

# BioWick™ Surelock™ Implant Coding Reference Guide

The BioWick™ SureLock™ Implant is an interpositional bioresorbable scaffold wick composed of aligned, poly (lactic-co-glycolic acid), or PLGA, microfibers designed to mimic the extracellular matrix (collagen) of the rotator cuff tendon. The BioWick™ SureLock™ Implant delivers integrated anchor technology allowing surgeons to place the implant between tendon and bone using standard arthroscopic techniques while reducing bone removal through a smaller pilot hole.

Physician	
CPT® Code	CPT Description
N/A	Under CPT coding guidelines, anchors with scaffolding are considered an inherent part of the primary procedure and are not separately reported. Therefore, no specific or unlisted CPT code should be reported for its use.
<i>Examples of primary procedures within which the BioWick Surelock Implant is considered inherent and not separately reported.</i>	
<b>23410</b>	Repair of ruptured musculotendinous cuff (eg, rotator cuff) open; acute
<b>23412</b>	Repair of ruptured musculotendinous cuff (eg, rotator cuff) open; chronic
<b>23420</b>	Reconstruction of complete shoulder (rotator) cuff avulsion, chronic (includes acromioplasty)
<b>29827</b>	Arthroscopy, shoulder, surgical; with rotator cuff repair

Hospital Inpatient: ICD-10-PCS Code and Description			
<b>Reattachment</b>			
Ø Medical and Surgical L Tendon M Reattachment			
Body Part	Approach	Device	Qualifier
1 Shoulder Tendon, Right 2 Shoulder Tendon, Left	Ø Open 4 Percutaneous Endoscopic	Z No Device	Z No Qualifier
<b>Repair</b>			
Ø Medical and Surgical L Tendon Q Repair			
1 Shoulder Tendon, Right 2 Shoulder Tendon, Left	Ø Open 4 Percutaneous Endoscopic	Z No Device	Z No Qualifier
<b>Replacement</b>			
Ø Medical and Surgical L Tendon R Replacement			
1 Shoulder Tendon, Right 2 Shoulder Tendon, Left	Ø Open 4 Percutaneous Endoscopic	7 Autologous Tissue Substitute J Synthetic Substitute K Nonautologous Tissue Substitute	Z No Qualifier
<b>Supplement</b>			
Ø Medical and Surgical L Tendon U Supplement			
1 Shoulder Tendon, Right 2 Shoulder Tendon, Left	Ø Open 4 Percutaneous Endoscopic	7 Autologous Tissue Substitute J Synthetic Substitute K Nonautologous Tissue Substitute	Z No Qualifier

Hospital Inpatient: Medicare Severity-Diagnosis Related Group (MS-DRG)*	
MS-DRG	Description
The ICD-10-PCS code(s) listed does/do not determine MS-DRG assignment. Instead, the MS-DRG will be assigned based upon the patient's diagnosis(es) and the procedure(s) performed. Examples of MS-DRG assignment for primary procedures in which the use of BioWick may be appropriate or that involve rotator cuff repair are provided below.	
510	Shoulder, Elbow or Forearm Procedure, Except Major Joint Procedure with MCC
511	Shoulder, Elbow or Forearm Procedure, Except Major Joint Procedure with CC
512	Shoulder, Elbow or Forearm Procedure, Except Major Joint Procedure without CC/MCC

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

\*Other MS-DRGs may be applicable.

Hospital Outpatient and Ambulatory Surgery Center (ASC)				
CPT® Code	Description	OPPS Status Indicator	Ambulatory Payment Classification	ASC Payment Indicator
N/A	Under CPT coding guidelines, anchors with scaffolding are considered an inherent part of the primary procedure and are not separately reported. Therefore, no specific or unlisted CPT code should be reported for its use.			
<i>Examples of primary procedures within which the BioWick Surelock Implant is considered inherent and not separately reported.</i>				
23410	Repair of ruptured musculotendinous cuff (eg, rotator cuff) open; acute	J1	5114	A2
23412	Repair of ruptured musculotendinous cuff (eg, rotator cuff) open; chronic	J1	5114	A2
23420	Reconstruction of complete shoulder (rotator) cuff avulsion, chronic (includes acromioplasty)	J1	5114	A2
29827	Arthroscopy, shoulder, surgical; with rotator cuff repair	J1	5114	A2

OPPS - Medicare's Outpatient Prospective Payment System.

APC 5114 – Level 4 Musculoskeletal Procedures

Status Indicator J1 – Hospital Part B services paid through a comprehensive APC. Paid under OPPS; all covered Part B services on the claim are packaged with the primary "J1" service, with limited exceptions.

Payment Indicator A2 – Payment based on OPPS relative payment weight.

HCPCS (Healthcare Common Procedure Coding System)	
Code	Description
C1713	Anchor/screw for opposing bone-to-bone or soft tissue-to-bone (implantable)

C-codes report devices used in conjunction with outpatient procedures billed and paid for under Medicare's Outpatient Prospective Payment System (OPPS).

## Coding Guidance

Anchor for opposing bone-to-bone or soft tissue-to-bone (C1713) - Implantable pins and/or screws that are used to oppose soft tissue-to-bone, tendon-to-bone, or bone-to-bone. Screws oppose tissues via drilling as follows: soft tissue-to-bone, tendon-to-bone, or bone-to-bone fixation. Pins are inserted or drilled into bone, principally with the intent to facilitate stabilization or oppose bone-to-bone. This may include orthopedic plates with accompanying washers and nuts. This category also applies to synthetic bone substitutes that may be used to fill bony void or gaps (i.e., bone substitute implanted into a bony defect created from trauma or surgery).

<http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/HospitalOutpatientPPS/Downloads/Complelist-DeviceCats-OPPS.pdf>

**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 [zimmerbiomet.com/reimbursement](http://zimmerbiomet.com/reimbursement).**

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