# Percutaneous Cardiac Lead Extraction™

#### 2024 CODING AND REIMBURSEMENT GUIDE

Coverage, coding and payment for medical procedures and devices can be confusing. This guide was developed to assist with Medicare reporting and reimbursement of percutaneous cardiac lead extraction procedures. Cook lead extraction systems include an assortment of mechanical extraction sheaths, locking stylets and snares for use in both superior and femoral approach extraction procedures. If you have any questions, please contact our reimbursement team at 800.468.1379 or by e-mail at Reimbursement@cookmedical.com.

## Coverage

Medicare carriers may issue local coverage decisions (LCDs) listing criteria that must be met prior to coverage. Physicians are urged to review these policies (<a href="www.cms.gov/medicare-coverage-database/search.aspx">www.cms.gov/medicare-coverage-database/search.aspx</a>) and contact their carriers' medical directors (<a href="www.cms.hhs.gov/apps/contacts">www.cms.hhs.gov/apps/contacts</a>) or commercial insurers to determine if a procedure is covered.

## Coding

The following CPT® code(s) may be used to report percutaneous removal of cardiac leads:

33234	Removal of transvenous pacemaker electrode(s); single lead system, atrial or ventricular				
33235	Removal of transvenous pacemaker electrode(s); dual lead system				
	Removal of single or dual chamber implantable defibrillator electrode(s); by transvenous extraction				
33244	(For removal and replacement of an implantable defibrillator pulse generator and transvenous electrode[s], use 33241 in conjunction with either 33243 or 33244 and 33249)				

Percutaneous repositioning of cardiac leads is typically reported using the following CPT® code(s):

33215	Repositioning of previously implanted transvenous pacemaker or implantable defibrillator (right atrial or right ventricular) electrode		
33249	Insertion or replacement of permanent implantable defibrillator system, with transvenous lead(s), single or dual chamber		

### C-Codes

In the outpatient setting, when devices are used in combination with device-related procedures, hospitals and ASCs should report C-codes. While the device codes are not paid separately from the procedure, the assignment of charges and reporting of these codes, identify device-related costs. Please refer to chart below for lead management product C-codes or access the Cook Medical C-Code Finder at <a href="https://www.cookmedical.com/support/">https://www.cookmedical.com/support/</a>

HCPCS	CPCS Description Device		
C1773	Retrieval device, insertable	Evolution® Shortie RL & Evolution® RL dilator sheath sets & Liberator Beacon Tip Locking Stylet	
C1893	Introducer/sheath, guiding, intracardiac electrophysiological, fixed-curve, other than peel-away	Byrd dilator sheath, Curved Femoral Introducer Sheath & SteadySheath® Evolution® dilator sheaths	
C1776	Guidewire	Included in sets	



# **Payment**

## 2024 Reimbursement for Cardiac Lead Extraction™

		Ambulatory Surgery Center	Outpatient Hospital		Physician Services		
CPT® Code Transve	Procedure Description enous Lead Removal	Facility Payment (National Medicare Avg <sup>1</sup> )	APC	Facility Payment (National Medicare Avg <sup>2</sup> )	Fee When Service Is Provided in the Hospital or ASC (National Medicare Avg <sup>3</sup> )		
33234	Removal of transvenous pacemaker electrode(s); single lead system, atrial or ventricular	\$2,689.74	5221	\$3,745.52	\$467.53		
33235	Removal of transvenous pacemaker electrode(s); dual lead system	\$2,037.13	5221	\$3,745.52	\$614.53		
33244	Removal of single or dual chamber implantable defibrillator electrode(s); by transvenous extraction	This service is not included on Medicare's list of approved procedures	5221	\$3,745.52	\$832.91		
Transvenous Lead Repositioning							
33215	Repositioning of previously implanted transvenous pacemaker or implantable defibrillator (right atrial or right ventricular) electrode	\$1,548.04	5183	\$3,040.18	\$300.23		
33249	Insertion or replacement of permanent implantable defibrillator system, with transvenous lead(s), single or dual chamber	\$24,843.19	5232	\$31,378.60	\$879.07		

<sup>&</sup>lt;sup>1</sup> 2024 Medicare Ambulatory Surgery Center Fee Schedule

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2024 physician fees for your local area can be found at the following CMS links:

http://www.cms.gov/apps/physician-fee-schedule

or

https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeeSched/index.html



<sup>&</sup>lt;sup>2</sup> 2024 Medicare Hospital Outpatient Prospective Payment System (OPPS) Fee Scheduled

<sup>&</sup>lt;sup>3</sup> 2024 Medicare Physician Fee Schedule