



# 2023 C-CODE LIST AND PRODUCT DESCRIPTIONS

## HCPCS CODES

### C-CODES FOR OUTPATIENT PROCEDURES

Healthcare Common Procedure Coding System (HCPCS) Level II codes were developed to help categorize, document, and track the use of products, supplies, and services. C-Codes should be reported for all device-dependent Ambulatory Payment Classifications (APCs) for procedures conducted in the hospital outpatient setting. While C-Codes do not generally result in additional payment, it is important for hospitals to use C-Codes as CMS uses the data collected from the codes and associated charges to help determine future payment rates. The C-Codes listed below may be used for both coronary and peripheral intervention procedures.

#### Device Category

HCPCS CODE	DESCRIPTION	CSI® PRODUCTS
C1724	Catheter, transluminal atherectomy, rotational	Diamondback 360® Peripheral Orbital Atherectomy System Diamondback 360® Peripheral Orbital Atherectomy System, Exchangeable Series Diamondback 360® Coronary Orbital Atherectomy System Stealth 360® Peripheral Orbital Atherectomy System
C1725	Catheter, transluminal angioplasty, non-laser (may include guidance, infusion/perfusion capability)	JADE® PTA Balloon Catheter† Sapphire® NC Plus and Sapphire® NC24 Coronary Balloon Dilatation Catheter† Sapphire® II PRO Balloon Dilatation Catheter† Scoreflex® NC Scoring PTCA Catheter†
C1769	Guidewire	Shepherd™ Peripheral Guidewires ViperWire Advance® Guidewire and ViperWire Advance® with Flex Tip Guidewire (to be used with the Diamondback 360 and Stealth 360 systems) Zilient® Peripheral Guidewire
C1887	Catheter, guiding (may include infusion/perfusion capability)	Teleport® Microcatheter† VIPERCATH™ XC Peripheral Exchange Catheter ViperCross™ Support Catheter

†This product is distributed by CSI and manufactured by OrbusNeich Medical Company Limited or its affiliates.

## PRODUCT DESCRIPTIONS

### **Diamondback 360® Peripheral Orbital Atherectomy System**

The Diamondback 360 Peripheral Orbital Atherectomy System is a percutaneous orbital atherectomy system indicated for use as therapy in patients with occlusive atherosclerotic disease in peripheral arteries and stenotic material from artificial arteriovenous dialysis fistulae. Contraindications for the system include for use in coronary arteries, bypass grafts, stents, or where thrombus or dissections are present. Although the incidence of adverse events is rare, potential events that can occur with atherectomy include: pain, hypotension, CVA/TIA, death, dissection, perforation, distal embolization, thrombus formation, hematuria, abrupt or acute vessel closure, or arterial spasm.

### **Diamondback 360® Peripheral Orbital Atherectomy System, Exchangeable Series**

The Diamondback 360 Peripheral Orbital Atherectomy System Exchangeable Series is a percutaneous orbital atherectomy system indicated for use as therapy in patients with occlusive atherosclerotic disease in peripheral arteries and stenotic material from artificial arteriovenous dialysis fistulae. Important Safety Information: The System is contraindicated for use in coronary arteries, bypass grafts, stents, or where thrombus or dissections are present. Although the incidence of adverse events is rare, potential events that can occur with atherectomy include: pain, hypotension, CVA/TIA, death, dissection, perforation, distal embolization, thrombus formation, hematuria, abrupt or acute vessel closure, or arterial spasm.

### **Diamondback 360® Coronary Orbital Atherectomy System**

The Diamondback 360 Coronary Orbital Atherectomy System is a percutaneous orbital atherectomy system indicated to facilitate stent delivery in patients with coronary artery disease (CAD) who are acceptable candidates for PTCA or stenting due to *de novo*, severely calcified coronary artery lesions. **Contraindications:** The OAS is contraindicated when the ViperWire Advance® Coronary guide wire cannot pass across the coronary lesion or the target lesion is within a bypass graft or stent. The OAS is contraindicated when the patient is not an appropriate candidate for bypass surgery, angioplasty, or atherectomy therapy, or has angiographic evidence of thrombus, or has only one open vessel, or has angiographic evidence of significant dissection at the treatment site and for women who are pregnant or children. **Warnings/Precautions:** Performing treatment in excessively tortuous vessels or bifurcations may result in vessel damage; The OAS was only evaluated in severely calcified lesions, A temporary pacing lead may be necessary when treating lesions in the right coronary and circumflex arteries; On-site surgical back-up should be included as a clinical consideration; Use in patients with an ejection fraction (EF) of less than 25% has not been evaluated. See the instructions for use before performing Diamondback 360 coronary orbital atherectomy procedures for detailed information regarding the procedure, indications, contraindications, warnings, precautions, and potential adverse events. For further information call CSI at 1-877-274-0901 and/or consult CSI's website at [www.csi360.com](http://www.csi360.com). Caution: Federal law (USA) restricts this device to sale by or on the order of a physician.

### **JADE® PTA Balloon Catheter†**

The Jade PTA Balloon Dilatation Catheter is indicated for Percutaneous Transluminal Angioplasty in the peripheral vasculature, including iliac, femoral, ilio-femoral, popliteal, infra-popliteal, and renal arteries, and for the treatment of obstructive lesions of native or synthetic arteriovenous dialysis fistulae. This device is also indicated for post-dilation of balloon expandable and self-expanding stents in the peripheral vasculature.

### **Sapphire® NC Plus and Sapphire® NC24 Coronary Balloon Dilatation Catheter†**

The Sapphire NC Plus and Sapphire NC24 Coronary Balloon Dilatation Catheters are indicated for balloon dilatation of the stenotic portion of a coronary artery or bypass graft stenosis in patients evidencing coronary ischemia for the purpose of improving myocardial perfusion, balloon dilatation of a coronary artery occlusion for the treatment of acute myocardial infarction, in-stent restenosis, or post-delivery expansion of balloon expandable coronary stents.

### **Sapphire® II PRO Balloon Dilatation Catheter†**

(Ø 1.0–1.25 mm configurations) is indicated for:

- balloon pre-dilatation of a stenotic portion of a coronary artery or bypass graft stenosis (≥70% stenosis) for the purpose of improving myocardial perfusion

### **Sapphire® II PRO Balloon Dilatation Catheter†**

(Ø 1.5–4.0 mm configurations) is indicated for:

- balloon dilatation of the stenotic portion of a coronary artery or bypass graft stenosis in patients evidencing coronary ischemia for the purpose of improving myocardial perfusion
- balloon dilatation of a coronary artery occlusion for the treatment of acute myocardial infarction

### **Sapphire® II PRO Balloon Dilatation Catheter†**

is also indicated for:

- percutaneous transluminal angioplasty in the peripheral vasculature, including renal, femoral, popliteal, infra-popliteal, tibial, and peroneal arteries

## PRODUCT DESCRIPTIONS (continued)

### Scoreflex® NC Scoring PTCA Catheter

**Indications:** The Scoreflex NC Scoring PTCA Catheter is indicated for balloon dilatation of a de novo stenotic portion of a coronary artery in patients evidencing coronary ischemia for the purpose of improving myocardial perfusion, in-stent restenosis. **Contraindications:** The use of the Scoreflex NC Scoring PTCA Catheter is contraindicated in the following patient types: Patients with an unprotected left main coronary artery; Patients with coronary artery spasm in the absence of a significant stenosis. **Warnings:** When using this type of device, the following warnings should be observed: To reduce the potential for vessel damage, the inflated diameter of the balloon should approximate the diameter of the vessel just proximal and distal to the stenosis. When the catheter is exposed to the vascular system, it should be manipulated while under high-quality fluoroscopic observation. Do not advance or retract the catheter unless the balloon is fully deflated under vacuum. If resistance is met during manipulation, determine the cause of the resistance before proceeding. Applying excessive force to the catheter can result in tip or catheter breakage, catheter kink, or balloon separation. Do not twist the catheter shaft in excess of 180 degrees when the tip is constrained. Balloon pressure should not exceed the rated burst pressure (RBP) indicated on the package. **Precautions:** Never advance the Scoreflex NC Scoring PTCA Catheter without the guidewire extending from the tip. Do not use oil-based contrast medium, organic solvents or alcohols; there is a possibility of catheter leak, damage, or lubrication loss. The balloon deflation time has been established as 15 seconds based on in vitro bench testing results. Do not reinsert the PTCA catheter into the coil dispenser after procedural use. Discard all disposable devices used during this procedure per local requirements for medical device waste disposal. Caution: Federal law (USA) restricts this device to the sale by or on the order of a physician.

### Shepherd™ Peripheral Guidewires

The Shepherd Peripheral guidewires are intended to facilitate the placement and exchange of balloon catheters or other interventional devices within the peripheral vasculature during Percutaneous Transluminal Angioplasty (PTA) or other intravascular interventional procedures.

### Stealth 360® Peripheral Orbital Atherectomy System

The Stealth 360 Peripheral Orbital Atherectomy System is a percutaneous orbital atherectomy system indicated for use as therapy in patients with occlusive atherosclerotic disease in peripheral arteries and stenotic material from artificial arteriovenous dialysis fistulae. Contraindications for the system include use in coronary arteries, bypass grafts, stents, or where thrombus or dissections are present. Although the incidence of adverse events is rare, potential events that can occur with atherectomy include: pain, hypotension, CVA/TIA, death, dissection, perforation, distal embolization, thrombus formation, hematuria, abrupt or acute vessel closure, or arterial spasm.

### Teleport® Microcatheter†

The Teleport Microcatheter is indicated for supporting and facilitating the placement of guidewires in the coronary and peripheral vasculature, exchanging guidewires in the coronary and peripheral vasculature, and the delivery of contrast media into the coronary, peripheral and abdominal vasculature.

### VIPERCATH™ XC Peripheral Exchange Catheter

The VIPERCATH XC Peripheral Exchange Catheter is designed to support use of the guide wire during access of the peripheral vasculature. The exchange catheter allows for exchanges of guide wires, up to diameters of 0.035" during interventional and diagnostic peripheral arterial procedures.

### ViperCross™ Support Catheter

The 018/035 ViperCross support catheters are intended to be used in conjunction with steerable guidewires to access discrete regions of the peripheral vasculature. The 014 ViperCross support catheters are intended to be used to access discrete regions of the peripheral and/or coronary vasculature. ViperCross catheters may be used to facilitate placement and exchange of guidewires and other interventional devices and to sub-selectively infuse/deliver diagnostic and therapeutic agents.

### Zilient® Peripheral Guidewire

The Zilient Peripheral Guidewire is intended to facilitate the placement and exchange of balloon catheters or other interventional devices within the peripheral vasculatures during Percutaneous Transluminal Angioplasty (PTA) or other intravascular interventional procedures.

**Disclaimer:** Reimbursement information provided by CSI is gathered from third party sources and is presented for illustrative purposes only. This information does not constitute legal or reimbursement advice. CSI makes no representation or warranty regarding this information or its completeness, accuracy, timeliness or applicability with any particular patient. CSI specifically disclaims liability or responsibility for the results or consequences of any actions taken in reliance on information in this document. CSI encourages providers to submit accurate and appropriate claims for services. Laws, regulations and payer policies concerning reimbursement are complex and change frequently. Providers are responsible for making appropriate decisions related to coding and reimbursement submissions. Accordingly, CSI recommends that customers consult with their payers, reimbursement specialists and/or legal counsel regarding coding, coverage and reimbursement matters.

Please note, this document is intended to provide relevant coding information for interventional cardiovascular procedures and as such may include codes for which CSI has no cleared or approved products. This information is not intended to encourage or promote off-label use of CSI products or of any medical device.

**For additional reimbursement information, please visit [www.csi360.com/reimbursement](http://www.csi360.com/reimbursement), email [csireimbursement@csi360.com](mailto:csireimbursement@csi360.com) or call 1.844.222.7234.**

CSI®, Diamondback 360®, Shepherd™, Stealth 360®, ViperWire Advance®, VIPERCATH™, ViperCross™, and Zilient® are trademarks of Cardiovascular Systems, Inc. ©2023 Cardiovascular Systems, Inc. All rights reserved. EN-7358.A 0123 JADE®, Sapphire®, Scoreflex® and Teleport® are registered trademarks of OrbusNeich Medical Group Holdings Ltd or its affiliates. ©2023 OrbusNeich Medical Group Holdings Ltd or its affiliates. All rights reserved. G-70-2179 Rev 01



1225 Old Hwy 8 NW  
St. Paul, MN 55112

**T:** 651.259.1600  
877.274.0901

**F:** 612.677.3355  
[www.csi360.com](http://www.csi360.com)



1 Jinkui Road,  
Fuitian Free Trade Zone,  
Shenzhen, 518038, China

**T:** +86.755.8358.0181  
**F:** +86.755.8358.0169  
**[www.OrbusNeich.com](http://www.OrbusNeich.com)**