



THORAFLEX™ HYBRID & GELWEAVE™

Increased Medicare Payment for Hospitals

Centers for Medicare & Medicaid Services
Complex Aortic Arch Procedure Reimbursement

What is Changing?

CMS’s variable new technology add on payment (NTAP), previously capped at \$22,750 and used in conjunction with MS-DRG219 has been replaced by a revised **MS-DRG rate for Complex Aortic Arch procedures since October 1st, 2025**. This followed Terumo Aortic petitioning CMS for a permanent reimbursement structure that better reflects the real-world costs of delivering life-saving open aortic procedural care.

New Reimbursement Map



Institutional Codes & Reimbursement

Hospital Inpatient rates effective October 1, 2025, through September 30, 2026.

| PCS Code | PCS Codes Description | MS-DRG | National Unadjusted Payment | Change From Prior Year |
|--|---|--|--|--|
| Report both ICD-10-PCS codes when Thoraflex™ Hybrid is utilized | | | | |
| X2RX0N7 + X2VW0N7 | Replacement of Thoracic Aorta, Arch using Branched Synthetic Substitute with Intraluminal Device, Open Approach, New Technology Group 7 + Restriction of Thoracic Aorta, Descending using Branched Synthetic Substitute with Intraluminal Device, Open Approach, New Technology Group 7 | 209 Complex Aortic Arch Procedures | \$82,364* | N/A |
| When Gelweave™ is used separately or only arch replacement is performed | | | | |
| 02RX0JZ | Replacement of Thoracic Aorta, Ascending/Arch with Synthetic Substitute, Open Approach | 216 Cardiac Valve & Major Cardiothoracic Px w/Cath w/MCC 217 Cardiac Valve & Major Cardiothoracic Px w/Cath w/CC 218 Cardiac Valve & Major Cardiothoracic Px w/Cath w/o CC/MCC 219 Cardiac Valve & Major Cardiothoracic Px w/o Cath w/MCC 220 Cardiac Valve & Major Cardiothoracic Px w/o Cath w/CC 221 Cardiac Valve & Major Cardiothoracic Px w/o Cath w/o CC/MCC | \$71,187 \$47,847 \$47,847 \$55,873 \$38,806 \$36,676 | +3.6% +4.1% +13.0% +1.5% +1.9% +12.2% |

A. MS-DRG National Payment Rates per CMS-1833-F, and assumes wage index > 1 and the hospital appropriately reports quality measures and uses electronic health records. Does not include the 2% sequestration reduction. Individual hospital reimbursement varies significantly based on a number of variables.

CMS analysis of claims as published in their Proposed and Final Rules showed that 60% of the Thoraflex Hybrid cases previously resulted in DRG 219.

* \$82,364 is the new National Unadjusted Medicare Reimbursement rate, reflecting an increase of approximately \$27,000 over the prior average DRG reimbursement without the NTAP Payment.

Aortic Arch Replacement & Related Procedures

Professional Codes & Reimbursement

Physician rates effective January 1, 2026 through December 31, 2026

Global Surgery Indicator C: 090

| CPT Code ^A | Description | Work RVU | Total RVU ^B | National Payment ^C |
|-----------------------------------|--|----------|------------------------|-------------------------------|
| Ascending/Arch | | | | |
| 33858 | Ascending aorta graft, with cardiopulmonary bypass, includes valve suspension, when performed; for aortic dissection | 61.82 | 93.80 | \$3,148 |
| 33859 | Ascending aorta graft, with cardiopulmonary bypass, includes valve suspension, when performed; for aortic disease other than dissection (eg, aneurysm) | 44.00 | 67.73 | \$2,273 |
| 33863 | Aortic root replacement including replacement of the valve using valved conduit including coronary reconstruction (Bentall procedure) | 57.32 | 86.99 | \$2,920 |
| 33864 | Ascending aorta graft, with cardiopulmonary bypass with valve suspension, with coronary reconstruction and valve-sparing aortic root remodeling (e.g., David Procedure, Yacoub Procedure) | 58.58 | 88.80 | \$2,980 |
| 33871 | Transverse aortic arch graft, with cardiopulmonary bypass, with profound hypothermia, total circulatory arrest and isolated cerebral perfusion with reimplantation of arch vessel(s) (eg, island pedicle or individual arch vessel reimplantation) | 59.36 | 89.90 | \$3,017 |
| Descending | | | | |
| 33875 | Descending thoracic aorta graft, with or without bypass | 49.45 | 75.93 | \$2,548 |
| 33880 | Endovascular repair of thoracic aorta, including pre-procedure sizing and device selection, nonselective catheterization(s), all associated radiological supervision and interpretation; by deployment of an aorto-aortic tube endograft covering the left subclavian artery and all aortic tube endograft extension(s) proximally in the aortic arch and ascending aorta and distally to the celiac artery, when performed | 26.33 | 38.54 | \$1,293 |
| 33881 | Endovascular repair of thoracic aorta, including pre-procedure sizing and device selection, nonselective catheterization(s), all associated radiological supervision and interpretation; by deployment of an aorto-aortic tube endograft not involving coverage of the left subclavian artery origin and all endograft extension(s) placed from the level of the left subclavian carotid artery to the celiac artery | 21.97 | 32.36 | \$1,086 |
| Stent Placement | | | | |
| 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 | 8.53 | 11.68 | \$392 |
| +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) | 4.14 | 5.62 | \$188 |
| Bypass & Transposition | | | | |
| 35602 | Bypass graft, with other than vein; carotid-contralateral carotid | 23.53 | 34.61 | \$1,161 |
| 35606 | Bypass graft, with other than vein; carotid-subclavian | 21.90 | 31.88 | \$1,070 |
| 35626 | Bypass graft, with other than vein; aortosubclavian, aortoinnominate, or aortocarotid | 28.41 | 44.35 | \$1,488 |
| 35694 | Transposition and/or reimplantation; subclavian to carotid artery | 18.80 | 26.98 | \$905 |
| 35695 | Transposition and/or reimplantation; carotid to subclavian artery | 19.56 | 27.98 | \$939 |

A. Review CPT® coding guidelines, modifiers, and NCCI edits for these codes. Current Terminology (CPT®) is a registered trademark of the American Medical Association (AMA). Copyright 2026 AMA. All rights reserved.

B. Rates are from the CY 2026 Physician Fee Schedule Final Rule, CMS-1832-F, Centers for Medicare and Medicaid Services.

C. New for 2026, CMS established two Conversion Factors, \$33.5675 for Qualifying & \$33.4009 Non-Qualifying APMs with respect to the Quality Payment Program. Amounts listed are National Unadjusted Qualifying Medicare Rates & do not include the 2% sequestration

In support of accurate coding & billing, consider the following specifications when dictating operative reports in cases involving Thoraflex Hybrid

- Indication for aneurysm and/or dissection specified
- Bypass and patient cooling procedure described
- Arch replacement for frozen elephant trunk specified
- Thoraflex Hybrid intraluminal device specified by name
- Diameter of the arch portion of the device specified
- Each branched diameter specified (Innominate 12mm / Left Common Carotid 8mm / Left Subclavian 10mm is standard; smaller diameter arch grafts include a 10 / 8 / 8 combination)
- Deployment of the stent graft portion of the device in the descending aorta described
- Diameter and length of the stent graft portion of the device specified



Committed to Aortic Care



To find out more information, please visit
terumo-aortic.com/thoraflex-hybrid-drg



View IFU at eifu.terumo-aortic.com for more information on use, indications, contraindications and warnings/precautions.

Product availability subject to local regulatory approval.

PM-10261 V2

For distributor information, visit
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