

# Synovasure® Alpha Defensin Lateral Flow Test Coding Reference Guide



The Synovasure Alpha Defensin Lateral Flow Test Kit is a qualitative visually-read immunochromatographic assay for the detection of human host response proteins, Alpha Defensins 1-3, in the synovial fluid of adults with a total joint replacement who are being evaluated for revision surgery. The Synovasure Alpha Defensin Lateral Flow Test Kit results are intended to be used in conjunction with other clinical and diagnostic findings as an aid in the diagnosis of periprosthetic joint infection (PJI). The Synovasure Alpha Defensin Lateral Flow Test Kit is not intended to identify the etiology or severity of a PJI.

Current Procedural Terminology (CPT) Code and Description	
CPT® Code	Description
<b>Aspiration of synovial fluid from the joint</b>	
20610	Arthrocentesis, aspiration and/or injection, major joint or bursa (eg, shoulder, hip, knee, subacromial bursa); without ultrasound guidance
20611	Arthrocentesis, aspiration and/or injection, major joint or bursa (eg, shoulder, hip, knee, subacromial bursa); with ultrasound guidance, with permanent recording and reporting
<b>Performing the Synovasure Alpha Defensin Lateral Flow Test</b>	
83518	Immunoassay for analyte other than infectious agent antibody or infectious agent antigen; qualitative or semiquantitative, single step method (eg, reagent strip)

CPT/Healthcare Common Procedure Coding System (HCPCS) Modifiers	
Modifier	Description
LT	Left side (used to identify procedures performed on the left side of the body)
RT	Right side (used to identify procedures performed on the right side of the body)
50	Bilateral Procedure
59	Distinct Procedural Service (indicates that a procedure or service was distinct or independent from other non-E/M services performed on the same day)
QW	CLIA waived test

Hospital Outpatient and Ambulatory Surgical Center (ASC)				
CPT® Code	Description	OPPS Status Indicator	Ambulatory Payment Classification	ASC Payment Indicator
20610	Arthrocentesis, aspiration and/or injection, major joint or bursa (eg, shoulder, hip, knee, subacromial bursa); without ultrasound guidance	T	5441	P3
20611	Arthrocentesis, aspiration and/or injection, major joint or bursa (eg, shoulder, hip, knee subacromial bursa); with ultrasound guidance, with permanent recording and reporting	T	5441	P3
83518	Immunoassay for analyte other than infectious agent antibody or infectious agent antigen; qualitative or semiquantitative, single step method (eg, reagent strip)	Q4	NA	NA

**OPPS** - Outpatient Prospective Payment System; **APC** - Ambulatory Payment Classification; **ASC** - Ambulatory Surgical Center

**Status Indicator:** Q4 - Conditionally Packaged Laboratory Tests Paid under OPPS or CLFS. (1) Packaged APC payment if billed on the same claim as a HCPCS code assigned published status indicator "J1", "J2", "S", "T", "V", "Q1", "Q2", or "Q3". (2) In other circumstances, laboratory tests should have a status indicator of "A" and payment is made under the CLFS: T - Multiple procedure reduction applies.

**APC** - 5441 - Level 1 Nerve Injections; NA - Not applicable.

**Payment Indicator:** NA - This procedure is not on Medicare's ASC Coverage Procedures List (CPL); P3 - Payment base on Medicare's Physician Fee Schedule (MPFS) non-facility Practice Expense (PE) Relative Value Units (RVUs).

**For further assistance with reimbursement questions, contact the Zimmer Biomet Reimbursement Hotline at 866-946-0444 or [reimbursement@zimmerbiomet.com](mailto:reimbursement@zimmerbiomet.com), or visit our reimbursement web site at [www.zimmerbiomet.com/reimbursement](http://www.zimmerbiomet.com/reimbursement).**

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