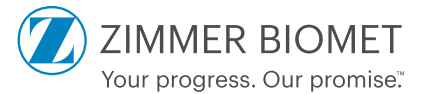


SpF Plus-Mini Implantable Fusion Stimulator Coding Reference Guide



The SpF Plus-Mini (60 µA/W) and SpF Plus-Mini (60 µA/M) Implantable Fusion Stimulators are indicated as a spinal fusion adjunct to increase the probability of fusion success in 1 or 2 levels. The SpF-XL IIb Implantable Spinal Fusion Stimulators are indicated as a spinal fusion adjunct to increase the probability of fusion success in 3 or more levels.

Physician	
CPT® Code	CPT Description
20975	Electrical stimulation to aid bone healing; invasive (operative)
20680	Removal of implant; deep (eg, buried wire, pin, screw, metal band, nail, rod or plate)

Hospital Outpatient and Free-Standing Ambulatory Surgery Center (ASC)				
CPT Code	CPT Description	OPPS Status Indicator	APC	ASC Payment Indicator
20975	Electrical stimulation to aid bone healing; invasive (operative)	N	--	N1
20680	Removal of implant; deep (eg, buried wire, pin, screw, metal band, nail, rod or plate)	Q2	0022	A2

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

Status Indicator N – Payment is packaged into payment for other services; no separate APC payment; 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.

0022 - Level IV Excision/ Biopsy

N1 - Packaged service/item; no separate payment made; A2 - Payment based on OPPS relative payment weight.

Hospital Inpatient	
ICD-9-CM Procedure Code and Description	MS-DRG and Description*
78.99 – Insertion of bone growth stimulator, other	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
78.69 - Removal of implanted devices from bone, other	495 Local Excision and Removal Internal Fixation Devices Except Hip and Femur with MCC
	496 Local Excision and Removal Internal Fixation Devices Except Hip and Femur with CC
	497 Local Excision and Removal Internal Fixation Devices Except Hip and Femur without CC/MCC

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
ØPHYØMZ	Insertion of bone growth stimulator into upper bone, open approach
ØPPYØMZ	Removal of bone growth stimulator from upper bone, open approach

HCPCS Code	HCPCS Description
E0749	Osteogenesis stimulator, electrical, surgically implanted

HCPCS – Healthcare Common Procedure Coding System

Note: HCPCS 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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