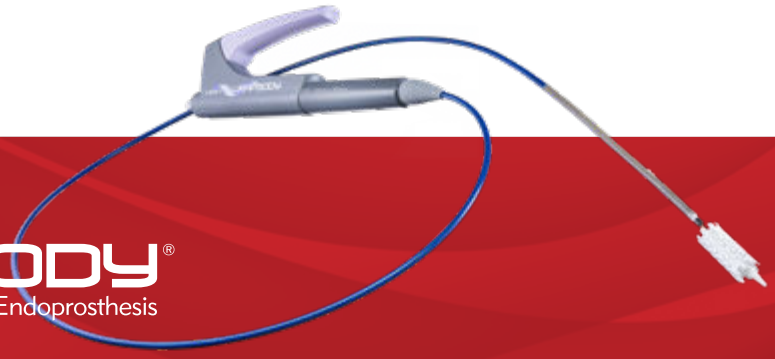

MERIT WRAPSODY®
Cell-Impermeable Endoprosthesis

NEW TECHNOLOGY ADD-ON PAYMENT (NTAP) GUIDE FOR WRAPSODY® CELL-IMPERMEABLE ENDOPROSTHESIS (CIE)

THE MERIT WRAPSODY® CIE NEW TECHNOLOGY ADD-ON PAYMENTS (NTAP) FOR FY 2026.

The WRAPSODY CIE, a breakthrough designated device, is indicated for use in hemodialysis patients for the treatment of stenosis or occlusion within the dialysis access outflow circuit, including stenosis or occlusion in the peripheral veins of individuals with an AV fistula or at the venous anastomosis of a synthetic AV graft.

EFFECTIVE DATE

Effective October 1, 2025 for the Hospital Inpatient 2026 Federal Fiscal Year, WRAPSODY® CIE procedures are eligible for an incremental payment from Medicare Hospital Inpatient Services under the Medicare Fee for Service (MFFS) program, also called traditional Medicare. This incremental reimbursement is called the "New Technology Add-on Payment (NTAP)". CMS provides payment based on the cost of the actual device itself. CMS payment calculation limits NTAP to the lesser of 65 percent of the average cost of the technology, or 65 percent of the costs in excess of the MS-DRG payment for the case.

WRAPSODY® CIE INCREMENTAL PAYMENT

CMS has determined the WRAPSODY® Cell-Impermeable Endoprosthesis (CIE) NTAP for a case involving the use of the Merit Wrapsody® CIE would be an incremental payment of a maximum of $3,770 for FY 2026 based on calculation of 65 percent of the average cost of the technology at the time the NTAP application was submitted.

TABLE 1 WRAPSODY CELL-IMPERMEABLE ENDOPROSTHESIS (CIE) RELATED MS-DRGS.

NTAP may be reported when the WRAPSODY CIE procedure is provided to a hemodialysis patient requiring treatment of stenosis or occlusion within the dialysis access outflow circuit, including stenosis or occlusion in the peripheral veins of individuals with an AV fistula or at the venous anastomosis of a synthetic AV graft. Incremental payment is based on 65% of the average cost of the technology with a maximum of $3,770.

Wrapsody payment will be added to the MS-DRG payment when one of the new ICD-10-PCS are reported on the patients claim to report the WRAPSODY Cell-Impermeable Endoprosthesis (CIE) procedure, costs and charges. Below please refer to the 10 new ICD-10-PCS codes applicable for hospital inpatient use when the WRAPSODY CIE procedure is provided to a patient. Hospitals should have this updated file ready for accurate claims /billing to correctly apply the new codes.

Table 1 Wrapsody CIE related MS-DRGs

MS-DRG	DESCRIPTION	Relative Weight	MS-DRG Payment Estimate
252	Other vascular procedures with Major Complication or Comorbidity (MCC)	3.4883	$25,383.52
253	Other vascular procedures with Complication or Comorbidity (CC)	2.5956	$18,887.56
254	Other vascular procedures without CC/MCC	1.7817	$12,965.00
264	Other circulatory system O.R. Procedures	3.3406	$24,308.74
674	Other kidney and urinary tract procedures with CC	2.3386	$17,017.43
675	Other kidney and urinary tract procedures without CC/MCC	1.6414	$11,944.07

MERIT WRAPSODY® Cell-Impermeable Endoprosthesis

NTAP GUIDE

WRAPSODY CIE NTAP REFER TO EXAMPLE MS-DRG CALCULATION PAYMENT BELOW

EFFECTIVE OCTOBER 1, 2025: WRAPSODY CIE ICD-10-PCS CODES

ICD-10-PCS	DESCRIPTION
X27535B	Dilation of right subclavian vein with cell impermeable intraluminal device, percutaneous approach, new technology group 11
X27635B	Dilation of left subclavian vein with cell impermeable intraluminal device, percutaneous approach, new technology group 11
X27735B	Dilation of right axillary vein with cell impermeable intraluminal device, percutaneous approach, new technology group 11
X27835B	Dilation of left axillary vein with cell impermeable intraluminal device, percutaneous approach, new technology group 11
X27935B	Dilation of right brachial vein with cell impermeable intraluminal device, percutaneous approach, new technology group 11
X27A35B	Dilation of left brachial vein with cell impermeable intraluminal device, percutaneous approach, new technology group 11
X27B35B	Dilation of right basilic vein with cell impermeable intraluminal device, percutaneous approach, new technology group 11
X27C35B	Dilation of left basilic vein with cell impermeable intraluminal device, percutaneous approach, new technology group 11
X27D35B	Dilation of right cephalic vein with cell impermeable intraluminal device, percutaneous approach, new technology group 11
X27E35B	Dilation of left cephalic vein with cell impermeable intraluminal device, percutaneous approach, new technology group 11

EXAMPLE CALCULATION FOR THE WRAPSODY CIE NTAP EFFECTIVE OCTOBER 1, 2025

MS-DRG	TOTAL COVERED CHARGES	X	COST TO CHARGE RATIO (CCR) 0.2432= HOSPITAL TOTAL COVERED COST	_	HOSPITAL MS-DRG PAYMENT	=	COVERED COST MINUS HOSPITAL DRG PAYMENT	X 65% =	65% OF COST IN EXCESS OF MS-DRG	OR	MAXIMUM ADD-ON PAYMENT	=	NEW TECH ADD-ON PAYMENT	+	HOSPITAL MS-DRG PAYMENT= TOTAL
252	$160,301.12		$38,985.23	_	$25,383.52	=	$13,601.71	65%	$8,841.11		$3,770		$3,770		$29,160.52
253	$121,325.36		$29,506.33	_	$18,887.56	=	$10,618.77	65%	$6,902.20		$3,770		$3,770		$22,664.56
254	$85,790.00		$20,864.13	_	$12,965.00	=	$7,899.13	65%	$5,134.43		$3,770		$3,770		$16,742.00
264	$153,852.44		$37,416.91	_	$24,308.74	=	$13,108.17	65%	$8,520.31		$3,770		$3,770		$28,085.74
674	$110,104.58		$26,777.43	_	$17,017.43	=	$9,760.00	65%	$6,344.00		$3,770		$3,770		$20,794.43
675	$79,664.42		$19,374.39	_	$11,944.07	=	$7,430.32	65%	$4,829.71		$3,770		$3,770		$15,721.07

Source: CMS FY 2026 IPPS Final Rule; illustrative national estimates only. Hospital-specific payments vary by wage index, new technology adjustments, outliers, and other factors

MERIT WRAPSODY® Cell-Impermeable Endoprosthesis

NTAP GUIDE

FREQUENTLY ASKED QUESTIONS

1. When does the WRAPSODY CIE NTAP effective period start?

The WRAPSODY CIE NTAP goes into effect for hospital inpatient discharges on or after October 1, 2025 for the CMS Federal Fiscal Year 2026.

2. How long is WRAPSODY CIE NTAP effective?

The WRAPSODY CIE NTAP will be effective for three years [from Oct 1, 2025, to Sep 30, 2028].

3. Is NTAP payment for each WRAPSODY CIE used in the same procedure?

The NTAP procedure may reimburse up to twice the maximum of $3,770 based on the units reported, the ICD-10-PCS codes and the amount charged.

4. How do I report the WRAPSODY CIE procedure on the hospital inpatient billing form?

Report the appropriate ICD-10-PCS code that describes the use of WRAPSODY CIE procedure, and the vessel related to the WRAPSODY CIE procedure.

5. How is the total hospital reimbursement amount (including NTAP) calculated for each case?

The MS-DRG payment will be calculated for the MS-DRG reported and identified with the WRAPSODY CIE ICD-10-PCS code(s). The charge of the WRAPSODY CIE will be reported on the hospital inpatient UB-04 form. An incremental payment maximum of $3,770 will be added to the hospital MS-DRG payment.

6. Can the NTAP amount received by a hospital be less than the maximum $3,770 for a WRAPSODY CIE procedure?

Yes, the hospital-specific calculation of charge of the WRAPSODY CIE could be less than the maximum amount $3,770.

7. Do commercial payers and Medicare Advantage plans use NTAP payments?

No, NTAP payment only applies to cases covered under traditional Medicare (Fee-for-Service Medicare). The added patient outcomes and added cost of the WRAPSODY CIE may be an option to request added payment.

1. CMS-1833-F; FY 2026 IPPS Final Rule July 31, 2025.

2. Razavi MK, Balamuthusamy S, Makris AN, Hoggard JG, Hardin LO, et. al. Six-month safety and efficacy outcomes from the randomized-controlled arm of the WRAPSODY Arteriovenous Access Efficacy (WAVE) trial Kidney Int. 2025 Apr;107(4):740-750.

The WRAPSODY CIE is not approved for use in central veins in the United States.

Before using refer to Instructions for Use for indications, contraindications, warnings, precautions, and directions for use.

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