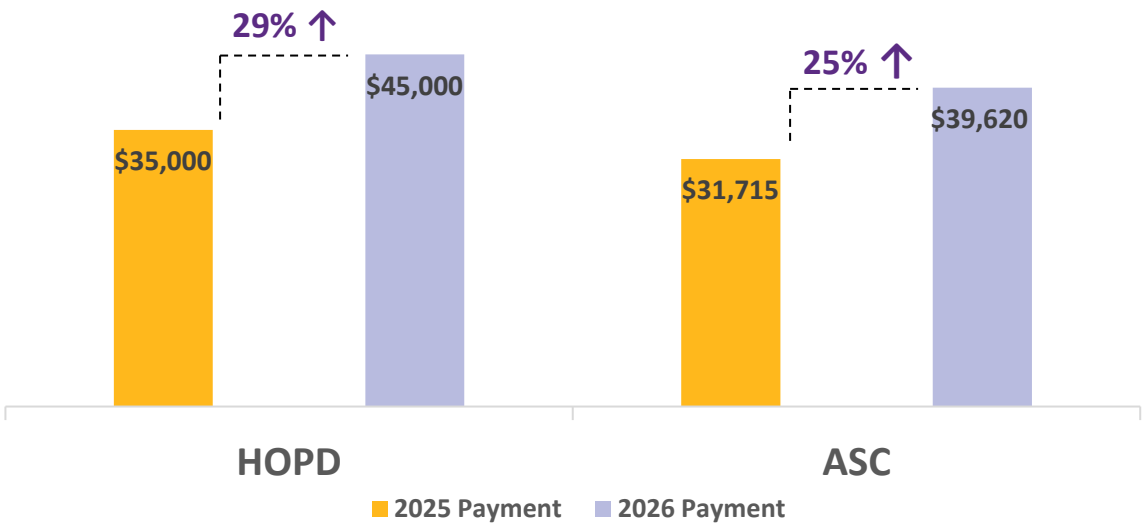
LimFlow®
Transforming CLTI

Medicare Increases Hospital Outpatient and ASC Payment for LimFlow TADV

Effective January 1, 2026, Medicare reassigned the LimFlow TADV procedure (CPT 0620T) from New Technology APC 1579 to New Technology APC 1580, which has an average payment amount of $45,000 in the hospital outpatient department (HOPD) and an average payment of $39,620 in the ambulatory surgical center (ASC).

This positive reassignment represents a 29% increase in hospital outpatient patient and a 25% increase in ASC payment for LimFlow TADV from 2025. Additionally, the facility payment for LimFlow TADV is not subject to multiple procedure discounting. Medicare finalized these positive updates in the 2026 Medicare Hospital Outpatient Prospective Payment System Rule released on Friday, November 21, 2025.

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 Outpatient Hospital Rates effective January 1, 2026 through December 31, 2026.; Source: CY 2025 OPPS Final Rule; hospital impact file, Addendum A
Medicare ASC Rates effective January 1, 2026 through December 31, 2026.; Source: CY 2026 ASC Final Rule; Addendum AA
LimFlow NTAP finalized in FY 2026 IPPS Final Rule (CMS-1808-F).