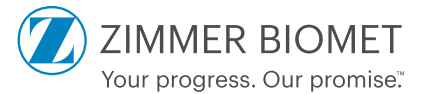


SternaLock® Rigid Sternal Fixation Coding Reference Guide



SternaLock Blu®

SternaLock Blu is indicated for stabilization and fixation of fractures of the anterior chest wall including sternal fixation following sternotomy or sternal reconstructive surgical procedures to aid in the alignment and stabilization of bone.

SternaLock® 360 Sternal Closure System

SternaLock 360 Sternal Closure System is intended for use in the stabilization and fixation of fractures of the sternum including sternal fixation following sternotomy and sternal reconstructive surgical procedures, to promote fusion. The system is intended for use in patients with normal and/or poor bone quality.

| Physician | |
|-----------|--|
| CPT® Code | CPT Description |
| 21750 | Closure of median sternotomy separation with or without debridement (separate procedure) |

NOTE: This separate procedure by definition is usually a component of a more complex service and is not identified separately. When performed alone or with other unrelated procedures/services, it may be reported.

| Hospital Inpatient | |
|--|---|
| ICD-10-PCS Code and Description | Medicare Severity-Diagnosis Related Group (MS-DRG) and Description* |
| OPS000Z Reposition sternum with rigid plate internal fixation device, open approach | <p>ICD-10-PCS indicates this procedure does not affect MS-DRG assignment. The patient's diagnoses and procedures performed will determine MS-DRG assignment.</p> <p>Based on ICD-10-PCS Procedure Code and MS-DRG assignment when this service is performed as a stand-alone procedure, potential MS-DRGs may include¹:</p> <p>166 Other Respiratory System O.R. Procedures with MCC 167 Other Respiratory System O.R. Procedures with CC 168 Other Respiratory System O.R. Procedures without CC/MCC</p> |
| OPH000Z Insertion of rigid plate internal fixation device into sternum, open approach | <p>264 Other Circulatory System O.R. Procedures</p> <p>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</p> |

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

¹Other MS-DRGs may apply

| Hospital Outpatient and Ambulatory Surgery Center (ASC) | | | |
|---|--|----------------|-----------------------|
| CPT Code | CPT Description | APC | ASC Payment Indicator |
| 21750 | Closure of median sternotomy separation with or without debridement (separate procedure) | C ² | NA ³ |

APC – Ambulatory Payment Classification

²Procedure is on Medicare's List of Inpatient Only Procedures.

³This procedure is not on Medicare's List of ASC Covered Surgical Procedures.

HCPCS (Healthcare Common Procedure Coding System)

| HCPCS Code | HCPCS Description |
|------------|---|
| C1713 | Anchor/screw for opposing bone-to-bone or soft tissue-to-bone (implantable) |

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

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

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