacement of Tricuspid Valve with Synthetic Substitute, Open Approach
02RJ08Z	Replacement of Tricuspid Valve with Zooplastic Tissue, Open Approach
02UJ07Z	Supplement Tricuspid Valve with Autologous Tissue Substitute, Open Approach
02UJ0KZ	Supplement Tricuspid Valve with Nonautologous Tissue Substitute, Open Approach
02UJ0JZ	Supplement Tricuspid Valve with Synthetic Substitute, Open Approach
02UJ08Z	Supplement Tricuspid Valve with Zooplastic Tissue, Open Approach

**For detailed information regarding coding and reimbursement, please contact the dedicated Edwards Reimbursement Hotline: (888) 352-0901 or [reimbursementsupport@edwards.com](mailto:reimbursementsupport@edwards.com)**

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#### References

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2. For all Medicare payments for physicians, the multiple procedure reduction rule may apply. Consult with your coding and billing staff, and payer policy for further guidance. National average Medicare payment is calculated using the updated Conversion Factor of \$33.2875. The Medicare Physician Fee Schedule for Calendar Year 2024 Final Rule was issued on November 2, 2023. National average is based on factors such as geography, teaching vs. non-teaching hospital, rural vs. urban area, etc. and your payment may be different based on these factors. This payment will differ for commercial payers. Payments are effective January 1, 2024 through December 31, 2024.
3. Centers for Medicare & Medicaid Services. FY2023 Inpatient Prospective Payment System (IPPS) Final Rule issued August 01, 2022. Payments are effective October 1, 2023 through September 30, 2024.
4. 2024 ICD-10 PCS | CMS [Internet]. [Cited 2022 Nov11]. Available from: <https://www.cms.gov/medicare/coding-billing/icd-10-codes/2024-icd-10-pcs>



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