Effective October 1, 2015, the Centers for Medicare & Medicaid Services (CMS) is implementing International Classification of Diseases, 10th Revision (ICD-10) Procedure Coding System (PCS) in place of the 9th Revision (ICD-9) procedure codes. CMS has provided a General Equivalence Mappings (GEMS) that crosswalk ICD-9 procedure codes to ICD-10 PCS (available at https://www.cms.gov/Medicare/Coding/ICD10/2016-ICD-10-PCS-and-GEMs.html). Below, Integra LifeSciences Corporation provides the mappings for select ICD-9 procedure codes. While Integra LifeSciences Corporation has used reasonable efforts to provide accurate coding information, this information should not be construed as providing clinical advice, dictating reimbursement policy, or substituting for the judgment of a practitioner. It is always the Provider's responsibility to determine and submit appropriate codes, charges, and modifiers for services that are rendered. Integra LifeSciences Corporation assumes no responsibilities or liabilities for the timeliness, accuracy, and completeness of the information contained herein. Since reimbursement laws, regulations, and payor policies change frequently, it is recommended that providers consult with their payors, coding specialists, and/or legal counsel regarding coverage, coding and payment issues.

Potential Procedures Using Integra® BioFix® Amniotic Membrane Allografts** - Inpatient Setting

<table>
<thead>
<tr>
<th>ICD-9 Procedure Code</th>
<th>ICD-10 PCS Root Operation</th>
<th>Code Description</th>
<th>Potential MS-DRG Assignment</th>
</tr>
</thead>
<tbody>
<tr>
<td>04.43</td>
<td>01N – Release/ Peripheral Nervous System</td>
<td>Release of carpal tunnel</td>
<td>040-042, 513-514, 906, 957-959</td>
</tr>
<tr>
<td>04.49</td>
<td>01N – Release/ Peripheral Nervous System</td>
<td>Other peripheral nerve or ganglion decompression or lysis of adhesions</td>
<td>040-042, 515-517, 907-909 957-959</td>
</tr>
<tr>
<td>04.6</td>
<td>01S – Reposition/ Peripheral Nervous System</td>
<td>Transposition of cranial and peripheral nerves</td>
<td></td>
</tr>
<tr>
<td>04.79</td>
<td>01Q – Repair/ Peripheral Nervous System</td>
<td>Other Neuroplasty</td>
<td></td>
</tr>
</tbody>
</table>
### Potential MS-DRG’s Using Integra® BioFix® Amniotic Membrane Allografts **- Inpatient Setting**

<table>
<thead>
<tr>
<th>MS-DRG</th>
<th>MS-DRG Description</th>
<th>Medicare National Average Payment</th>
</tr>
</thead>
<tbody>
<tr>
<td>040</td>
<td>Peripheral/Cranial Nerve and Other Nervous System Procedures with MCC</td>
<td>$22,134.50</td>
</tr>
<tr>
<td>041</td>
<td>Peripheral/Cranial Nerve and Other Nervous System Procedures with CC or Peripheral Neurostimulator</td>
<td>$12,653.23</td>
</tr>
<tr>
<td>042</td>
<td>Peripheral/Cranial Nerve and Other Nervous System Procedures without CC/MCC</td>
<td>$11,320.99</td>
</tr>
<tr>
<td>513</td>
<td>Hand or Wrist Procedures, Except Major Thumb or Joint Procedures with CC/MCC</td>
<td>$8,949.93</td>
</tr>
<tr>
<td>514</td>
<td>Hand or Wrist Procedures, Except Major Thumb or Joint Procedures without CC/MCC</td>
<td>$5,795.87</td>
</tr>
<tr>
<td>515</td>
<td>Other Musculoskeletal System and Connective Tissue O.R. Procedure with MCC</td>
<td>$18,698.37</td>
</tr>
<tr>
<td>516</td>
<td>Other Musculoskeletal System and Connective Tissue O.R. Procedures with CC</td>
<td>$12,349.69</td>
</tr>
<tr>
<td>517</td>
<td>Other Musculoskeletal System and Connective Tissue O.R. Procedures without CC/MCC</td>
<td>$10,704.97</td>
</tr>
<tr>
<td>906</td>
<td>Hand Procedures for Injuries</td>
<td>$8,967.22</td>
</tr>
<tr>
<td>907</td>
<td>Other O.R. Procedures for Injuries with MCC</td>
<td>$23,067.18</td>
</tr>
<tr>
<td>908</td>
<td>Other O.R. Procedures for Injuries with CC</td>
<td>$12,275.14</td>
</tr>
<tr>
<td>909</td>
<td>Other O.R. Procedures for Injuries without CC/MCC</td>
<td>$7,818.07</td>
</tr>
<tr>
<td>955</td>
<td>Craniotomy for Multiple Significant Trauma</td>
<td>$30,849.54</td>
</tr>
<tr>
<td>957</td>
<td>Other O.R. Procedures for Multiple Significant Trauma with MCC</td>
<td>$41,098.24</td>
</tr>
<tr>
<td>958</td>
<td>Other O.R. Procedures for Multiple Significant Trauma with CC</td>
<td>$23,013.51</td>
</tr>
<tr>
<td>959</td>
<td>Other O.R. Procedures for Multiple Significant Trauma without CC/MCC</td>
<td>$15,072.59</td>
</tr>
</tbody>
</table>

### Potential Procedures Using Integra® BioFix® Amniotic Membrane Allografts **- Hospital Outpatient/Ambulatory Surgical Center Setting**

<table>
<thead>
<tr>
<th>CPT Code</th>
<th>Code Description</th>
<th>APC</th>
<th>Relative Weight</th>
<th>2017 Medicare Base Payment Rate – Hospital Outpatient</th>
<th>2017 Medicare Payment Rate – Ambulatory Surgical Center</th>
</tr>
</thead>
<tbody>
<tr>
<td>64702</td>
<td>Neuroplasty; digital, 1 or both, same digit</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>64704</td>
<td>Neuroplasty; nerve of hand or foot</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>64708</td>
<td>Neuroplasty, major peripheral nerve, arm or leg, open; other than specified</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>64712</td>
<td>Neuroplasty, major peripheral nerve, arm or leg, open; sciatic nerve</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>64713</td>
<td>Neuroplasty, major peripheral nerve, arm or leg, open; brachial plexus</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>64714</td>
<td>Neuroplasty, major peripheral nerve, arm or leg, open; lumbar plexus</td>
<td>5431</td>
<td>20.8453</td>
<td>$1,563.42</td>
<td>$789.34</td>
</tr>
<tr>
<td>64718</td>
<td>Neuroplasty and/or transposition; ulnar nerve at elbow</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>64719</td>
<td>Neuroplasty and/or transposition; ulnar nerve at wrist</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>64721</td>
<td>Neuroplasty and/or transposition; median nerve at carpal tunnel</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>64722</td>
<td>Decompression; unspecified nerve(s) (specify)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>64726</td>
<td>Decompression; plantar digital nerve</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>64727</td>
<td>Internal neurolysis, requiring use of operating microscope (List separately in addition to code for neuroplasty) (Neuroplasty includes external neurolysis)</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>
## Potential Procedures Integra® BioFix® Amniotic Membrane Allografts **– Physician Fee Schedule – Facility**

<table>
<thead>
<tr>
<th>CPT Code</th>
<th>Code Description</th>
<th>Work Relative Value Unit</th>
<th>2017 National Medicare Payment Rate - Facility</th>
</tr>
</thead>
<tbody>
<tr>
<td>64702</td>
<td>Neuroplasty; digital, 1 or both, same digit</td>
<td>6.26</td>
<td>$514.64</td>
</tr>
<tr>
<td>64704</td>
<td>Neuroplasty; nerve of hand or foot</td>
<td>4.69</td>
<td>$328.74</td>
</tr>
<tr>
<td>64708</td>
<td>Neuroplasty, major peripheral nerve, arm or leg, open; other than specified</td>
<td>6.36</td>
<td>$513.57</td>
</tr>
<tr>
<td>64712</td>
<td>Neuroplasty, major peripheral nerve, arm or leg, open; sciatic nerve</td>
<td>8.07</td>
<td>$599.34</td>
</tr>
<tr>
<td>64713</td>
<td>Neuroplasty, major peripheral nerve, arm or leg, open; brachial plexus</td>
<td>11.40</td>
<td>$793.86</td>
</tr>
<tr>
<td>64714</td>
<td>Neuroplasty, major peripheral nerve, arm or leg, open; lumbar plexus</td>
<td>10.55</td>
<td>$732.13</td>
</tr>
<tr>
<td>64718</td>
<td>Neuroplasty and/or transposition; ulnar nerve at elbow</td>
<td>7.26</td>
<td>$609.39</td>
</tr>
<tr>
<td>64719</td>
<td>Neuroplasty and/or transposition; ulnar nerve at wrist</td>
<td>4.97</td>
<td>$412.00</td>
</tr>
<tr>
<td>64722</td>
<td>Decompression; unspecified nerve(s) (specify)</td>
<td>4.82</td>
<td>$374.32</td>
</tr>
<tr>
<td>64726</td>
<td>Decompression; plantar digital nerve</td>
<td>4.27</td>
<td>$281.01</td>
</tr>
<tr>
<td>64727</td>
<td>Internal neurolysis, requiring use of operating microscope (List separately in addition to code for neuroplasty) (Neuroplasty includes external neurolysis)</td>
<td>3.10</td>
<td>$192.00</td>
</tr>
</tbody>
</table>

## Potential Procedures Integra® BioFix® Amniotic Membrane Allografts **– Physician Fee Schedule – Facility and Non-Facility**

<table>
<thead>
<tr>
<th>CPT Code</th>
<th>Code Description</th>
<th>Work Relative Value Unit</th>
<th>2017 National Medicare Payment Rate – Facility</th>
<th>2017 National Medicare Payment Rate Non-Facility</th>
</tr>
</thead>
<tbody>
<tr>
<td>64721</td>
<td>Neuroplasty and/or transposition; median nerve at carpal tunnel</td>
<td>4.97</td>
<td>$438.92</td>
<td>$441.43</td>
</tr>
</tbody>
</table>

## HCPCS Code

<table>
<thead>
<tr>
<th>HCPCS Code</th>
<th>Code Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>C1763</td>
<td>Connective tissue, human</td>
</tr>
</tbody>
</table>

When performing Neuroplasty in conjunction with wrapping a nerve, use CPT codes 64702-64727 in addition to CPT code 64999. Currently there are no CPT procedure codes for wrapping a nerve. If you are trying to seek reimbursement for wrapping the nerve, it is recommended that you use CPT code 64999 to account for the procedure. When using an unlisted procedure code such as CPT code 64999, it is necessary to provide supporting documentation when submitting the claim. Supporting documentation may include an Operative report or an Operative note.

**Note:** It is not appropriate to bill Medicare for procedures involving implantable biologicals such as Integra® BioFix® Amniotic Membrane Allograft, Integra® BioFix® Plus Amniotic Membrane Allograft or Integra® BioFix® Flow Placental Tissue Matrix Allograft using CPT Procedure Code 15777 -Implantation of biologic implant (eg, acellular dermal matrix) for soft tissue reinforcement (ie, breast, trunk) (List separately in addition to code for primary procedure) if the product is not being used in the breast or trunk. This code is to be used exclusively for reporting of implantation of biologic implant for the breast and trunk only per the guidance provided in CPT Assistant Jan 12:10, Oct 13:15; CPT Changes: An Insider’s View 2012, 2014.