CODING AND REIMBURSEMENT GUIDE

Peripheral Vascular Interventions

CONTACT

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			ılatory y Center	Hospital Outpatient			Physician Services		
CPT Code	Procedure Description	Payment Indicator ¹	Facility Payment ¹	Status Indicator ²	APC ²	Facility Payment ²	Work RVUs ³	Physician (Facility) ³	Physician (Non- Facility) ³
Lower Extre	mity Revascularization								
Iliac Vascula	ar Territory								
37220	Revascularization, endovascular, open or percutaneous, iliac artery, unilateral, initial vessel; with transluminal angioplasty	J8	\$3,425.53	J1	5192	\$5,701.52	7.9	\$377.52	\$2,288.44
37221	Revascularization, endovascular, open or percutaneous, iliac artery, unilateral, initial vessel; with transluminal stent placement(s), includes angioplasty within the same vessel, when performed	J8	\$7,176.05	J1	5193	\$11,340.57	9.75	\$464.87	\$2,801.19
37222	Revascularization, endovascular, open or percutaneous, iliac artery, each additional ipsilateral iliac vessel; with transluminal angioplasty (List separately in addition to code for primary procedure)	N1	NA	N	NA	NA	3.73	\$175.34	\$572.92
37223	Revascularization, endovascular, open or percutaneous, iliac artery, each additional ipsilateral iliac vessel; with transluminal stent placement(s), includes angioplasty within the same vessel, when performed (List separately in addition to code for primary procedure)	N1	NA	N	NA	NA	4.25	\$199.92	\$1,155.87
Femoral/Pop	oliteal Vascular Territory								
37224	Revascularization, endovascular, open or percutaneous, femoral, popliteal artery(s), unilateral; with transluminal angioplasty	J8	\$3,639.70	J1	5192	\$5,701.52	8.75	\$419.26	\$2,653.35
37225	Revascularization, endovascular, open or percutaneous, femoral, popliteal artery(s), unilateral; with atherectomy, includes angioplasty within the same vessel, when performed	J8	\$12,444.93	J1	5194	\$17,956.72	11.75	\$562.57	\$7,901.81
37226	Revascularization, endovascular, open or percutaneous, femoral, popliteal artery(s), unilateral; with transluminal stent placement(s), includes angioplasty within the same vessel, when performed	J8	\$7,578.93	J1	5193	\$11,340.57	10.24	\$489.46	\$7,313.04
37227	Revascularization, endovascular, open or percutaneous, femoral, popliteal artery(s), unilateral; with transluminal stent placement(s) and atherectomy, includes angioplasty within the same vessel, when performed	J8	\$12,539.67	J1	5194	\$17,956.72	14.25	\$674.82	\$10,091.91
Tibial/Peron	eal Territory							1	
37228	Revascularization, endovascular, open or percutaneous, tibial, peroneal artery, unilateral, initial vessel; with transluminal angioplasty	J8	\$6,603.13	J1	5193	\$11,340.57	10.75	\$510.48	\$3,752.60
37229	Revascularization, endovascular, open or percutaneous, tibial, peroneal artery, unilateral, initial vessel; with atherectomy, includes angioplasty within the same vessel, when performed	J8	\$11,855.32	J1	5194	\$17,956.72	13.8	\$653.15	\$8,071.33
37230	Revascularization, endovascular, open or percutaneous, tibial, peroneal artery, unilateral, initial vessel; with transluminal stent placement(s), includes angioplasty within the same vessel, when performed	J8	\$11,438.92	J1	5194	\$17,956.72	13.55	\$655.73	\$8,076.82
37231	Revascularization, endovascular, open or percutaneous, tibial, peroneal artery, unilateral, initial vessel; with transluminal stent placement(s) and atherectomy, includes angioplasty within the same vessel, when performed	J8	\$12,261.12	J1	5194	\$17,956.72	14.75	\$698.76	\$10,597.21
37232	Revascularization, endovascular, open or percutaneous, tibial/peroneal artery, unilateral, each additional vessel; with transluminal angioplasty (List separately in addition to code for primary procedure)	N1	NA	N	NA	NA	4	\$187.63	\$751.49
37233	Revascularization, endovascular, open or percutaneous, tibial/peroneal artery, unilateral, each additional vessel; with atherectomy, includes angioplasty within the same vessel, when performed (List separately in addition to code for primary procedure)	N1	NA	N	NA	NA	6.5	\$303.77	\$978.91

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37234	Revascularization, endovascular, open or percutaneous, tibial/peroneal artery, unilateral, each additional vessel; with transluminal stent placement(s), includes angioplasty within the same vessel, when performed (List separately in addition to code for primary procedure)	N1	NA	N	NA	NA	5.5	\$265.59	\$3,283.85
37235	Revascularization, endovascular, open or percutaneous, tibial/peroneal artery, unilateral, each additional vessel; with transluminal stent placement(s) and atherectomy, includes angioplasty within the same vessel, when performed (List separately in addition to code for primary procedure)	N1	NA	N	NA	NA	7.8	\$352.29	\$3,639.05
Other Peripl	neral Vascular Stenting								
37236	Transcatheter placement of an intravascular stent(s) (except lower extremity artery(s) for occlusive disease, cervical carotid, extracranial vertebral or intrathoracic carotid, intracranial, or coronary), open or percutaneous, including radiological supervision and interpretation and including all angioplasty within the same vessel when performed; initial artery	J8	\$7,024.47	J1	5193	\$11,340.57	8.75	\$416.67	\$2,505.83
37237	Transcatheter placement of an intravascular stent(s) (except lower extremity artery(s) for occlusive disease, cervical carotid, extracranial vertebral or intrathoracic carotid, intracranial, or coronary), open or percutaneous, including radiological supervision and interpretation and including all angioplasty within the same vessel when performed; each additional artery (List separately in addition to code for primary procedure)	N1	NA	N	NA	NA	4.25	\$199.60	\$1,183.69
Venous Ster	nting								
37238	Transcatheter placement of an intravascular stent(s), open or percutaneous, including radiological supervision and interpretation and including angioplasty within the same vessel, when performed; initial vein	J8	\$7,102.24	J1	5193	\$11,340.57	6.04	\$290.50	\$3,137.30
37239	Transcatheter placement of an intravascular stent(s), open or percutaneous, including radiological supervision and interpretation and including angioplasty within the same vessel, when performed; each additional vein (List separately in addition to code for primary procedure)	N1	NA	N	NA	NA	2.97	\$142.99	\$1,570.59
IVUS									
37252	Intravascular ultrasound (noncoronary vessel) during diagnostic evaluation and/or therapeutic intervention, including radiological supervision and interpretation; initial noncoronary vessel (List separately in addition to code for primary procedure)	N1	NA	N	NA	NA	1.8	\$84.43	\$860.51
37253	Intravascular ultrasound (noncoronary vessel) during diagnostic evaluation and/or therapeutic intervention, including radiological supervision and interpretation; each additional noncoronary vessel (List separately in addition to code for primary procedure)	N1	NA	N	NA	NA	1.44	\$67.29	\$164.34
Percutaneou	us Mechanical Thrombectomy								
Arterial Mechanical Thrombectomy									

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37184	Primary percutaneous transluminal mechanical thrombectomy, noncoronary, non-intracranial, arterial or arterial bypass graft, including fluoroscopic guidance and intraprocedural pharmacological thrombolytic injection(s); initial vessel	J8	\$11,942.98	J1	5194	\$17,956.72	8.41	\$408.26	\$1,577.06
37185	Primary percutaneous transluminal mechanical thrombectomy, noncoronary, non-intracranial, arterial or arterial bypass graft, including fluoroscopic guidance and intraprocedural pharmacological thrombolytic injection(s); second and all subsequent vessel(s) within the same vascular family (List separately in addition to code for primary mechanical thrombectomy procedure)	N1	NA	N	NA	NA	3.28	\$153.99	\$441.25
37186	Secondary percutaneous transluminal thrombectomy (eg, nonprimary mechanical, snare basket, suction technique), noncoronary, non- intracranial, arterial or arterial bypass graft, including fluoroscopic guidance and intraprocedural pharmacological thrombolytic injections, provided in conjunction with another percutaneous intervention other than primary mechanical thrombectomy (List separately in addition to code for primary procedure)	N1	NA	N	NA	NA	4.92	\$231.63	\$1,094.72
Venous Med	chanical Thrombectomy								
37187	Percutaneous transluminal mechanical thrombectomy, vein(s), including intraprocedural pharmacological thrombolytic injections and fluoroscopic guidance	J8	\$7,800.37	J1	5193	\$11,340.57	7.78	\$373.00	\$1,549.24
37188	Percutaneous transluminal mechanical thrombectomy, vein(s), including intraprocedural pharmacological thrombolytic injections and fluoroscopic guidance, repeat treatment on subsequent day during course of thrombolytic therapy	J8	\$2,665.67	J1	5183	\$3,147.50	5.46	\$267.86	\$1,330.56
IVC Filter PI	acement, Repositioning, or Retrieval								
37191	Insertion of intravascular vena cava filter, endovascular approach including vascular access, vessel selection, and radiological supervision and interpretation, intraprocedural roadmapping, and imaging guidance (ultrasound and fluoroscopy), when performed	#N/A	#N/A	J1	5184	\$5,405.70	4.46	\$208.98	\$1,843.95
37192	Repositioning of intravascular vena cava filter, endovascular approach including vascular access, vessel selection, and radiological supervision and interpretation, intraprocedural roadmapping, and imaging guidance (ultrasound and fluoroscopy), when performed	J8	\$2,164.26	J1	5183	\$3,147.50	7.1	\$326.41	\$1,183.36
37193	Retrieval (removal) of intravascular vena cava filter, endovascular approach including vascular access, vessel selection, and radiological supervision and interpretation, intraprocedural roadmapping, and imaging guidance (ultrasound and fluoroscopy), when performed	G2	\$1,588.69	J1	5183	\$3,147.50	7.1	\$328.03	\$1,384.58
Intervention	s for Thrombosed or Jeopardized Hemodialys	is Access Gr	afts						
36901	Introduction of needle(s) and/or catheter(s), dialysis circuit, with diagnostic angiography of the dialysis circuit, including all direct puncture(s) and catheter placement(s), injection(s) of contrast, all necessary imaging from the arterial anastomosis and adjacent artery through entire venous outflow including the inferior or superior vena cava, fluoroscopic guidance, radiological supervision and interpretation and image documentation and report;	P3	\$528.22	J1	5182	\$1,553.44	3.36	\$159.81	\$653.79

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36902	Introduction of needle(s) and/or catheter(s), dialysis circuit, with diagnostic angiography of the dialysis circuit, including all direct puncture(s) and catheter placement(s), injection(s) of contrast, all necessary imaging from the arterial anastomosis and adjacent artery through entire venous outflow including the inferior or superior vena cava, fluoroscopic guidance, radiological supervision and interpretation and image documentation and report; with transluminal balloon angioplasty, peripheral dialysis segment, including all imaging and radiological supervision and interpretation necessary to perform the angioplasty	G2	\$2,629.62	J1	5192	\$5,701.52	4.83	\$226.77	\$1,113.16	
36903	Introduction of needle(s) and/or catheter(s), dialysis circuit, with diagnostic angiography of the dialysis circuit, including all direct puncture(s) and catheter placement(s), injection(s) of contrast, all necessary imaging from the arterial anastomosis and adjacent artery through entire venous outflow including the inferior or superior vena cava, fluoroscopic guidance, radiological supervision and interpretation and image documentation and report; with transcatheter placement of intravascular stent(s), peripheral dialysis segment, including all imaging and radiological supervision and interpretation necessary to perform the stenting, and all angioplasty within the peripheral dialysis segment	J8	\$7,351.35	J1	5193	\$11,340.57	6.39	\$298.27	\$3,845.12	
36904	Percutaneous transluminal mechanical thrombectomy and/or infusion for thrombolysis, dialysis circuit, any method, including all imaging and radiological supervision and interpretation, diagnostic angiography, fluoroscopic guidance, catheter placement(s), and intraprocedural pharmacological thrombolytic injection(s);	J8	\$3,515.82	J1	5192	\$5,701.52	7.5	\$348.09	\$1,667.00	
36905	Percutaneous transluminal mechanical thrombectomy and/or infusion for thrombolysis, dialysis circuit, any method, including all imaging and radiological supervision and interpretation, diagnostic angiography, fluoroscopic guidance, catheter placement(s), and intraprocedural pharmacological thrombolytic injection(s); with transluminal balloon angioplasty, peripheral dialysis segment, including all imaging and radiological supervision and interpretation necessary to perform the angioplasty	Ј8	\$6,491.10	J1	5193	\$11,340.57	9	\$418.93	\$2,087.55	
36906	Percutaneous transluminal mechanical thrombectomy and/or infusion for thrombolysis, dialysis circuit, any method, including all imaging and radiological supervision and interpretation, diagnostic angiography, fluoroscopic guidance, catheter placement(s), and intraprocedural pharmacological thrombolytic injection(s); with transcatheter placement of intravascular stent(s), peripheral dialysis segment, including all imaging and radiological supervision and interpretation necessary to perform the stenting, and all angioplasty within the peripheral dialysis circuit	J8	\$11,783.21	J1	5194	\$17,956.72	10.42	\$482.34	\$4,905.23	
36907	Transluminal balloon angioplasty, central dialysis segment, performed through dialysis circuit, including all imaging and radiological supervision and interpretation required to perform the angioplasty (List separately in addition to code for primary procedure)	N1	NA	N	NA	NA	3	\$139.11	\$545.10	

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36908	Transcatheter placement of intravascular stent(s), central dialysis segment, performed through dialysis circuit, including all imaging and radiological supervision and interpretation required to perform the stenting, and all angioplasty in the central dialysis segment (List separately in addition to code for primary procedure)	N1	NA	N	NA	NA	4.25	\$196.36	\$1,298.21
36909	Dialysis circuit permanent vascular embolization or occlusion (including main circuit or any accessory veins), endovascular, including all imaging and radiological supervision and interpretation necessary to complete the intervention (List separately in addition to code for primary procedure)	N1	NA	N	NA	NA	4.12	\$189.57	\$1,719.08

 ²⁰²⁵ Medicare Ambulatory Surgery Center Fee Schedule
2025 Medicare Hopsital Outpatient Prospective Payment System
2025 Medicare Physician Fee Schedule
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