Appendix Table 1. 2015 CMS reimbursement for access procedures and complications

Procedure	Procedure or DRG code	Reimbursement *
Surgical procedures	36821	\$3,923
New AVF		
New AVG	36825	\$4,067
Surgical access	36832	\$4,025
revision		
Percutaneous procedures	36870; 36147; 36148	\$2,996
Thrombectomy		
PTA	36147; 35476; 75978	\$2,451
Catheter Exchange	36581	\$786
Hospitalization secondary to catheter related sepsis	999.32	\$13,528

DRG, diagnosis related groups.

AVF: arteriovenous fistula, PTA: percutaneous transluminal angioplasty

^{*}Includes professional and facility fees