

rejuvesol™ (Red Blood Cell Processing) Solution Coding Reference Guide



rejuvesol (Red Blood Cell Processing) Solution is a sterile, non-pyrogenic solution of sodium pyruvate, inosine, adenine, dibasic sodium phosphate, and monobasic sodium phosphate. rejuvesol Solution is designed for the extracorporeal rejuvenation of a unit of Red Blood Cells (RBC).

Healthcare providers are encouraged to check with the respective payer for recommended code assignment and billing process for rejuvesol Solution.

Physician	
CPT® Code	Description
<i>Report the most appropriate CPT code(s) for the blood transfusion and for laboratory services that may be applicable if not already described by a HCPCS Level II code (e.g., P-code). There is currently no HCPCS Level II code describing rejuvenated red blood cells and no CPT code describing rejuvenation laboratory services.</i>	
36460	Transfusion, blood or blood components
36440	Push transfusion, blood, 2 years or under
86890	Autologous blood or component, collection processing and storage; predeposited
86891	Autologous blood or component, collection processing and storage; intra- or postoperative salvage
86930	Frozen blood, each unit; freezing (includes preparation)
86931	Frozen blood, each unit; thawing
86932	Frozen blood, each unit; freezing (includes preparation) and thawing
86985	Splitting of blood or blood products, each unit
86999	Unlisted transfusion medicine procedure

Hospital Inpatient: ICD-10-PCS Procedure Code and Description			
3 Administration Ø Circulatory 2 Transfusion			
Body System/Region	Approach	Substance	Qualifier
3 Peripheral Vein 4 Central Vein 5 Peripheral Artery 6 Central Artery	3 Percutaneous	N Red Blood Cells P Frozen Red Cells	1 Nonautologous

NOTE: The codes listed above do not determine MS-DRG assignment. Instead, the MS-DRG will be assigned based upon the patient's diagnosis(es) and procedures performed.

Hospital Outpatient and Ambulatory Surgery Center (ASC)				
Code	Description	OPPS Status Indicator	Ambulatory Payment Classification	ASC Payment Indicator
<i>There is not a separately reportable HCPCS code available for blood rejuvenation or rejuvesol Solution.</i>				
P9016	Red blood cells, leukocytes reduced, each unit	R	9512	NA
P9021	Red blood cells, each unit	R	9517	NA
P9022	Red blood cells, washed, each unit	R	9518	NA
P9038	Red blood cells, irradiated, each unit	R	9505	NA
P9039	Red blood cells, deglycerolized, each unit	R	9504	NA
P9040	Red blood cells, leukocytes reduced, irradiated, each unit	R	9522	NA

Hospital Outpatient and Ambulatory Surgery Center (ASC) (cont.)				
P9051	Whole blood or red blood cells, leukocytes reduced, CMV-negative, each unit	R	9524	NA
P9054	Whole blood or red blood cells, leukocytes reduced, frozen, deglycerol, washed, each unit	R	9527	NA
P9057	Red blood cells, frozen/deglycerolized/washed, leukocytes reduced, irradiated, each unit	R	9532	NA
P9058	Red blood cells, leukocytes reduced, CMV-negative, irradiated, each unit	R	9533	NA
Modifier	Description			
BL	Special acquisition of blood and blood products <i>NOTE: Append modifier BL to every HCPCS code reported when the blood or blood product was purchased. Hospitals that do not purchase blood or blood products, that only pay processing and storage charges, do not append modifier BL to the HCPCS code(s).</i>			

OPPS - Medicare's Outpatient Prospective Payment System.

Status Indicator: R – Blood and Blood Products

APC 9504 - RBC deglycerolized; APC 9505 - RBC irradiated; APC 9512 - RBC leukocytes reduced; APC 9517 - Red blood cells unit; APC 9518 - Washed red blood cells unit; APC 9522 - RBC leukoreduced irradiated; APC 9524 - Blood, l/r, cmv-neg; APC 9527 - Blood, l/r, froz/degly/wash; APC 9532 - RBC, frz/deg/wsh, l/r, irradi; APC 9533 - RBC, l/r, cmv-neg, irradi

Payment Indicator: NA - This procedure is not on Medicare's ASC Covered Procedures List (CPL)

- When billing for blood, blood products, and related services under the Hospital Outpatient Prospective Payment System (OPPS), the provider reports charges for the blood or blood product itself using Revenue Code series 0381-0389 with the Line Item Date of Service (LIDOS), the number of units transfused, and the appropriate blood product HCPCS code and HCPCS modifier BL. When using Revenue Code 038X, a separate line for processing and storage services is required. These services should use either Revenue Code 0390 or 0399. Payments will not process unless both lines report the same line item date of service, units, and the HCPCS code and include modifier BL.
- Processing and storage services are reported on a separate line using Revenue Code 0390, 0392, or 0399 with the LIDOS, the number of units transfused, and the appropriate blood product HCPCS code and HCPCS modifier BL.

Revenue Codes	
Code	Description
030X	Laboratory <i>(Use with unlisted transfusion medicine procedure, if applicable)</i>
031X	Laboratory Pathological <i>(Use with unlisted transfusion medicine procedure, if applicable)</i>
0381	Blood and Blood Components: Packed Red Cells
0390	Blood Storage and Processing: General Classification
0391	Blood Storage and Processing: Blood Administration (e.g. Transfusion)
0392	Blood Storage and Processing: Processing and Storage
0399	Blood Storage and Processing: Other Processing and Storage

National Drug Code (NDC)	
Code	Description
23731-7000-05	rejuvesol Solution

Some payers may allow for the billing of rejuvesol Solution using the National Drug Code (NDC).

For full rejuvesol instructions for use, see the package insert at www.zimmerbiomet.com

For further assistance with reimbursement questions, contact the Zimmer Biomet Reimbursement Hotline at 866-946-0444 or reimbursement@zimmerbiomet.com, or visit our reimbursement web site at zimmerbiomet.com/reimbursement.

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