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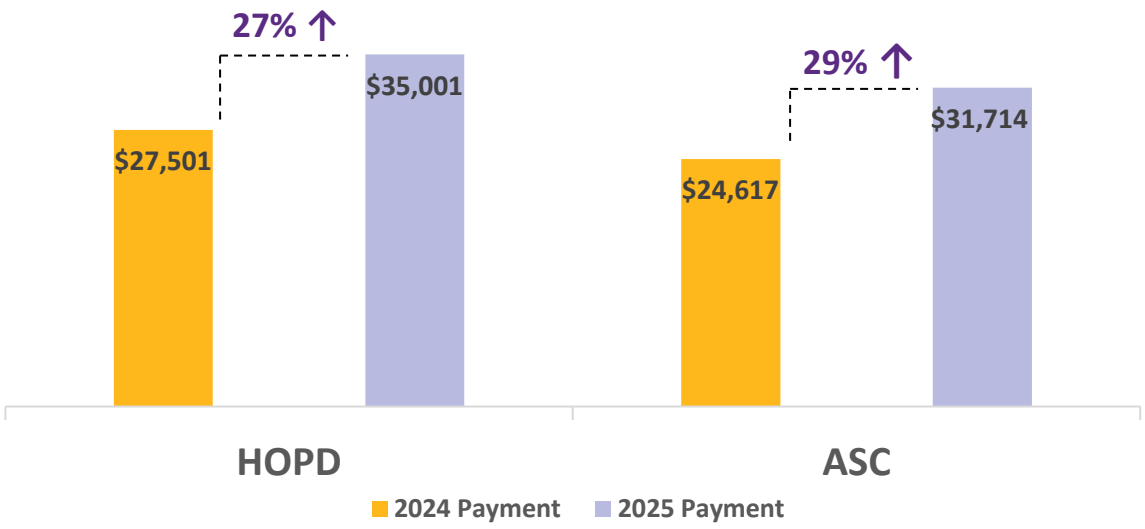
Medicare Increases Hospital Outpatient and ASC Payment for LimFlow TADV

Effective January 1, 2025, Medicare will reassign the LimFlow TADV procedure (CPT 0620T) from New Technology APC 1578 to New Technology APC 1579, which has an average payment amount of $35,001 in the hospital outpatient department (HOPD) and an average payment of $31,714 in the ambulatory surgical center (ASC).

This positive reassignment represents a 27% increase in hospital outpatient patient and a 29% increase in ASC payment for LimFlow TADV from 2024. Additionally, the facility payment for LimFlow TADV is not subject to multiple procedure discounting. Medicare finalized these positive updates in the 2025 Medicare Hospital Outpatient Prospective Payment System Rule released on Friday, November 5, 2024.

YoY Hospital Outpatient Department (HOPD) and Ambulatory Surgical Center (ASC) National Average Medicare Payment



As a reminder, effective October 1, 2024, hospital inpatient LimFlow TADV cases are eligible for an incremental payment of up to $16,250 from Medicare in addition to the applicable MS-DRG payment for the case. This incremental reimbursement is called a “New Technology Add-on Payment” or NTAP. More information is available at: https://limflow.com/us/reimbursement-resources.

Sources:
Medicare FFS Outpatient Hospital Rates effective January 1, 2024 through December 31, 2024.; Source: CY 2024 OPPS Final Rule; hospital impact file, Addendum A
Medicare FFS Outpatient Hospital Rates effective January 1, 2025 through December 31, 2025.; Source: CY 2025 OPPS Final Rule; hospital impact file, Addendum A
LimFlow NTAP finalized in FY 2025 IPPS Final Rule (CMS-1808-F).