



Medicare Hospital Version

Comprehensive APC Examples

Comprehensive APC without Complexity Adjustment

Case 1: A cardiac patient underwent outpatient surgery including a percutaneous balloon valvuloplasty of the pulmonary valve (92990) and percutaneous transluminal balloon angioplasty involving the pulmonary artery (92997).

Service	Status Indicator ¹	APC ¹	C-APC Ranking ²	Complexity Adjustment ³	Payment
Valvuloplasty (92990)	J1	5193	201	No	\$10,615.31
Angioplasty (92997)	J1	5193	234	N/A	\$0

Explanation: The valvuloplasty (92990) is the highest-ranking C-APC in this case, so the payment for the case will be based on this code. There are no complexity adjustments applicable to 92990.

Comprehensive APC with Complexity Adjustment

Case 2: A cardiac patient underwent a femoral popliteal revascularization with stent placement (37226) and a unilateral endovascular revascularization of the iliac artery with transluminal angioplasty (37220).

Service	Status Indicator ¹	APC ^{1,2}	C-APC Ranking ³	Complexity Adjustment ³	Payment
Iliac revascularization (37220)	J1	5192	1060	N/A	\$0
Femoral revascularization (37226)	J1	5193	208	Yes /5194	\$17,177.60

Explanation: The femoral revascularization (37226) is the highest-ranking C-APC in this case, so the payment for the case will be based on this code. The iliac revascularization (37220) is listed as a secondary code causing a complexity adjustment from C-APC 5193 “Level 3 Endovascular Procedure” to C-APC 5194 “Level 4 Endovascular Procedure”.

¹ Addendum B

² January 2023 IOCE Quarterly Data Files, Report-Tables, Data-CAPC

³ January 2023 IOCE Quarterly Data Files, Report Tables, MAP_CAPC

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Comprehensive APC with Complexity Adjustment and Device

Case 3: A cardiac patient underwent bilateral revascularization of the femoral arteries with transluminal angioplasty (37224-50).

Service	Status Indicator ⁴	APC ⁴	C-APC Ranking ⁵	Complexity Adjustment ⁶	Payment
Revascularization (37224-50)	J1	5192	1058	Yes/5193	\$10,615.31

Explanation: Payment for the case will be based on the revascularization (37224). A second revascularization reported with the same HCPCS code (37224) is listed as a secondary code causing a complexity adjustment changing the C-APC from 5192 “Level 2 Endovascular Procedure” to C-APC 5193 “Level 3 Endovascular Procedure”.

Note: without the complexity adjustment, payment would be made under APC 5192 (\$5,215.40)

⁴ Addendum B

⁵ January 2023 IOCE Quarterly Data Files, Report-Tables, Data_CAPC

⁶ January 2023 IOCE Quarterly Data Files, Report-Tables, Map_CAPC