

AAA Facility Coding and Reimbursement

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Outpatient Facility Services

CPT Code ¹	Description for AAA Screening	Ambulatory Payment Classification (APC) ²	Description	Status Indicator*	2024 Medicare National Average Reimbursement²
76706	Ultrasound, abdominal aorta, real time with image documentation, screening study for abdominal aortic aneurysm (AAA)	5522	Level 2 Imaging without Contrast	S	\$105

^{*} Status Indicator S = Procedure or Service, Not Discounted When Multiple

Inpatient Facility Services

MS-DRG assignment is based on the principal and secondary diagnosis codes as well as the principle and secondary procedure codes. MCC-Major Complications and Comorbidities CC-Complications and Comorbidities.

MS-DRG ³	Description	2024 Medicare National Average Reimbursement ⁴		
Abdominal Aorta				
252	Other Vascular Procedures with MCC	\$23,482		
253	Other Vascular Procedures with CC	\$17,862		
254	Other Vascular Procedures without CC/MCC	\$12,148		
268	Aortic and Heart Assist Procedures Except Pulsation Balloon with MCC	\$47,994		
269	Aortic and Heart Assist Procedures Except Pulsation Balloon without MCC	\$29,117		
270	Other Major Cardiovascular Procedures with MCC	\$35,406		
271	Other Major Cardiovascular Procedures with CC	\$24,199		
272	Other Major Cardiovascular Procedures without CC/MCC	\$17,080		
Iliac Aneurysm				
270	Other Major Cardiovascular Procedures with MCC	\$35,406		
271	Other Major Cardiovascular Procedures with CC	\$24,199		
272	Other Major Cardiovascular Procedures without CC/MCC	\$17,080		

ICD-10-PCS Procedures

ICD-10-PCS⁵	Description			
Abdominal Aorta				
04R007Z	Replacement of Abdominal Aorta with Autologous Tissue Substitute, Open Approach			
04R00JZ	Replacement of Abdominal Aorta with Synthetic Substitute, Open Approach			
04R00KZ	Replacement of Abdominal Aorta with Nonautologous Tissue Substitute, Open Approach			
04R047Z	Replacement of Abdominal Aorta with Autologous Tissue Substitute, Percutaneous Endoscopic Approach			
04R04JZ	Replacement of Abdominal Aorta with Synthetic Substitute, Percutaneous Endoscopic Approach			
04R04KZ	Replacement of Abdominal Aorta with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach			
04V03DZ	Restriction of Abdominal Aorta, with Intraluminal Device, Percutaneous Approach			
04V04DZ	Restriction of Abdominal Aorta, with Intraluminal Device, Percutaneous Endoscopic Approach			
04V03DJ	Restriction of Abdominal Aorta, with Intraluminal Device, Temporary, Percutaneous Approach			
04V04DJ	Restriction of Abdominal Aorta, with Intraluminal Device, Temporary, Percutaneous Endoscopic Approach			
04U03JZ	Supplement of Abdominal Aorta with Synthetic Substitute, Percutaneous Approach			
04U04JZ	Supplement of Abdominal Aorta with Synthetic Substitute, Percutaneous Endoscopic Approach			
Iliac Aneurysm				
04VC3DZ	Restriction of Right Common Iliac Artery with Intraluminal Device, Percutaneous Approach			
04VD3DZ	Restriction of Left Common Iliac Artery with Intraluminal Device, Percutaneous Approach			
04VE3DZ	Restriction of Right Internal Iliac Artery with Intraluminal Device, Percutaneous Approach			
04VF3DZ	Restriction of Left Internal Iliac Artery with Intraluminal Device, Percutaneous Approach			
04VH3DZ	Restriction of Right External Iliac Artery with Intraluminal Device, Percutaneous Approach			
04VJ3DZ	Restriction of Left External Iliac Artery with Intraluminal Device, Percutaneous Approach			
Intra-aneurysm Sac Pressure Monitoring				
02HW30Z	Insertion of pressure sensor monitoring device into thoracic aorta, Percutaneous Approach			
Intravascular Ultrasound Non-Coronary				
4A033B1	Measurement of Arterial Pressure, Peripheral, Percutaneous Approach			

ICD-10-CM Diagnoses

The following ICD-10-CM Diagnosis codes are typically reported for Abdominal Aortic Aneurysm services and procedures. This is not an exhaustive list of ICD-10-CM diagnosis codes. Reporting Secondary diagnosis will be in accordance with guidelines. Physicians are responsible for selecting the most appropriate code(s) to reflect the patient's medical condition.

ICD-10-CM ⁶	Description
A52.01	Syphilitic aneurysm of aorta
170.0	Atherosclerosis of aorta
I70.I	Atherosclerosis of renal artery
170.8	Atherosclerosis of other arteries
171.02	Dissection of abdominal aorta
171.3	Abdominal aortic aneurysm, ruptured
171.4	Abdominal aortic aneurysm, without rupture
171.8	Aortic aneurysm of unspecified site, ruptured
172.3	Aneurysm of iliac artery
172.4	Aneurysm of artery of lower extremity
174.11	Embolism and thrombosis of thoracic aorta
174.5	Embolism and thrombosis of iliac artery
177.72	Dissection of iliac artery
Z13.6	Encounter for screening for cardiovascular disorders

RESOURCES

- 1. AMA Current Procedural Terminology (CPT) Manual 2024
- 2. CY2024 Hospital Outpatient Prospective Payment System Final Rule, Addendum B (CMS-1786-FC)
- 3. 2024 DRG Expert, A Comprehensive Guidebook to the DRG Classification System Using the ICD-10-CM and ICD-10 PCS Code Set, Optum 360, LLC
- $4.\,FY2024\,Inpatient\,Prospective\,Payment\,System\,Final\,Rule\,Impact\,File\,and\,Table\,5\, (CMS-1785-F)$
- 5. ICD-10-PCS Expert 2024 The Complete Official Code Set, Copyright 2024 Optum 360, LLC
- 6. ICD-10-CM 2024, The Complete Official Codebook, AMA Copyright 2024 Optum 360, LLC

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