



**remedē® System
2019 Coding and Reimbursement Guide**

This guide contains hospital coding and reimbursement information for procedures associated with placement of the remedē® System to treat central sleep apnea. Additional coding and reimbursement questions may be submitted to reimbursement@respocardia.com.

Hospital Outpatient Procedure Reporting

Hospitals use HCPCS Level I (eg, CPT®) and HCPCS Level II codes to report hospital outpatient services. Medicare Payment Status Indicators, Ambulatory Payment Classifications (APC), and national average payments are provided for commonly reported remedē® System procedures.

CPT® Code ¹	Description	OPPS APC	OPPS Status Indicator	2019 Medicare National Average Payment ²
Insertion/Replacement				
0424T	Insertion or replacement of neurostimulator system for treatment of central sleep apnea; complete system (transvenous placement of right or left stimulation lead, sensing lead, implantable pulse generator)	5464	J1	\$27,697.85
0425T	sensing lead only	5462	J1	\$5,979.53
0426T	stimulation lead only	5463	J1	\$18,707.16
0427T	pulse generator only	5463	J1	\$18,707.16
Removal				
0428T	Removal of neurostimulator system for treatment of central sleep apnea; pulse generator only	5461	Q2	\$2,879.80
0429T	sensing lead only	5461	Q2	\$2,879.80
0430T	stimulation lead only	5461	Q2	\$2,879.80
0431T	Removal and replacement of neurostimulator system for treatment of central sleep apnea, pulse generator only	5463	J1	\$18,707.16
Repositioning				
0432T	Repositioning of neurostimulator system for treatment of central sleep apnea; stimulation lead only	5461	T	\$2,879.80
0433T	sensing lead only	5461	T	\$2,879.80
Programming				
0434T	Interrogation device evaluation implanted neurostimulator pulse generator system for central sleep apnea	5742	S	\$117.54
0435T	Programming device evaluation of implanted neurostimulator pulse generator system for central sleep apnea; single session	5742	S	\$117.54
0436T	during sleep session	5724	S	\$912.79

Hospital Inpatient ICD-10-PCS Codes

ICD-10-PCS Code ³	Description
0JH60DZ	Insertion of multiple array stimulator generator into chest subcutaneous tissue
05H33MZ	Insertion of neurostimulator lead into right innominate (brachiocephalic) vein
05H43MZ	Insertion of neurostimulator lead into left innominate (brachiocephalic) vein
05H03MZ	Insertion of neurostimulator lead into azygos vein

NOTE: Medicare hospital Inpatient cases involving the use of the remedē System are eligible for New Technology Add-On Payment. These cases should be identified with ICD-10-PCS Codes 0JH60DZ and 05H33MZ in combination with either 05H43MZ or 05H03MZ.⁴



ICD-10-CM Diagnosis Codes

ICD-10-CM Code ⁵	Descriptor
G47.31	Central Sleep Apnea
Z45.42	Encounter for adjustment and management of neuropacemaker; brain, peripheral nerve, spinal cord

Device Reporting

HCPCS Level II device codes are required to be reported to Medicare hospital outpatients. The following HCPCS Level II C-Codes may be appropriate for Medicare hospital outpatient reporting. Some non-Medicare payers recognize HCPCS Level II L-Codes. The following HCPCS Level II L-Codes may be appropriate for non-Medicare payers.

HCPCS Level II Device Crosswalk

Device Category	Device Description	Model Number(s)	HCPCS C-Code(s) ⁶	HCPCS L-code(s) ⁶
IPG	Implantable Pulse Generator (IPG)	1001	C1823	L8686
	External Pulse Generator	1006		
Lead	L Stimulation Lead	2001, 2002, 2003, 2004	C1823	L8680
	LQ Stimulation Lead	5045, 5055, 5065, 5085		
	LQS Stimulation Lead	4045, 4055, 4065, 4085		
	R Stimulation Lead	3101, 3102, 3103, 3104, 3105, 3106, 3201, 3202, 3203, 3204, 3205, 3206		
Programmer	System Programmer & Wand	1002A/1004A/1004A-F	C1787	L8681

NOTE: Medicare hospital outpatient cases involving the use of the remedē System are eligible for Transitional Pass-Through Payment.⁷ These cases should identify the remedē System leads and IPG with the HCPCS code C1823 to be eligible for Transitional Pass-Through Payment.⁸

HCPCS Level II Device Descriptions

HCPCS Code	HCPCS Long Description ⁶
C1787	Patient programmer, neurostimulator
C1823	Generator, neurostimulator (implantable), non-rechargeable, with transvenous sensing and stimulation leads.
L8686	Implantable neurostimulator pulse generator, single array, non-rechargeable, includes extension
L8680	Implantable neurostimulator electrode, each
L8681	Patient programmer (external) for use with implantable programmable neurostimulator pulse generator, replacement only

Disclaimer: The information provided in this guide is general reimbursement information only; it is not legal advice, nor is it advice about how to code, complete or submit any claim for payment, nor is it intended to increase or maximize reimbursement by any third-party payer. All coding and reimbursement information is subject to change without notice. The content provided by the Center for Medicare and Medicaid Services is updated frequently. It is the responsibility of the health services provider to confirm the appropriate coding required by their local Medicare carriers, fiscal intermediaries, and commercial payers.

Indication for use: The remedē® System is an implantable phrenic nerve stimulator indicated for the treatment of moderate to severe central sleep apnea (CSA) in adult patients.

Contraindications: The remedē® System is contraindicated for use in patients with an active infection or patients known to require magnetic resonance imaging (MRI).

See the Instructions for Use for complete information regarding the procedure, indications for use, contraindications, warnings, precautions, and potential adverse events. Rx Only.



References

- ¹ Current Procedural Terminology (CPT[®]) Professional Edition 2019. Copyright 2018 American Medical Association. All rights reserved.
- ² CMS-1695-FC; Changes to Hospital Outpatient Prospective Payment and Ambulatory Surgical Center Payment Systems and Quality Reporting Programs. CY2019 NFRM Addendum A. Effective through December 31, 2019.
- ³ CMS ICD-10 Procedure Coding System (ICD-10-PCS) 2019 Tables and Index.
- ⁴ CMS-1694-F. FY2019 IPPS Final Rule. Vol. 83, No. 160 Pg. 41320.
- ⁵ ICD-10-CM Expert for Physicians and Hospitals, 2018. AAPC.
- ⁶ 2019 Alpha-Numeric HCPCS File.
- ⁷ CMS-1695-FC. CY2019 OPPS Final Rule. Vol. 83, No. 225 Pg. 58939.
- ⁸ January 2019 Integrated Outpatient Code Editor (I/OCE) Specifications Version 20.0. Pg 49.