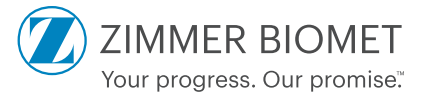


Ankle Coding Reference Guide



Physician

CPT® Code	CPT Description
27702	Arthroplasty, ankle; with implant (total ankle)

Physician – Revision and Removal

CPT Code	CPT Description
27703	Arthroplasty, ankle; revision, total ankle
27704	Removal of ankle implant

Hospital Outpatient and Free-Standing Ambulatory Surgery Center (ASC)

CPT Code	CPT Description	OPPS Status Indicator	APC	ASC Payment Indicator
27702	Arthroplasty, ankle; with implant (total ankle)	C	--	NA
27703	Arthroplasty, ankle; revision, total ankle	C	--	NA
27704	Removal of ankle implant	Q2	5113	A2

OPPS – Outpatient Prospective Payment System; APC – Ambulatory Payment Classification

Status Indicator C – Not paid under OPPS; Q2 – procedure is packaged only if it is billed on the same date of service with any other codes with a T status indicator. If not, they are separately payable under a separate APC.

APC 5113 – Level 3 Musculoskeletal Procedures

Payment Indicator A2 – Payment based on OPPS relative payment weight; NA – This procedure is not on Medicare’s List of ASC Covered Surgical Procedures.

Hospital Inpatient

MS-DRG and Description*

469	Major Joint Replacement or Reattachment of Lower Extremity with MCC
470	Major Joint Replacement or Reattachment of Lower Extremity without MCC
515	Other Musculoskeletal System and Connective Tissue O.R. Procedure with MCC
516	Other Musculoskeletal System and Connective Tissue O.R. Procedure with CC
517	Other Musculoskeletal System and Connective Tissue O.R. Procedure without CC/MCC

The DRG will be determined by the primary procedure performed.

CC – Complication and/or Comorbidity, MCC – Major Complication and/or Comorbidity

*MS-DRG – Medicare Severity Diagnosis Related Group. Other MS-DRGs may apply

ICD-10-PCS Code	ICD-10-PCS Description
ØSRFØJ9	Replacement of right ankle joint with synthetic substitute, cemented, open approach
ØSRFØJA	Replacement of right ankle joint with synthetic substitute, uncemented, open approach
ØSRFØJZ	Replacement of right ankle joint with synthetic substitute, open approach
ØSRGØJ9	Replacement of left ankle joint with synthetic substitute, cemented, open approach
ØSRGØJA	Replacement of left ankle joint with synthetic substitute, uncemented, open approach
ØSRGØJZ	Replacement of left ankle joint with synthetic substitute, open approach
Revision	
ØSWFØJZ	Revision of synthetic substitute in right ankle joint, open approach
ØSWF4JZ	Revision of synthetic substitute in right ankle joint, percutaneous endoscopic approach
ØSWGØJZ	Revision of synthetic substitute in left ankle joint, open approach
ØSWG4JZ	Revision of synthetic substitute in left ankle joint, percutaneous endoscopic approach
Removal	
ØSPFØJZ	Removal of synthetic substitute from right ankle joint, open approach
ØSPF4JZ	Removal of synthetic substitute from right ankle joint, percutaneous endoscopic approach
ØSPGØJZ	Removal of synthetic substitute from left ankle joint, open approach
ØSPG4JZ	Removal of synthetic substitute from left ankle joint, percutaneous endoscopic approach

HCPCS	
HCPCS Code	HCPCS Description
C1776	Joint device (implantable)

HCPCS – Healthcare Common Procedure Coding System

Note: C-codes report devices used in conjunction with outpatient procedures billed and paid for under Medicare OPPS

For further assistance with coding and reimbursement questions, contact the Zimmer Biomet Reimbursement Hotline at 866-946-0444 or reimbursement@zimmerbiomet.com

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