

# AngioDynamics Comments on New Reimbursement Rate for Hospital-Based Varicose Vein Ablations

ALBANY, N.Y., Dec. 10, 2013 (GLOBE NEWSWIRE) -- AngioDynamics (Nasdaq:ANGO), a leading provider of innovative, minimally invasive medical devices for vascular access, surgery, peripheral vascular disease and oncology, announced the Centers for Medicare and Medicaid Services (CMS) has created a new Ambulatory Payment Classification (APC) that includes both in-hospital endovenous radiofrequency (RF) treatments and in-hospital endovenous laser varicose vein ablation, such as the Company's VenaCure EVLT procedure.

The 2014 CMS fee schedule establishes new reimbursement rates for hospital-based laser and RF treatment of varicose veins. In 2013, the reimbursement for RF treatments and laser vein ablation averaged \$3,025 and \$1,959, respectively. Beginning January 1, 2014, hospital-based RF and laser procedures will be reimbursed under Ambulatory Payment Classification (APC) 0219 at an average rate of \$2,139. The Company estimates 20% of all U.S.-based thermal varicose vein ablations are performed in the hospital setting.

"We are pleased the new CMS APC increases payment for laser vein ablation by 9% while creating in-hospital reimbursement parity for thermal varicose vein ablation procedures," said John Soto, Senior Vice President, Global Franchise, Peripheral Vascular. "We believe the new APC will make it easier for clinicians to focus on the best clinical care for their patients."

## **About AngioDynamics**

AngioDynamics Inc. is a leading provider of innovative, minimally invasive medical devices used by professional healthcare providers for vascular access, surgery, peripheral vascular disease and oncology. AngioDynamics' diverse product lines include market-leading ablation systems, fluid management systems, vascular access products, angiographic products and accessories, angioplasty products, drainage products, thrombolytic products and venous products. More information is available at <u>www.AngioDynamics.com</u>.

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