

Venapax® Endoscopic Vessel Harvesting System

Coding Reference Guide

The Saphena Medical Venapax Endoscopic Vessel Harvesting System¹ is indicated for use in minimally invasive surgery allowing access for vessel harvesting and is primarily indicated for patients undergoing endoscopic surgery for arterial bypass. It is indicated for cutting tissue and controlling bleeding through coagulation and for patients requiring blunt dissection of tissue including dissection of blood vessels, dissection of blood vessels of the extremities, dissection of ducts and other structures in the extra peritoneal or subcutaneous extremity and thoracic space. Extremity procedures include tissue dissection along the saphenous vein for use in coronary artery bypass grafting and peripheral artery bypass or radial artery for use in coronary artery bypass grafting. Thoracoscopic procedures include exposure and dissection of structures external to the parietal pleura, including nerves, blood vessels, and other tissues of the chest wall.

Physician	
CPT® Code	Description
Endoscopic Vein/Artery Harvesting	
33508	Endoscopy, surgical, including video-assisted harvest of vein(s) for coronary artery bypass procedure (List separately in addition to code for primary procedure)
33509	Harvest of upper extremity artery, 1 segment, for coronary artery bypass procedure, endoscopic
Coronary Artery Bypass Graft (CABG)	
33510	Coronary artery bypass, vein only; single coronary venous graft
33511	Coronary artery bypass, vein only; 2 coronary venous grafts
33512	Coronary artery bypass, vein only; 3 coronary venous grafts
33513	Coronary artery bypass, vein only; 4 coronary venous grafts
33514	Coronary artery bypass, vein only; 5 coronary venous grafts
33516	Coronary artery bypass, vein only; 6 or more coronary venous grafts
33517	Coronary artery bypass, using venous graft(s) and arterial graft(s); single vein graft (List separately in addition to code for primary procedure)
33518	Coronary artery bypass, using venous graft(s) and arterial graft(s); 2 venous grafts (List separately in addition to code for primary procedure)
33519	Coronary artery bypass, using venous graft(s) and arterial graft(s); 3 venous grafts (List separately in addition to code for primary procedure)
33521	Coronary artery bypass, using venous graft(s) and arterial graft(s); 4 venous grafts (List separately in addition to code for primary procedure)
33522	Coronary artery bypass, using venous graft(s) and arterial graft(s); 5 venous grafts (List separately in addition to code for primary procedure)
33533	Coronary artery bypass, using arterial graft(s); single arterial graft
33534	Coronary artery bypass, using arterial graft(s); 2 coronary arterial grafts
33535	Coronary artery bypass, using arterial graft(s); 3 coronary arterial grafts
33536	Coronary artery bypass, using arterial graft(s); 4 or more coronary arterial grafts

Hospital Inpatient: ICD-10-PCS Code and Description			
Excision (Cutting out or off, without replacement, a portion of a body part)			
0 Medical and Surgical 6 Lower Veins B Excision			
Body Part	Approach	Device	Qualifier
P Saphenous Vein, Right Q Saphenous Vein, Left	4 Percutaneous Endoscopic	Z No Device	Z No Qualifier
0 Medical and Surgical 3 Upper Arteries B Excision			
Body Part	Approach	Device	Qualifier
B Radial Artery, Right C Radial Artery, Left	4 Percutaneous Endoscopic	Z No Device	Z No Qualifier
Bypass (Altering the route of passage of the contents of a tubular body part)			
0 Medical and Surgical 2 Heart and Great Vessels 1 Bypass			
Body Part	Approach	Device	Qualifier
0 Coronary Artery, One Artery 1 Coronary Artery, Two Arteries 2 Coronary Artery, Three Arteries 3 Coronary Artery, Four or More Arteries	0 Open	9 Autologous Venous Tissue A Autologous Arterial Tissue	3 Coronary Artery
Hospital Inpatient: Medicare Severity-Diagnosis Related Group (MS-DRG) *			
MS-DRG	Description		
231	CORONARY BYPASS WITH PTCA WITH MCC		
232	CORONARY BYPASS WITH PTCA WITHOUT MCC		
233	CORONARY BYPASS WITH CARDIAC CATHETERIZATION OR OPEN ABLATION WITH MCC		
234	CORONARY BYPASS WITH CARDIAC CATHETERIZATION OR OPEN ABLATION WITHOUT MCC		
235	CORONARY BYPASS WITHOUT CARDIAC CATHETERIZATION WITH MCC		
236	CORONARY BYPASS WITHOUT CARDIAC CATHETERIZATION WITHOUT MCC		

Hospital Inpatient: Medicare Severity-Diagnosis Related Group (MS-DRG) *	
MS-DRG	Description
231	CORONARY BYPASS WITH PTCA WITH MCC
232	CORONARY BYPASS WITH PTCA WITHOUT MCC
233	CORONARY BYPASS WITH CARDIAC CATHETERIZATION OR OPEN ABLATION WITH MCC
234	CORONARY BYPASS WITH CARDIAC CATHETERIZATION OR OPEN ABLATION WITHOUT MCC
235	CORONARY BYPASS WITHOUT CARDIAC CATHETERIZATION WITH MCC
236	CORONARY BYPASS WITHOUT CARDIAC CATHETERIZATION WITHOUT MCC

CC – Complication and/or Comorbidity. MCC – Major Complication and/or Comorbidity.

*Other MS-DRGs may be applicable. MS-DRG will be determined by the patient's diagnosis and any procedure(s) performed.

Hospital Outpatient and Ambulatory Surgery Center (ASC)				
Endoscopic Vein/Artery Harvesting				
CPT® Code	Description	OPPS Status Indicator	APC Assignment	ASC Payment Indicator
33508	Endoscopy, surgical, including video-assisted harvest of vein(s) for coronary artery bypass procedure (List separately in addition to code for primary procedure)	N	--	N1
33509	Harvest of upper extremity artery, 1 segment, for coronary artery bypass procedure, endoscopic	C	--	NA
Coronary Artery Bypass Graft (CABG)				
33510	Coronary artery bypass, vein only; single coronary venous graft	C	--	NA
33511	Coronary artery bypass, vein only; 2 coronary venous grafts	C	--	NA
33512	Coronary artery bypass, vein only; 3 coronary venous grafts	C	--	NA
33513	Coronary artery bypass, vein only; 4 coronary venous grafts	C	--	NA

33514	Coronary artery bypass, vein only; 5 coronary venous grafts	C	--	NA
33516	Coronary artery bypass, vein only; 6 or more coronary venous grafts	C	--	NA
33517	Coronary artery bypass, using venous graft(s) and arterial graft(s); single vein graft (List separately in addition to code for primary procedure)	C	--	NA
33518	Coronary artery bypass, using venous graft(s) and arterial graft(s); 2 venous grafts (List separately in addition to code for primary procedure)	C	--	NA
33519	Coronary artery bypass, using venous graft(s) and arterial graft(s); 3 venous grafts (List separately in addition to code for primary procedure)	C	--	NA
33521	Coronary artery bypass, using venous graft(s) and arterial graft(s); 4 venous grafts (List separately in addition to code for primary procedure)	C	--	NA
33522	Coronary artery bypass, using venous graft(s) and arterial graft(s); 5 venous grafts (List separately in addition to code for primary procedure)	C	--	NA
33533	Coronary artery bypass, using arterial graft(s); single arterial graft	C	--	NA
33534	Coronary artery bypass, using arterial graft(s); 2 coronary arterial grafts	C	--	NA
33535	Coronary artery bypass, using arterial graft(s); 3 coronary arterial grafts	C	--	NA
33536	Coronary artery bypass, using arterial graft(s); 4 or more coronary arterial grafts	C	--	NA

OPPS - Outpatient Prospective Payment System; **APC** - Ambulatory Payment Classification; **ASC** - Ambulatory Surgical Center

Status Indicator: **C** – Inpatient Only; **N** – Payment is packaged into payment for other services; no separate APC payment.

Payment Indicator: **NA** - This procedure is not on Medicare's ASC Covered Procedures List (CPL); **N1** – Packaged service/item; no separate payment made.

HCPCS (Healthcare Common Procedure Coding System)	
Code	Description
--	C codes do not apply to inpatient surgical procedures such as CABG or valve replacement procedures. C codes are used in conjunction with the Medicare prospective payment system for outpatient procedures (APCs).

Note: HCPCS codes report devices used in conjunction with outpatient procedures billed and paid for under Medicare's Outpatient Prospective Payment System.

For further assistance with reimbursement questions, contact the Zimmer Biomet Reimbursement Hotline at 866-946-0444 or reimbursement@zimmerbiomet.com, or visit our reimbursement web site at zimmerbiomet.com/reimbursement.

¹ FDA 510(k) Number: K140603

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