

Coding and Reimbursement Guide for Integra® BioFix® Amniotic Membrane Allografts for Use in Tendon Repair Procedures - 2017

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 intends to use 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

ICD-9 Procedure Code	ICD-10 PCS Root Operation	Code Description	Potential MS-DRG Assignment
82.41	0LQ – Repair/Tendon	Suture of Tendon Sheath of Hand	040-042,
82.42		Delayed suture of flexor tendon of hand	513-514,
82.43		Delayed suture of other tendon of hand	579-581,
82.44		Other Suture of Flexor Tendon of Hand	906
82.45		Other Suture of Other Tendon of Hand	957-959
82.51	0LS – Reposition/Tendon	Advancement of tendon of hand	040-042, 513-514, 906, 957-959
82.85	0LQ – Repair/Tendon	Other tenodesis of hand	040-042, 513-514, 579-581, 906, 957-959
82.91	0LN – Release/Tendon	Lysis of adhesions of hand	513-514, 579-581, 906, 957-959
83.61	0LQ – Repair/Tendon	Suture of Tendon Sheath	040-042,
83.62		Delayed suture of tendon	500-502,
83.64		Other Suture of Tendon	579.581,
83.71	0LS –Reposition/Tendon	Advancement of tendon	907-909, 957-959
83.73	0LM – Reattachment/Tendon	Reattachment of Tendon	040-042, 500-502, 907-909, 957-959
83.88	0LQ – Repair/Tendon,	Other Plastic Operations on Tendon	040-042, 500-502, 579.581, 907-909, 957-959
	0LM – Reattachment/Tendon		040-042, 500-502, 907-909, 957-959
83.91	0LN – Release/Tendon	Lysis of adhesions of muscle, tendon, fascia, and bursa	500-502

Potential MS-DRG's Using Integra® BioFix® Amniotic Membrane Allografts - Inpatient Setting**

MS-DRG	MS-DRG Description	Medicare National Average Payment
040	Peripheral/Cranial Nerve and Other Nervous System Procedures with MCC	\$22,960.35
041	Peripheral/Cranial Nerve and Other Nervous System Procedures with CC or Peripheral Neurostimulator	\$14,051.45
042	Peripheral/Cranial Nerve and Other Nervous System Procedures without CC/MCC	\$11,511.22
500	Soft Tissue Procedures with MCC	\$17,829.86
501	Soft Tissue Procedures with CC	\$10,180.22
502	Soft Tissue Procedures without CC/MCC	\$7,615.88
513	Hand or Wrist Procedures, Except Major Thumb or Joint Procedures with CC/MCC	\$9,564.75
514	Hand or Wrist Procedures, Except Major Thumb or Joint Procedures without CC/MCC	\$6,142.01
579	Other Skin, Subcutaneous Tissue and Breast Procedures with MCC	\$16,816.53
580	Other Skin, Subcutaneous Tissue and Breast Procedures with CC	\$10,007.79
581	Other Skin, Subcutaneous Tissue and Breast Procedures without CC/MCC	\$7,879.72
906	Hand Procedures for Injuries	\$8,967.22
907	Other O.R. Procedures for Injuries with MCC	\$25,146.14
908	Other O.R. Procedures for Injuries with CC	\$12,205.66
909	Other O.R. Procedures for Injuries without CC/MCC	\$8,479.10
957	Other O.R. Procedures for Multiple Significant Trauma with MCC	\$44,026.08
958	Other O.R. Procedures for Multiple Significant Trauma with CC	\$25,669.37
959	Other O.R. Procedures for Multiple Significant Trauma without MCC	\$16,241.46

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

CPT Code	Code Description	Anatomical Region	APC	Relative Weight	2017 Medicare Base Payment Rate – Hospital Outpatient	2017 Medicare Payment Rate – Ambulatory Surgical Center
25260	Repair, tendon or muscle, flexor, forearm and/or wrist; primary, single, each tendon or muscle	Upper Extremity	5113	32.5107	\$2,438.34	\$1,219.54
25263	Repair, tendon or muscle, flexor, forearm and/or wrist; secondary, single, each tendon or muscle	Upper Extremity	5113	32.5107	\$2,438.34	\$1,219.54
25270	Repair, tendon or muscle, extensor, forearm and/or wrist; primary, single, each tendon or muscle	Upper Extremity	5113	32.5107	\$2,438.34	\$1,219.54
25272	Repair, tendon or muscle, extensor, forearm and/or wrist; secondary, single, each tendon or muscle	Upper Extremity	5113	32.5107	\$2,438.34	\$1,219.54
25275	Repair, tendon sheath, extensor, forearm and/or wrist, with free graft (includes obtaining graft) (eg, for extensor carpi ulnaris subluxation)	Upper Extremity	5113	32.5107	\$2,438.34	\$1,219.54
25295	Tenolysis, flexor or extensor tendon, forearm and/or wrist, single, each tendon	Upper Extremity	5113	32.5107	\$2,438.34	\$1,219.54
25300	Tenodesis at wrist; flexors of fingers	Upper Extremity	5113	32.5107	\$2,438.34	\$1,219.54

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

CPT Code	Code Description	Anatomical Region	APC	Relative Weight	2017 Medicare Base Payment Rate – Hospital Outpatient	2017 Medicare Payment Rate – Ambulatory Surgical Center
25301	Tenodesis at wrist; extensors of fingers	Upper Extremity	5113	32.5107	\$2,438.34	\$1,219.54
26350	Repair or advancement, flexor tendon, not in zone 2 digital flexor tendon sheath (eg, no man's land); primary or secondary without free graft, each tendon	Upper Extremity	5113	32.5107	\$2,438.34	\$1,219.54
26356	Repair or advancement, flexor tendon, in zone 2 digital flexor tendon sheath (eg, no man's land); primary, without free graft, each tendon	Upper Extremity	5113	32.5107	\$2,438.34	\$1,219.54
26370	Repair or advancement of profundus tendon, w/ intact superficialis tendon; primary, each tendon	Upper Extremity	5113	32.5107	\$2,438.34	\$1,219.54
26410	Repair, extensor tendon, hand, primary or secondary; without free graft, each tendon	Upper Extremity	5113	32.5107	\$2,438.34	\$1,219.54
26418	Repair, extensor tendon, finger, primary or secondary; without free graft, each tendon	Upper Extremity	5113	32.5107	\$2,438.34	\$1,219.54
26440	Tenolysis, flexor tendon; palm OR finger, each tendon	Upper Extremity	5112	16.2320	\$1,217.42	\$695.88
26442	Tenolysis, flexor tendon; palm AND finger, each tendon	Upper Extremity	5113	32.5107	\$2,438.34	\$1,219.54
26445	Tenolysis, extensor tendon, hand OR finger, each tendon	Upper Extremity	5113	32.5107	\$2,438.34	\$1,219.54
26449	Tenolysis, complex, extensor tendon, finger, including forearm, each tendon	Upper Extremity	5113	32.5107	\$2,438.34	\$1,219.54
27650	Repair, primary, open or percutaneous, ruptured Achilles tendon	Lower Extremity	5113	32.5107	\$2,438.34	\$1,219.54
27654	Repair, secondary, Achilles tendon, with or without graft	Lower Extremity	5114	69.6200	\$5,221.57	\$2,651.09
27680	Tenolysis, flexor or extensor tendon, leg and/or ankle; single, each tendon	Lower Extremity	5113	32.5107	\$2,438.34	\$1,219.54
27681	Tenolysis, flexor or extensor tendon, leg and/or ankle; multiple tendons (through separate incision(s))	Lower Extremity	5113	32.5107	\$2,438.34	\$1,219.54
28200	Repair, tendon, flexor, foot; primary or secondary, without free graft, each tendon	Lower Extremity	5113	32.5107	\$2,438.34	\$1,219.54
28208	Repair, tendon, extensor, foot; primary or secondary, each tendon	Lower Extremity	5113	32.5107	\$2,438.34	\$1,219.54
28220	Tenolysis, flexor, foot; single tendon	Lower Extremity	5113	32.5107	\$2,438.34	\$287.11
28225	Tenolysis, extensor, foot; single tendon	Lower Extremity	5113	32.5107	\$2,438.34	\$1,219.54

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

CPT Code	Code Description	Anatomical Region	Work Relative Value Unit	2017 National Medicare Payment Rate - Facility
25260	Repair, tendon or muscle, flexor, forearm and/or wrist; primary, single, each tendon or muscle	Upper Extremity	8.04	\$647.07
25263	Repair, tendon or muscle, flexor, forearm and/or wrist; secondary, single, each tendon or muscle	Upper Extremity	8.04	\$641.69
25270	Repair, tendon or muscle, extensor, forearm and/or wrist; primary, single, each tendon or muscle	Upper Extremity	6.17	\$503.16
25272	Repair, tendon or muscle, extensor, forearm and/or wrist; secondary, single, each tendon or muscle	Upper Extremity	7.21	\$568.48
25275	Repair, tendon sheath, extensor, forearm and/or wrist, with free graft (includes obtaining graft) (eg, for extensor carpi ulnaris subluxation)	Upper Extremity	8.96	\$689.42
25295	Tenolysis, flexor or extensor tendon, leg and/or ankle; multiple tendons (through separate incision(s))	Lower Extremity	6.72	\$539.05
25300	Tenodesis at wrist; flexors of fingers	Upper Extremity	9.02	\$699.83
25301	Tenodesis at wrist; extensors of fingers	Upper Extremity	8.59	\$661.79
26350	Repair or advancement, flexor tendon, not in zone 2 digital flexor tendon sheath (eg, no man's land); primary or secondary without free graft, each tendon	Upper Extremity	6.21	\$720.29
26356	Repair or advancement, flexor tendon, in zone 2 digital flexor tendon sheath (eg, no man's land); primary, without free graft, each tendon	Upper Extremity	9.56	\$815.39
26370	Repair or advancement of profundus tendon, with intact superficialis tendon; primary, each tendon	Upper Extremity	7.28	\$767.30
26410	Repair, extensor tendon, hand, primary or secondary; without free graft, each tendon	Upper Extremity	4.77	\$570.99
26418	Repair, extensor tendon, finger, primary or secondary; without free graft, each tendon	Upper Extremity	4.47	\$583.55
26440	Tenolysis, flexor tendon; palm OR finger, each tendon	Upper Extremity	5.16	\$625.54
26442	Tenolysis, flexor tendon; palm AND finger, each tendon	Upper Extremity	9.75	\$979.04
26445	Tenolysis, extensor tendon, hand OR finger, each tendon	Upper Extremity	4.45	\$582.11
26449	Tenolysis, complex, extensor tendon, finger, including forearm, each tendon	Upper Extremity	8.59	\$713.83
27650	Repair, primary, open or percutaneous, ruptured Achilles tendon	Lower Extremity	9.21	\$678.30
27654	Repair, secondary, Achilles tendon, with or without graft	Lower Extremity	10.53	\$729.98
27680	Tenolysis, flexor or extensor tendon, leg and/or ankle; single, each tendon	Lower Extremity	5.88	\$442.51
27681	Tenolysis, flexor or extensor tendon, leg and/or ankle; multiple tendons (through separate incision(s))	Lower Extremity	7.05	\$563.45

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

CPT Code	Code Description	Anatomical Region	Work Relative Value Unit	2017 National Medicare Payment Rate – Facility	2017 National Medicare Payment Rate Non-Facility
28200	Repair, tendon, flexor, foot; primary or secondary, without free graft, each tendon	Lower Extremity	4.74	\$332.69	\$509.26
28208	Repair, tendon, extensor, foot; primary or secondary, each tendon	Lower Extremity	4.51	\$324.07	\$494.55
28220	Tenolysis, flexor, foot; single tendon	Lower Extremity	4.67	\$312.95	\$468.71
28225	Tenolysis, extensor, foot; single tendon	Lower Extremity	3.78	\$269.88	\$428.51

HCPCS Code

HCPCS Code	Code Description
C1763	Connective tissue, human

Currently there are no CPT procedure codes for the application of Integra® BioFix® Amniotic Membrane Allograft or Integra® BioFix® Plus Amniotic Membrane Allograft for wrapping a tendon. It is recommended that the following unlisted CPT procedure codes be used to represent the application of Integra® BioFix® Amniotic Membrane Allograft & Integra® BioFix® Plus Amniotic Membrane Allograft if trying to bill for the wrapping of a tendon as a procedure. When using an unlisted procedure code such as the codes provided below, it is necessary to provide supporting documentation when submitting the claim. Supporting documentation may include an Operative report or an Operative note.

- **26989 – Unlisted procedure, hands or fingers**
- **27899 – Unlisted procedure, leg or ankle**
- **28899 – Unlisted procedure, foot or toes**

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.

For assistance with coding and reimbursement, please contact our Integra Reimbursement Hotline at 1-877-444-1122, option 3, Monday to Friday, 8 am to 6 pm, or via email at reimbursement@integralife.com

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