



Summary of CY2025 Medicare Proposed Rules for Hospital Outpatient Prospective Payment, Ambulatory Surgical Center, & Physician Fee Schedule

Atrial Fibrillation Solutions

On July 10, CMS released proposed payment rules for the Medicare Physician Fee Schedule (PFS), the Hospital Outpatient Prospective Payment System (OPPS), and Ambulatory Surgery Centers (ASC). Comments on these proposed rules are due September 9, 2024. Once finalized, policies and payment rates will take effect on January 1, 2025.

At the end of this document are tables that list the proposed OPPS and PFS payment rates and the percentage changes for AF Solutions (AFS) procedures of interest. AFS procedures are not currently covered in ASC settings per Medicare.

- Table 1: Hospital Outpatient Payments
- Table 2: Physician Fee Schedule

Hospital Outpatient Prospective Payment System & Ambulatory Surgical Center

CMS is proposing an overall payment increase of +2.6% for both HOPDs and ASCs for Calendar Year 2025.

- Ablation (SVT, VT, and AF) payment rates are proposed to increase by +7%.
- Left Atrial Appendage Closure (LAAC) remains on the Inpatient-Only list; therefore, no OPPS payment is available.
- CMS did not opt to add cardiac ablation procedures to the Ambulatory Surgery Center (ASC) Covered Procedures List (CPL), therefore these procedures will not be covered or paid by Medicare if performed in the ASC.

Physician Fee Schedule

CMS is proposing an across-the-board -2.8% decrease in Medicare CY 2025 physician payments due to legally mandated cuts and budget neutrality adjustments associated with a proposal to increase payment for complex office visits. The proposed rates also reflect the fourth year of a 4-year-phase-in of clinical labor rate changes.

- CMS proposed a -3% decrease for the Left Atrial Appendage Closure (LAAC) procedure.
- Ablation (SVT, VT, and AF) payments rates are proposed to decrease by -3%.

Comments / Questions

If you have questions or would like additional information, contacts are below:

WATCHMAN	AFS
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Source Information

Read the full CY2025 OPPTS/ASC Proposed Rule (CMS-1809-P) at the following link: [CMS-1809-P | CMS](#)

Read the full CY2025 Physician Fee Schedule Proposed Rule (CMS-1807-P) at the following link:

[CMS-1807-P | CMS](#)

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Boston Scientific encourages providers to submit accurate and appropriate claims for services. It is always the provider's responsibility to determine medical necessity, the proper site for delivery of any services, and to submit appropriate codes, charges, and modifiers for services rendered.

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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Payer policies will vary and should be verified prior to treatment for limitations on diagnosis, coding, or site of service requirements.

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.

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Table 1. Hospital Outpatient Payments

HOSPITAL OUTPATIENT CY 2024 Final vs CY 2025 Proposed							
APC	APC Description	Status Indicator		Payment Rate		CY 2024 Final vs CY 2025 Proposed \$	CY 2024 Final vs CY 2025 Proposed %
		CY 2024 Final	CY 2025 Proposed	CY 2024 Final	CY 2025 Proposed		
AF Solutions (Electrophysiology + Watchman)							
5211	Level 1 Electrophysiologic Procedures	J1	J1	\$1,134	\$1,200	\$66	6%
5212	Level 2 Electrophysiologic Procedures (AV Node Ablation or EP Study)	J1	J1	\$7,116	\$7,448	\$332	5%
5213	Level 3 Electrophysiologic Procedures (AF, VT, or SVT Ablation)	J1	J1	\$22,629	\$24,104	\$1,474	7%
5524	Level 4 Imaging without Contrast	S	S	\$526	\$545	\$19	4%
5571	Level 1 Imaging with Contrast	S	S	\$175	\$176	\$1	0%

Data Sources

CY 2024 OPPS Correction Notice Addendum A
CY 2025 OPPS Proposed Notice Addendum A

OPPS Status Indicator & Description

J1	Paid under OPPS; all covered Part B services on the claim are packaged with the primary "J1" service for the claim. Except services with OPPS status indicator of "F", "G", "H", "L" and "U".
S	Paid under OPPS; separate APC payment.

Legend

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

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Table 2. Physician Fee Schedule

Physician Fee Schedule (PFS) CY 2024 Final vs CY 2025 Proposed										
			FACILITY RATE				OFFICE RATE			
CPT® Code	Modifier	CPT® Description	CY 2024 Final	CY 2025 Proposed	CY 2024 Final vs CY 2025 Proposed \$	CY 2024 Final vs CY 2025 Proposed %	CY 2024 Final	CY 2025 Proposed	CY 2024 Final vs CY 2025 Proposed \$	CY 2024 Final vs CY 2025 Proposed %
AF Solutions (Electrophysiology + Watchman)										
Electrophysiology Procedures										
93462		Left heart catheterization by transseptal puncture through intact septum or by transapical puncture (List separately in addition to code for primary procedure)	\$202	\$196	(\$5)	-3%	\$202	\$196	(\$5)	-3%
93600	26	Bundle of His recording	\$113	\$110	(\$3)	-3%	\$113	\$110	(\$3)	-3%
93602	26	Intra-atrial recording	\$111	\$108	(\$2)	-2%	\$111	\$108	(\$2)	-2%
93603	26	Right ventricular recording	\$111	\$108	(\$2)	-2%	\$111	\$108	(\$2)	-2%
93609	26	Intraventricular and/or intra-atrial mapping of tachycardia site(s) with catheter manipulation to record from multiple sites to identify origin of tachycardia (List separately in addition to code for primary procedure)	\$264	\$257	(\$7)	-3%	\$264	\$257	(\$7)	-3%
93610	26	Intra-atrial pacing	\$156	\$152	(\$4)	-2%	\$156	\$152	(\$4)	-2%
93612	26	Intraventricular pacing	\$154	\$150	(\$3)	-2%	\$154	\$150	(\$3)	-2%
93613		Intracardiac electrophysiologic 3-dimensional mapping (List separately in addition to code for primary procedure)	\$284	\$276	(\$8)	-3%	NA	NA	NA	NA
93618	26	Induction of arrhythmia by electrical pacing	\$209	\$204	(\$5)	-2%	\$209	\$204	(\$5)	-2%
93619	26	Comprehensive electrophysiologic evaluation with right atrial pacing and recording, right ventricular pacing and recording, His bundle recording, including insertion and repositioning of multiple electrode catheters, without induction or attempted induction of arrhythmia	\$373	\$362	(\$10)	-3%	\$373	\$362	(\$10)	-3%
93620	26	Comprehensive electrophysiologic evaluation including insertion and repositioning of multiple electrode catheters with induction or attempted induction of arrhythmia; with right atrial pacing and recording, right ventricular pacing and recording, His bundle recording	\$598	\$583	(\$15)	-2%	\$598	\$583	(\$15)	-2%
93621	26	Comprehensive electrophysiologic evaluation including insertion and repositioning of multiple electrode catheters with induction or attempted induction of arrhythmia; with left atrial pacing and recording from coronary sinus or left atrium (List separately in addition to code for primary procedure)	\$80	\$77	(\$2)	-3%	\$80	\$77	(\$2)	-3%
93622	26	Comprehensive electrophysiologic evaluation including insertion and repositioning of multiple electrode catheters with induction or attempted induction of arrhythmia; with left ventricular pacing and recording (List separately in addition to code for primary procedure)	\$164	\$160	(\$4)	-2%	\$164	\$160	(\$4)	-2%
93623	26	Programmed stimulation and pacing after intravenous drug infusion (List separately in addition to code for primary procedure)	\$66	\$52	(\$14)	-21%	\$66	\$52	(\$14)	-21%
93624	26	Electrophysiologic follow-up study with pacing and recording to test effectiveness of therapy,	\$232	\$226	(\$6)	-3%	\$232	\$226	(\$6)	-3%

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		including induction or attempted induction of arrhythmia								
93642	26	Electrophysiologic evaluation of single or dual chamber transvenous pacing cardioverter-defibrillator (includes defibrillation threshold evaluation, induction of arrhythmia, evaluation of sensing and pacing for arrhythmia termination, and programming or reprogramming of sensing or therapeutic parameters)	\$244	\$238	(\$6)	-2%	\$244	\$238	(\$6)	-2%
93644		Electrophysiologic evaluation of subcutaneous implantable defibrillator (includes defibrillation threshold evaluation, induction of arrhythmia, evaluation of sensing for arrhythmia termination, and programming or reprogramming of sensing or therapeutic parameters)	NA	NA	NA	NA	\$189	\$183	(\$6)	-3%
93650		Intracardiac catheter ablation of atrioventricular node function, atrioventricular conduction for creation of complete heart block, with or without temporary pacemaker placement	\$566	\$552	(\$14)	-2%	NA	NA	NA	NA
93653		Comprehensive electrophysiologic evaluation with insertion and repositioning of multiple electrode catheters, induction or attempted induction of an arrhythmia with right atrial pacing and recording and catheter ablation of arrhythmogenic focus, including intracardiac electrophysiologic 3-dimensional mapping, right ventricular pacing and recording, left atrial pacing and recording from coronary sinus or left atrium, and His bundle recording, when performed; with treatment of supraventricular tachycardia by ablation of fast or slow atrioventricular pathway, accessory atrioventricular connection, cavo-tricuspid isthmus or other single atrial focus or source of atrial re-entry	\$813	\$792	(\$21)	-3%	NA	NA	NA	NA
93654		Comprehensive electrophysiologic evaluation with insertion and repositioning of multiple electrode catheters, induction or attempted induction of an arrhythmia with right atrial pacing and recording and catheter ablation of arrhythmogenic focus, including intracardiac electrophysiologic 3-dimensional mapping, right ventricular pacing and recording, left atrial pacing and recording from coronary sinus or left atrium, and His bundle recording, when performed; with treatment of ventricular tachycardia or focus of ventricular ectopy including left ventricular pacing and recording, when performed	\$979	\$955	(\$25)	-3%	NA	NA	NA	NA
93655		Intracardiac catheter ablation of a discrete mechanism of arrhythmia which is distinct from the primary ablated mechanism, including repeat diagnostic maneuvers, to treat a spontaneous or induced arrhythmia (List separately in addition to code for primary procedure)	\$298	\$291	(\$7)	-2%	NA	NA	NA	NA
93656		Comprehensive electrophysiologic evaluation including transseptal catheterizations, insertion and repositioning of multiple electrode catheters with intracardiac catheter ablation of atrial fibrillation by pulmonary vein isolation, including intracardiac electrophysiologic 3-dimensional mapping, intracardiac echocardiography including imaging supervision and interpretation, induction or attempted induction of an arrhythmia including left or right atrial pacing/recording, right ventricular pacing/recording, and His bundle recording, when performed	\$922	\$898	(\$24)	-3%	NA	NA	NA	NA
93657		Additional linear or focal intracardiac catheter ablation of the left or right atrium for treatment of atrial fibrillation remaining after completion of pulmonary vein isolation (List separately in addition to code for primary procedure)	\$298	\$291	(\$7)	-2%	NA	NA	NA	NA

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93662	26	Intracardiac echocardiography during therapeutic/diagnostic intervention, including imaging supervision and interpretation (List separately in addition to code for primary procedure)	\$68	\$67	(\$2)	-2%	\$68	\$67	(\$2)	-2%
Watchman™ Left Atrial Appendage Closure (LAAC) Procedure										
33340		Percutaneous transcatheter closure of the left atrial appendage with endocardial implant, including fluoroscopy, transseptal puncture, catheter placement(s), left atrial angiography, left atrial appendage angiography, when performed, and radiological supervision and interpretation	\$760	\$741	(\$20)	-3%	NA	NA	NA	NA
Computed Tomography (CT)										
75572	26	Computed tomography, heart, with contrast material, for evaluation of cardiac structure and morphology (including 3D image postprocessing, assessment of cardiac function, and evaluation of venous structures, if performed)	\$81	\$79	(\$2)	-2%	\$81	\$79	(\$2)	-2%
75574	26	Computed tomographic angiography, heart, coronary arteries and bypass grafts (when present), with contrast material, including 3D image postprocessing (including evaluation of cardiac structure and morphology, assessment of cardiac function, and evaluation of venous structures, if performed)	\$111	\$109	(\$2)	-2%	\$111	\$109	(\$2)	-2%
Transesophageal Echocardiogram (TEE)										
93312	26	Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); including probe placement, image acquisition, interpretation and report	\$104	\$101	(\$3)	-2%	\$104	\$101	(\$3)	-2%
93355		Echocardiography, transesophageal (TEE) for guidance of a transcatheter intracardiac or great vessel(s) structural intervention(s) (e.g., TAVR, transcatheter pulmonary valve replacement, mitral valve repair, paravalvular regurgitation repair, left atrial appendage occlusion/closure, ventricular septal defect closure) (peri- and intra-procedural), real-time image acquisition and documentation, guidance with quantitative measurements, probe manipulation, interpretation, and report, including diagnostic transesophageal echocardiography and, when performed, administration of ultrasound contrast, Doppler, color flow, and 3D	\$219	\$214	(\$5)	-3%	NA	NA	NA	NA
Intracardiac Echocardiography (ICE)										
93662	26	Intracardiac echocardiography during therapeutic/diagnostic intervention, including imaging supervision and interpretation (List separately in addition to code for primary procedure)	\$68	\$67	(\$2)	-2%	\$68	\$67	(\$2)	-2%

Data Sources

2024 National Physician Fee Schedule RVU File – July Release
Addendum B – RVU & Related Information Used in CY 2025 Proposed Rule

Legend

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