



2025 MEDICARE

Inpatient Reimbursement Prospectus

Due to increasing financial risk to U.S. health care providers, physicians and hospitals have been centered on outcomes-based modifiers to Medicare payments for the last few years. We appreciate the role that Abbott procedures play in Medicare’s reform programs and we believe that opportunities for success in a new era of reform continue to present themselves, such as treatment optimization, improving outcomes and avoiding downstream complications. Abbott believes that opportunities also exist from clinical to economic perspectives to impact patient care and hospital performance. We continue our mission to create relevant technology that improves meaningful patient outcomes, now made even more meaningful considering expanded financial risks posed to U.S. hospitals.

On August 2, 2024, the Centers for Medicare & Medicaid Services (CMS) released the FY 2025 Final Inpatient Prospective Payment System (IPPS) Rule, effective for inpatient services on October 1, 2024. Abbott has analyzed and summarized the varying impact to individual FY 2024 Medicare Severity-Diagnosis Related Group.

(MS-DRG) payments for procedures supported by our technologies or therapy solutions. Please refer to the full FY 2025 Final IPPS Rule to fully understand the changes to individual MS-DRGs.

Medicare IPPS Comparison Chart: FY 2024 vs. FY 2025

BU	Technology	MS-DRG	Description	Severity	FY2024 Final Rule		FY2025 Interim Final Comment Rule			
					Payment	Discharges (National)	Payment	Discharges (National)	% Change (\$)	Change (Discharges)
STRUCTURAL HEART	Surgical Valves	216	Cardiac valve & other major cardiothoracic procedures with cardiac catheterization	MCC	\$67,953	5,376	\$68,875	5,413	1.4%	37
		217		CC	\$44,567	1,821	\$46,087	1,783	3.4%	-38
		218		NA	\$39,886	325	\$42,457	307	6.4%	-18
		219	Cardiac valve & other major cardiothoracic procedures without cardiac catheterization	MCC	\$53,991	12,631	\$55,219	13,362	2.3%	731
		220		CC	\$36,721	10,418	\$37,800	10,405	2.9%	-13
		221		NA	\$32,548	1,491	\$32,775	1,332	0.7%	-159
	212	Concomitant aortic and mitral valve procedures	NA	\$75,412	900	\$77,745	927	3.1%	27	
	Congenital Defects- Ventricular Septal	228	Other cardiothoracic procedures	MCC	\$35,279	4,232	\$35,563	4,501	0.8%	269
		229		CC-16, NA-17	\$22,262	5,146	\$22,168	5,502	-0.4%	356
	TEER and TAVR	266	Endovascular Cardiac Valve Replacement & Supplement Procedure	MCC	\$43,733	21,018	\$42,754	21,681	-2.2%	663
267		NA		\$34,169	38,197	\$33,575	39,799	-1.7%	1,602	

Medicare IPPS Comparison Chart: FY 2024 vs. FY 2025

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					Payment	Discharges (National)	Payment	Discharges (National)	% Change (\$)	Change (Discharges)
STRUCTURAL HEART	Atrial Septal, PFO Closure and LAAC	273	Percutaneous intracardiac procedures	MCC	\$27,285	7,475	\$27,906	7,698	2.3%	223
		274		NA	\$22,691	42,864	\$22,273	50,623	-1.8%	7,759
	LAAC + Ablation	317	Concomitant Left Atrial Appendage Closure & Cardiac Ablation	NA	NA	NA	\$44,149	1,851	NA	1,851
	PDA	270	Other major cardiovascular services	MCC	\$35,406	16,959	\$36,632	16,606	3.5%	-353
		271		CC	\$24,199	12,220	\$24,581	12,294	1.6%	74
		272		NA	\$17,080	4,044	\$17,857	3,918	4.5%	-126
Carotid	034	Carotid artery stent procedure	MCC	\$27,316	1,612	\$27,752	1,872	1.6%	260	
	035		CC	\$16,100	4,539	\$16,234	5,407	0.8%	868	
	036		NA	\$12,660	6,406	\$13,082	7,752	3.3%	1,346	
CABG	231	Coronary bypass with PTCA	MCC	\$56,819	804	\$60,474	709	6.4%	-95	
	232		NA	\$41,650	465	\$43,595	380	4.7%	-85	
	233	Coronary bypass with cardiac catheterization	MCC	\$54,610	10,187	\$55,782	9,844	2.1%	-343	
	234		NA	\$36,394	9,952	\$37,968	9,203	4.3%	-749	
	235	Coronary bypass without cardiac catheterization	MCC	\$41,174	10,825	\$41,993	11,192	2.0%	367	
	236		NA	\$28,295	15,600	\$29,346	15,480	3.7%	-120	
VASCULAR	Coronary (PCI)	321	Percutaneous cardiovascular procedures with intraluminal device with mcc or 4+ arteries/intraluminal devices	MCC	\$20,127	40,895	\$20,316	37,938	0.9%	-2,957
		322	Percutaneous cardiovascular procedures with intraluminal device without mcc	NA	\$12,767	56,809	\$12,911	54,124	1.1%	-2,685
		323	Coronary intravascular lithotripsy with intraluminal device with mcc	MCC	\$28,987	2,109	\$30,397	3,380	4.9%	1,271
		324	Coronary intravascular lithotripsy with intraluminal device without mcc	NA	\$20,785	2,186	\$22,802	3,646	9.7%	1,460
		325	Coronary intravascular lithotripsy without intraluminal device	NA	\$18,514	409	\$20,425	513	10.3%	104
		250	Percutaneous cardiovascular procedures without intraluminal device with mcc	MCC	\$16,459	3,476	\$16,504	3,312	0.3%	-164

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VASCULAR	Coronary	251	Percutaneous cardiovascular procedures without intraluminal device without mcc	NA	\$11,111	3,184	\$11,152	2,956	0.4%	-228	
	Peripheral Vascular Revascularization	252	Other vascular procedures	MCC	\$23,482	21,692	\$24,481	20,045	4.3%	-1,647	
		253		CC	\$17,862	16,915	\$18,220	16,437	2.0%	-478	
		254		NA	\$12,148	6,926	\$12,485	6,338	2.8%	-588	
	Endovascular and Dialysis Circuit Mechanical Thrombectomy	252	Other vascular procedures	MCC	\$23,482	21,692	\$24,481	20,045	4.3%	-1,647	
		253		CC	\$17,862	16,915	\$18,220	16,437	2.0%	-478	
		254		NA	\$12,148	6,926	\$12,485	6,338	2.8%	-588	
	Peripheral Atherectomy, Arterial & Venous Mechanical Thrombectomy, and Vascular Plugs	270	Other major cardiovascular services	MCC	\$35,406	16,959	\$36,632	16,606	3.5%	-353	
		271		CC	\$24,199	12,220	\$24,581	12,294	1.6%	74	
		272		NA	\$17,080	4,044	\$17,857	3,918	4.5%	-126	
	Thrombolysis	299	Peripheral vascular disorders	MCC	\$11,036	14,956	\$11,544	15,233	4.6%	277	
		300		CC	\$7,471	18,694	\$7,640	19,052	2.3%	358	
		301		NA	\$4,970	4,338	\$5,091	4,268	2.4%	-70	
	Cardiac Rhythm Management	ICD Systems and CRT-D	275	Cardiac defibrillator implant with cardiac catheterization and MCC	MCC	\$49,262	3,487	\$50,434	3,595	2.4%	108
			276	Cardiac defibrillator implant with MCC	MCC	\$43,481	3,847	\$44,207	3,503	1.7%	-344
277			Cardiac defibrillator implant without MCC	NA	\$33,484	4,140	\$33,198	4,167	-0.9%	27	
Leadless Pacemaker		228	Other cardiothoracic procedures	MCC	\$35,279	4,232	\$35,563	4,501	0.8%	269	
		229		NA	\$22,262	5,146	\$22,168	5,502	-0.4%	356	
Pacemaker Systems; CRT-P		242	Permanent cardiac pacemaker implant	MCC	\$24,191	15,987	\$24,207	15,532	0.1%	-455	
		243		CC	\$15,947	18,901	\$16,077	19,876	0.8%	975	
		244		NA	\$12,809	9,590	\$12,879	9,660	0.5%	70	
ICDs		245	AICD generator procedures	NA	\$31,727	828	\$34,875	804	9.9%	-24	
		265	AICD lead procedures	NA	\$24,744	425	\$25,457	412	2.9%	-13	
Pacemaker Generator Replacement		258	Cardiac pacemaker device replacement	MCC	\$18,965	607	\$20,022	601	5.6%	-6	
		259		NA	\$13,069	741	\$12,544	734	-4.0%	-7	
Pacemaker Revision and ICMs Implant (ICM for syncope)		260	Cardiac pacemaker revision except device replacement	MCC	\$23,212	2,529	\$24,308	2,435	4.7%	-94	
		261		CC	\$13,176	2,584	\$13,542	2,428	2.8%	-156	
		262		NA	\$11,520	773	\$10,832	809	-6.0%	36	

Medicare IPPS Comparison Chart: FY 2024 vs. FY 2025

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					Payment	Discharges (National)	Payment	Discharges (National)	% Change (\$)	Change (Discharges)
CARDIAC RHYTHM MANAGEMENT	ICMs Implant (ICM for cryptogenic stroke)	040	Peripheral/Cranial Nerve and Other Nervous System Procedures Generator implantation only or replacement (any type)	MCC	\$26,960	3,618	\$26,920	3,649	-0.1%	31
		041		CC	\$15,618	4,888	\$16,116	4,948	3.2%	60
		042		NA	\$12,181	1,655	\$12,543	1,493	3.0%	-162
	Acute Myocardial Infarction (AMI)	280	Acute myocardial infarction, discharged alive	MCC	\$11,108	83,895	\$11,714	86,632	5.5%	2,737
		281		CC	\$6,392	35,238	\$6,578	36,259	2.9%	1,021
		282		NA	\$5,028	14,831	\$5,175	14,831	2.9%	0
		283	Acute myocardial infarction, expired	MCC	\$13,803	9,463	\$13,955	8,882	1.1%	-581
		284		CC	\$5,179	729	\$5,288	673	2.1%	-56
		285		NA	\$3,422	192	\$4,006	146	17.1%	-46
	Conduction Disorders	308	Cardiac arrhythmia and conduction disorders	MCC	\$8,417	52,120	\$8,606	49,978	2.2%	-2,142
		309		CC	\$5,214	60,170	\$5,276	64,283	1.2%	4,113
		310		NA	\$3,872	32,935	\$3,993	33,811	3.1%	876
	ELECTROPHYSIOLOGY	Catheter Ablations	273	Percutaneous intracardiac procedures	MCC	\$27,285	7,475	\$27,906	7,698	2.3%
274			NA		\$22,691	42,864	\$22,273	50,623	-1.8%	7,759
LAAC + Ablation		317	Concomitant Left Atrial Appendage Closure & Cardiac Ablation	NA			\$44,149	1,851		1851
HEART FAILURE	Left Ventricular Assist Device (LVAD)	001	Heart Transplant or Implant of Heart Assist System	MCC	\$189,734	1,844	\$201,024	1,990	6.0%	146
		002		NA	\$85,728	41	\$78,642	54	-8.3%	13
	Acute Mechanical Circulatory System (MCS)	003	ECMO or Tracheostomy with MV >96 Hours or PDX Except Face, Mouth and Neck with major O.R. procedure	NA	\$149,276	11,144	\$152,947	10,100	2.5%	-1,044
		215	Other heart assist systems implant	NA	\$71,520	3,817	\$75,610	3,901	5.7%	84
		216	Cardiac valve and other major cardiothoracic procedures with cardiac catheterization with MCC	NA	\$67,953	5,376	\$68,875	5,413	1.4%	37
		217	Cardiac valve and other major cardiothoracic procedures with cardiac catheterization with CC	NA	\$44,567	1,821	\$46,087	1,783	3.4%	-38
		218	Cardiac valve and other major cardiothoracic procedures with cardiac catheterization without CC/MCC	NA	\$39,886	325	\$42,457	307	6.4%	-18

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	Technology	MS-DRG	Description	Severity	FY2024 Final Rule		FY2025 Interim Final Comment Rule			
					Payment	Discharges (National)	Payment	Discharges (National)	% Change (\$)	Change (Discharges)
HEART FAILURE	Acute Mechanical Circulatory System (MCS)	219	Cardiac valve and other major cardiothoracic procedures without cardiac catheterization with MCC	NA	\$53,991	12,631	\$55,219	13,362	2.3%	731
		220	Cardiac valve and other major cardiothoracic procedures without cardiac catheterization with CC	NA	\$36,721	10,418	\$37,800	10,405	2.9%	-13
		221	Cardiac valve and other major cardiothoracic procedures without cardiac catheterization without CC/MCC	NA	\$32,548	1,491	\$32,775	1,332	0.7%	-159
	PA Pressure Monitor	264	Other circulatory system operating room procedures	NA	\$22,867	8,310	\$24,943	8,303	9.1%	-7
NEUROMODULATION	Deep Brain Stimulation (DBS)	023	System implant, multi-array, rechargeable or non-rechargeable, plus leads	MCC	\$39,691	12,418	\$40,715	12,293	2.6%	-125
		024	System implant, multi-array, rechargeable or non-rechargeable, plus leads	NA	\$26,528	4,683	\$27,131	4,929	2.3%	246
		025	Lead placement only, or lead revision	MCC	\$30,919	22,306	\$31,917	22,540	3.2%	234
		026	OR System implant, single array generator plus leads	CC	\$20,676	6,499	\$21,828	6,313	5.6%	-186
		027	OR System implant, single array generator plus leads	NA	\$17,034	7,703	\$17,612	7,698	3.4%	-5
		040	Generator only implant or replacement, single/ multi array non-rechargeable or multi-array rechargeable	MCC	\$26,960	3,618	\$26,920	3,649	-0.1%	31
		041	Generator only implant or replacement, single/ multi array non-rechargeable or multi-array rechargeable	CC	\$15,618	4,888	\$16,116	4,948	3.2%	60
		042	Generator only implant or replacement, single/ multi array non-rechargeable or multi-array rechargeable	NA	\$12,181	1,655	\$12,543	1,493	3.0%	-162
	Spinal Cord Stimulation (SCS) for Pain	028	Whole System implantation or replacement(generator plus leads)	MCC	\$42,192	2,237	\$43,387	2,261	2.8%	24
		029	Spinal procedures or spinal neurostimulators	CC	\$24,003	3,046	\$23,955	3,120	-0.2%	74
		030	Spinal Procedures without CC/MCC	NA	\$16,237	972	\$15,882	880	-2.2%	-92
		040	Peripheral/Cranial Nerve and Other Nervous System Procedures Generator implantation only or replacement (any type)	MCC	\$26,960	3,618	\$26,920	3,649	-0.1%	31
		041	Peripheral/Cranial Nerve and Other Nervous System Procedures Generator implantation only or replacement (any type)	CC	\$15,618	4,888	\$16,116	4,948	3.2%	60
		042	Peripheral/Cranial Nerve and Other Nervous System Procedures Generator implantation only or replacement (any type)	NA	\$12,181	1,655	\$12,543	1,493	3.0%	-162
518		Back & neck procedures excluding spinal fusion, or disc device/neurostimulator	MCC	\$25,568	1,986	\$25,577	2,146	0.0%	160	

Medicare IPPS Comparison Chart: FY 2024 vs. FY 2025

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					Payment	Discharges (National)	Payment	Discharges (National)	% Change (\$)	Change (Discharges)
NEUROMODULATION	Spinal Cord Stimulation (SCS) for Pain	519	Back and neck procedure except spinal fusion with CC	CC	\$13,783	6,875	\$14,073	7,141	2.1%	266
		520	Back and neck procedure except spinal fusion without CC/MCC	NA	\$10,023	4,051	\$10,228	4,008	2.0%	-43
		981	Extensive OR procedure unrelated to to principal Dx	MCC	\$33,190	22,306	\$33,926	20,672	2.2%	-1,634
		982		CC	\$17,406	9,924	\$17,472	9,956	0.4%	32
		983		NA	\$11,449	1,863	\$11,905	1,980	4.0%	117
MISCELLANEOUS	Major Chest	163	Major chest procedures	MCC	\$33,003	11,457	\$32,894	12,752	-0.3%	1295
		164		CC	\$17,857	14,308	\$17,963	14,999	0.6%	691
		165		NA	\$13,138	6,726	\$13,302	6,935	1.2%	209
	Aortic Heart Assist	268	Aortic and heart assist procedures except pulsation balloon	MCC	\$47,994	2,687	\$47,584	2,751	-0.9%	64
		269		NA	\$29,117	11,554	\$29,693	11,375	2.0%	-179
	Aortic Heart Assist	286	Circulatory disorders except AMI, w card cath	MCC	\$15,093	38,606	\$15,795	38,705	4.7%	99
		287		NA	\$7,573	32,576	\$7,777	33,159	2.7%	583
	Heart Failure	291	Heart failure & shock	MCC	\$8,989	327,029	\$9,312	322,325	3.6%	-4,704
		292		CC	\$5,997	14,521	\$6,146	13,903	2.5%	-618
		293		NA	\$3,931	2,423	\$3,916	2,048	-0.4%	-375
	Peripheral Vascular	299	Peripheral vascular disorders	MCC	\$11,036	14,956	\$11,544	15,233	4.6%	277
		300		CC	\$7,471	18,694	\$7,640	19,052	2.3%	358
		301		NA	\$4,970	4,338	\$5,091	4,268	2.4%	-70
	Vascular: Other Kidney and Urinary Tract	673	Other kidney & urinary tract procedures	MCC	\$25,892	14,883	\$29,899	11,076	15.5%	3,807
		674		CC	\$16,679	5,957	\$16,474	8,518	-1.2%	2,561
675		NA		\$11,108	345	\$11,171	580	0.6%	235	

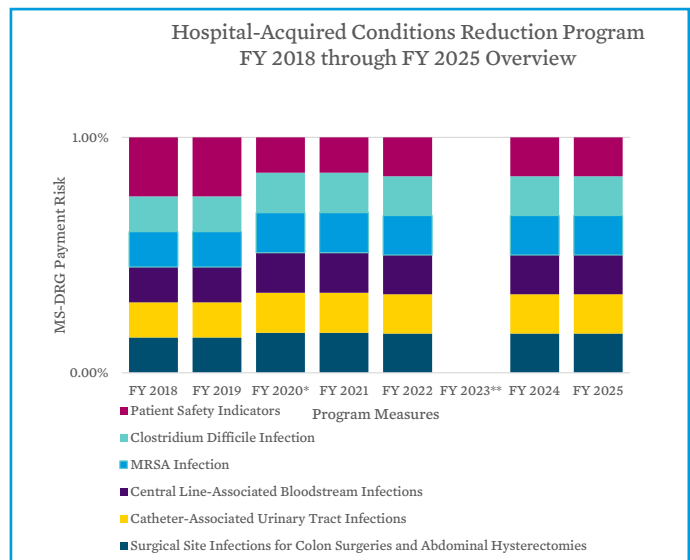
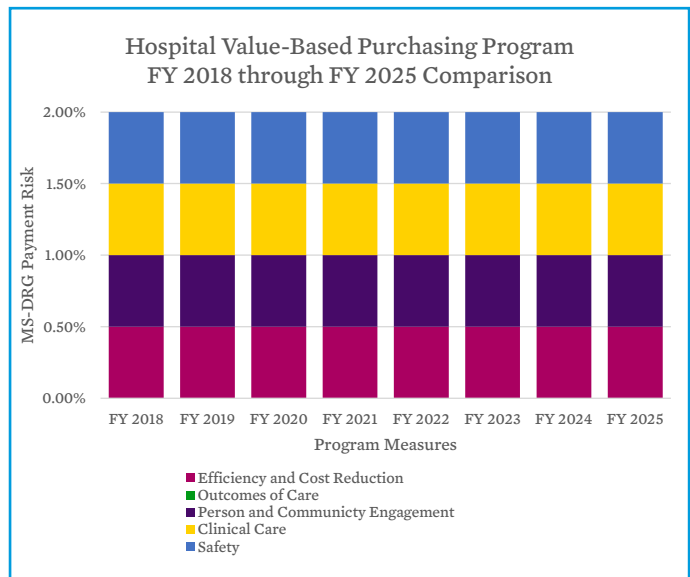
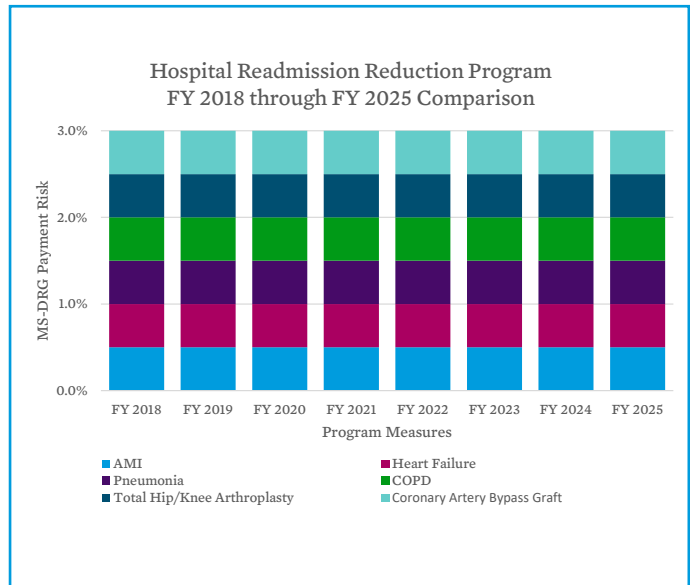
Medicare IPPS Comparison Chart: FY 2024 vs. FY 2025

MEDICARE PAYMENT RISK CONTINUES

As planned, Medicare will continue the scope and level of potential penalties of its payment reform initiatives, including the Hospital Readmissions Reduction Program and the Value-Based Purchasing Program. Risk to inpatient MS-DRG payments will continue at 3% and 2% respectively. The FY 2018 through FY 2025 makeup and impact of these two payment reform programs are illustrated in the charts on this page. As payment reforms continue to impact healthcare management and as Medicare changes the way in which health care providers are paid, Abbott will continue to explore programs that seek to improve meaningful patient outcomes through shared risk.

For more information on how Medicare’s rulemaking or reform initiatives may impact your facility or institution, please contact Abbott’s Reimbursement team at 855-569-6430 or at AbbottEconomics@abbott.com.

**CMS paused the use of all measures from scoring and payment calculations in the FY 2023 program year.



Medicare IPPS Comparison Chart: FY 2024 vs. FY 2025

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REFERENCES

Hospital Inpatient Prospective Payment-Final Rule FY2025 Payment Rates. CMS-1808-F: <https://www.cms.gov/medicare/payment/prospective-payment-systems/acute-inpatient-pps/fy-2025-ippa-final-rule-home-page>

Hospital Inpatient Prospective Payment-Final Rule FY2024 Payment Rates. CMS-1785-F: <https://www.cms.gov/medicare/acute-inpatient-pps/fy-2024-ippa-final-rule-home-page>

Tables created by Abbott Health Economics and Reimbursement team based on analysis of Medicare 2025 IPPS Final rule

Table(s) sources:

1. CMS Hospital Readmissions Reduction Program (HRRP) Resources. <https://www.qualitynet.org/inpatient/hrrp/resources>
2. CMS Hospital-Acquired Condition Reduction Program Measures. <https://qualitynet.cms.gov/inpatient/hac/measures>
3. CMS Hospital Inpatient Overview. <https://qualitynet.cms.gov/inpatient>

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