

# CORONARY INTRAVASCULAR LITHOTRIPSY (IVL) & PERCUTANEOUS CORONARY INTERVENTION (PCI)

## 2025 Physician Coding and Payment Guide

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### OVERVIEW

In Calendar Year (CY) 2024, The Centers for Medicare & Medicaid Services (CMS) established relative value units (RVUs) and associated physician payment for Current Procedural Terminology (CPT®)¹ +92972, a Category I Add-on code for procedures involving Coronary IVL. Prior to the establishment of +92972, there were no additional RVUs or professional fees for performing Coronary IVL. This document is intended to provide updated coding and payment information to physicians and staff as they consider the use of this new code in CY 2025.

### CORONARY IVL CPT® CODE +92972 IN CY 2025

For CY 2025, CMS has assigned the Coronary IVL CPT® code +92972 a total RVU value of 4.31. The work related RVUs associated with +92972 is 2.97. CMS has also associated CPT® code +92972 with a physician payment rate of \$139 to reflect the Coronary IVL services described by this code. These RVUs and payment rates are effective January 1, 2025.

**CPT® code +92972 is an add-on code that must be used in conjunction with a designated primary procedure CPT® code. The payment rate described below for +92972 is in addition to payment for the primary procedure CPT® code.** A list of primary procedure codes commonly used with Coronary IVL can be found in the table below.

#### Coronary IVL CPT® Add-on Code +92972

CPT®	Description	Additional Work RVUs²	Additional Physician Facility Payment²,³
+92972	Percutaneous transluminal coronary lithotripsy	+2.97	+\$139

#### Primary Procedure Codes

CPT®	Description	Work RVUs²	Physician Facility Payment²,³
92920	Perc transluminal coronary angioplasty; single major coronary artery or branch	9.85	\$501
92924	Perc transluminal coronary atherectomy, with coronary angioplasty when performed; single major coronary artery or branch	11.74	\$597
92928	Perc transcatheter placement of intracoronary stent(s), with coronary angioplasty when performed; single major coronary artery or branch	10.96	\$557
92933	Perc transluminal coronary atherectomy, with intracoronary stent, with coronary angioplasty when performed; single major coronary artery or branch	12.29	\$625
92937	Perc transluminal revasc of or through coronary artery bypass graft, any combination of intracoronary stent, atherectomy and angioplasty, including distal protection; single vessel	10.95	\$556
92941	Perc transluminal revasc of acute total/subtotal occlusion during acute MI, coronary artery or CABG, any comb of intracoronary stent, atherectomy and angioplasty, including aspiration thrombectomy when performed, single vessel	12.31	\$626
92943	Perc transluminal revasc of chronic total occlusion, coronary artery, coronary artery branch, or coronary artery bypass graft, any comb of intracoronary stent, atherectomy and angioplasty; single vessel	12.31	\$626

## APPLICATION AND IMPACT OF CORONARY IVL CPT® CODE +92972

The tables below provide examples of how utilizing Coronary IVL and reporting CPT® code +92972 in conjunction with a primary procedure code impacts the total work RVUs and physician payment associated with a procedure.

Impact on Work RVUs when Coronary IVL Performed							
Without Coronary IVL			With Coronary IVL				
CPT®	Description	Work RVUs <sup>2</sup>		Additional Work RVUs <sup>2</sup>		New Work RVUs	
MOST COMMON	92920	PTCA w/o stent	9.85	+	2.97	=	12.82
	<b>92928</b>	<b>PCI w/ stent</b>	<b>10.96</b>	<b>+</b>	<b>2.97</b>	<b>=</b>	<b>13.93</b>
	92933	Atherectomy w/ stent	12.29	+	2.97	=	15.26
	92943	CTO	12.31	+	2.97	=	15.28

Impact on Payment when Coronary IVL Performed							
Without Coronary IVL			With Coronary IVL				
CPT®	Description	Physician Facility Payment <sup>2,3</sup>		Additional Physician Facility Payment <sup>2,3</sup>		New Physician Facility Payment	
MOST COMMON	92920	PTCA w/o stent	\$501	+	+\$139	=	\$640
	<b>92928</b>	<b>PCI w/ stent</b>	<b>\$557</b>	<b>+</b>	<b>+\$139</b>	<b>=</b>	<b>\$696</b>
	92933	Atherectomy w/ stent	\$625	+	+\$139	=	\$764
	92943	CTO	\$626	+	+\$139	=	\$765

## QUESTIONS? CONNECT WITH A SHOCKWAVE MEDICAL REIMBURSEMENT SPECIALIST

The Shockwave Medical Reimbursement team is available to answer questions regarding the above updates. The Shockwave Reimbursement Specialist team can be contacted by phone at **(877) 273-4628** or email at [reimbursement@shockwavemedical.com](mailto:reimbursement@shockwavemedical.com).

### Reimbursement Disclaimer (US):

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2. CMS-1807-F; Medicare Physician Fee Schedule, MPFS, Calendar Year 2025 Final Rule. 11/01/24, Addendum B, using conversion factor 32.3465.

3. Payment rates do not take into account geographical or additional adjustments. Providers should contact their local Medicare Administrative Contractor (MAC) or CMS for specific information as payment rates vary by region.

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