



COVERAGE AND FAQ GUIDE

PEDIATRIC HEARTMATE 3™

LEFT VENTRICULAR ASSIST DEVICE (LVAD)

This guide provides coverage and reimbursement information for the implantable HeartMate 3™ Left Ventricular Assist Device (LVAD) procedures. Abbott offers reimbursement support via email at DG-VADReimbursement@abbott.com. Customer reimbursement support is subject to the disclaimers set forth in this guide. The FAQ provides better visibility to coding and coverage for LVADs in supporting pediatric use.

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HOSPITAL CODING¹

ICD-10 PCS CODE	DESCRIPTION
02HA0QZ	Insertion of Implantable Heart Assist System into Heart, Open Approach
02PA0QZ	Removal of implantable heart assist system from heart, open approach
02WA0QZ	Revision of implantable heart assist system in heart, open approach

PHYSICIAN CODING²

CPT ⁺ CODE	DESCRIPTION
33979	Insertion of ventricular assist device, implantable, intracorporeal, single ventricle
33980	Removal of ventricular assist device, implantable, intracorporeal, single ventricle
33982	Replacement of ventricular assist device pump(s); implantable intracorporeal, single ventricle, without cardiopulmonary bypass
33983	Replacement of ventricular assist device pump(s); implantable intracorporeal, single ventricle, with cardiopulmonary bypass
93750	Interrogation of ventricular assist device, in person, with physician or other qualified health care professional analysis of device parameters (e.g., drivelines, alarms, power surges), review of device function (e.g., flow and volume status, septum status, recovery), with programming, if performed, and report

FAQ

CODING

Are there different ICD-10 Procedure Coding System (PCS) and CPT⁺ codes for reporting LVAD implantation in pediatrics? If so, what are the appropriate codes and payment?³

No. The codes presented above are utilized for both pediatric and adult left ventricular assist device (LVAD) procedures. There are no hospital or physician codes that differentiate LVAD procedures by age.

Does coding associated with insertion or removal of LVADs have a global surgical period?⁴

No. CPT⁺ codes associated with both the insertion of a LVAD and explant of a LVAD do not have global billing periods. Any follow-up or post-op visits, including LVAD interrogation, can be billed and paid separately beginning the day after implantation or the day after implant for recovery.

What is the device management code as it relates to performance checks and patient follow-up? Are there limitations with reporting this procedure?⁵

Effective on January 1, 2011, the American Medical Association CPT⁺ Editorial Panel created a CPT⁺ code specific for interrogation of a LVAD, as described by CPT⁺ Code 93750 ((interrogation of ventricular assist device [LVAD], in person, with physician analysis of device parameters [e.g., drivelines, alarms, power surges], review of device function [e.g., flow and volume status, septum status, recovery], with programming, if performed, and report)).

This code is not reported with any of the surgical implantation codes (33975, 33976, 33979 or 33981–33983), but may be reported in conjunction with an evaluation and management visit code (e.g., 99211–99215) and may be reimbursed in addition to the visit code.

Documentation in the patient's chart must support both the level chosen for the visit as well as the LVAD interrogation code. There are no National Correct Coding Initiative (NCCI) edits for the interrogation code. It can be billed once, per day, per patient, per specialty, if medical necessity is adequately documented. Nurse practitioners should check with both their compliance department as well as their state-specific scope of services before independently billing for LVAD interrogation.

What should be included when performing a LVAD interrogation?³

Per CPT⁺, the LVAD interrogation should include:

- Analysis of the device parameters.
- Review of device function and programming, if performed.
- A report on the service.

This procedure should not be reported on the day of the LVAD surgery.

COVERAGE

Do commercial payers cover LVAD implantation and follow-up for pediatric patients?

Yes. Many commercial payers have specific coverage policies for LVAD implantation and follow-up for pediatrics, while others have one LVAD policy that covers both adult and pediatric use. It is recommended that clinicians and patients check the plan requirements and obtain prior authorization, if required, to support the implant procedure and follow-up care.

Are there limitations to the types of coverage, such as bridge to transplantation and destination therapy?

Generally, no. But it is important to verify the health plans' requirements if additional clinical criteria must be present to support bridge to transplantation or destination therapy.

Does Medicaid cover LVAD implantation and follow-up for pediatric patients?

Medicaid policies vary from state to state, so it is important to verify coverage with your local and state Medicaid plans.

Do commercial payers cover replacement of LVAD supplies and accessories?

Yes. As with other items needed for home use, obtaining pre-authorization prior discharge is highly recommended. Commercial payers allow billing post-discharge for these items, but frequently they opt to reimburse upon discharge.

Commercial payers may reimburse for replacement accessories and supplies when the accessory or supply is past its useful life, but a prior authorization is vital.

REIMBURSEMENT QUESTIONS AND RESOURCES

If I have reimbursement questions, where can I get additional information?

Please email us at DG-VADReimbursement@abbott.com or contact us through the reimbursement hotline. Hotline support is available at 855-569-6430 from 8:30 a.m. to 5 p.m. Central Time, Monday through Friday. Customer reimbursement support is subject to the disclaimers set forth in this guide.

Additionally, you can visit our reimbursement website to find resources such as Coding and Coverage, Reimbursement Webinars, Medicare Resources and Prior Authorization and Denial Management documents at: [Resources for Medical Reimbursement | Abbott \(cardiovascular.abbott\)](https://resourcesformedicalreimbursement.abbott.com)

What should I do if I receive a denial for my pediatric patient for the LVAD implant?

If your prior authorization or claim is denied, there are processes in place to appeal the decision. Please refer to health plan policies regarding timelines and requirements to best support the appeals process.

IMPORTANT SAFETY INFORMATION

Rx Only

Brief Summary: Prior to using these devices, please review the Instructions for Use for a complete listing of indications, contraindications, warnings, precautions, potential adverse events and directions for use.

HeartMate 3™ LVAS Indications: The HeartMate 3™ Left Ventricular Assist System is indicated for providing short- and long-term mechanical circulatory support (e.g., as bridge to transplant or myocardial recovery, or destination therapy) in adult and pediatric patients with advanced refractory left ventricular heart failure and with an appropriate body surface area.

HeartMate 3™ LVAS Contraindications: The HeartMate 3 Left Ventricular Assist System is contraindicated for patients who cannot tolerate, or who are allergic to, anticoagulation therapy.

HeartMate 3™ LVAS Adverse Events: Adverse events that may be associated with the use of the HeartMate 3 Left Ventricular Assist System are: death, bleeding, cardiac arrhythmia, localized infection, right heart failure, respiratory failure, device malfunctions, driveline infection, renal dysfunction, sepsis, stroke, other neurological event (not stroke-related), hepatic dysfunction, psychiatric episode, venous thromboembolism, hypertension, arterial non-central nervous system (CNS) thromboembolism, pericardial fluid collection, pump pocket or pseudo pocket infection, myocardial infarction, wound dehiscence, hemolysis (not associated with suspected device thrombosis) or pump thrombosis.

References

1. CMS 2024 ICD-10 PCS. <https://www.cms.gov/medicare/icd-10/2024-icd-10-pcs>
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3. Verhovshek J., VAD Interrogation and Programming. AAPC. <https://www.aapc.com/blog/29982-vad-interrogation-and-programming/>
4. CMS 2023 Global Surgery Booklet MLN907166. <https://www.cms.gov/files/document/mln907166-global-surgery-booklet.pdf>
5. AAPC 2013 Learn VAD Management to Help Failing Coding. <https://www.aapc.com/blog/25506-learn-vad-management-to-help-failing-coding/>

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