

**Ambulatory Surgery Center Payment System, Hospital Outpatient Prospective Payment System and Physician Fee Schedule**

Medicare has made some significant changes to its Ambulatory Surgery Center payment system (ASC) [Table 1], Hospital Outpatient Prospective Payment System (OPPS) [Table 2] and Physician Fee Schedule (PFS) for 2017. In the charts below, we have identified some of the most significant changes. We have chosen to focus on changes greater than or equal to \$100 for ASC and OPPS from 2016 to 2017. There were no changes to the PFS that met this criterion. If you have questions about specific information in this document, or perhaps something you do not see in this document, please do not hesitate to contact our reimbursement team at 800.468.1379 or [reimbursement@cookmedical.com](mailto:reimbursement@cookmedical.com).

**Table 1: Changes in Ambulatory Surgery Center Reimbursement for Procedures of Interest**

CPT Code	Procedural Description	2017 Ambulatory Surgery Center Fee Schedule	2016 Ambulatory Surgery Center Fee Schedule	Payment Difference
33215	Repositioning of previously implanted transvenous pacemaker or implantable defibrillator (right atrial or right ventricular) electrode	\$1,274.48	\$482.30	\$792.18
33249	Insertion or replacement of permanent implantable defibrillator system, with transvenous lead(s), single or dual chamber	\$26,771.52	\$26,657.76	\$113.76

**NOTE:** This is not an all-inclusive list of procedural code changes.

**Table 2: Changes in Hospital Outpatient Reimbursement for Procedures of Interest**

CPT Code	Procedural Description	2017 Hospital Outpatient Payment	2016 Hospital Outpatient Payment	Payment Difference
33215	Repositioning of previously implanted transvenous pacemaker or implantable defibrillator (right atrial or right ventricular) electrode	\$2,359.60	\$862.51	\$1,497.09

**NOTE:** This is not an all-inclusive list of procedural code changes.

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