

- We are reorganizing and consolidating several of the current device-dependent APCs and the CY 2014 C-APCs.
- We are expanding the comprehensive APC payment policy to include all device-dependent APCs, except for APCs 0427, 0622, and 0652.
- We are creating two other new C-APCs (C-APC 0067 and C-APC 0351).
- We are establishing new complexity adjustment criteria:
 - Frequency of 25 or more claims reporting the HCPCS code combination (the frequency threshold); and
 - Violation of the “2 times” rule (the cost threshold).
- We are establishing a policy to package all add-on codes, although we evaluate claims reporting a single primary service code reported in combination with an applicable add-on code (we refer readers to Table 8 below for the list of applicable add-on codes) for complexity adjustments.

Addendum J to this final rule with comment period (which is available via the Internet on the CMS Web site) contains all of the data related to the comprehensive APC payment policy, including the list of complexity adjustments.

TABLE 7.—CY 2015 C-APCs

Clinical Family*	C-APC	APC Title	CY 2015 Payment
AICDP	0090	Level II Pacemaker/Similar Procedures	\$6,542.78
AICDP	0089	Level III Pacemaker/Similar Procedures	\$9,489.74
AICDP	0655	Level IV Pacemaker/Similar Procedures	\$16,400.98
AICDP	0107	Level I ICD and Similar Procedures	\$22,907.64
AICDP	0108	Level II ICD and Similar Procedures	\$30,806.39
BREAS	0648	Level IV Breast and Skin Surgery	\$7,461.40
ENTXX	0259	Level VII ENT Procedures	\$29,706.85
EPHYS	0084	Level I Electrophysiologic Procedures	\$872.92
EPHYS	0085	Level II Electrophysiologic Procedures	\$4,633.33
EPHYS	0086	Level III Electrophysiologic Procedures	\$14,356.62

Clinical Family*	C-APC	APC Title	CY 2015 Payment
EYEXX	0293	Level IV Intraocular Procedures	\$8,446.54
EYEXX	0351	Level V Intraocular Procedures	\$23,075.30
GIXXX	0384	GI Procedures with Stents	\$3,173.83
NSTIM	0061	Level II Neurostim./Related Procedures	\$5,288.58
NSTIM	0039	Level III Neurostim./Related Procedures	\$17,099.35
NSTIM	0318	Level IV Neurostim./Related Procedures	\$26,152.16
ORTHO	0425	Level V Musculoskeletal Procedures	\$10,220.00
PUMPS	0227	Implantation of Drug Infusion Device	\$15,566.34
RADTX	0067	Single Session Cranial SRS	\$9,765.40
UROGN	0202	Level V Gynecologic Procedures	\$3,977.63
UROGN	0385	Level I Urogenital Procedures	\$6,822.35
UROGN	0386	Level II Urogenital Procedures	\$13,967.97
VASCX	0083	Level I Endovascular Procedures	\$4,537.45
VASCX	0229	Level II Endovascular Procedures	\$9,624.10
VASCX	0319	Level III Endovascular Procedures	\$14,840.64

***Clinical Family Descriptor Key:**

AICDP = Automatic Implantable Cardiac Defibrillators, Pacemakers, and Related Devices

BREAS = Breast Surgery

ENTXX = ENT Procedures

EPHYS = Cardiac Electrophysiology

EYEXX = Ophthalmic Surgery

GIXXX = Gastrointestinal Procedures

NSTIM = Neurostimulators

ORTHO = Orthopedic Surgery

PUMPS = Implantable Drug Delivery Systems

RADTX = Radiation Oncology

UROGN = Urogenital Procedures

VASCX = Vascular Procedures

TABLE 8.—CY 2015 PACKAGED CPT ADD-ON CODES THAT ARE EVALUATED FOR A COMPLEXITY ADJUSTMENT

CY 2015 CPT/HCPCS Add-On Code	CY 2015 Short Descriptor
19297	Place breast cath for rad
33225	L ventric pacing lead add-on
37222	Iliac revasc add-on
37223	Iliac revasc w/stent add-on
37232	Tib/per revasc add-on
37233	Tibper revasc w/ather add-on
37234	Revasc opn/prq tib/pero stent
37235	Tib/per revasc stnt & ather
37237	Open/perq place stent ea add
37239	Open/perq place stent ea add