

ProDisc-L Total Disc Replacement.

Hospital Billing Guide.



1. Evidence of Medical Necessity

Diagnosis codes (ICD-9 codes) are a drill-down to the most appropriate diagnosis to establish medical necessity.

The main heading is:

- 722...intervertebral disc disorders
drill down to
- 722.52...lumbar or lumbosacral intervertebral disc
or
- 722.10...lumbar intervertebral disc
without myelopathy
may also be appropriate. The physician will decide.

Gather patient history

Indicate the following:

- Skeletally mature patient
- DDD in the lumbar spine at one level (L3–L4, L4–L5 or L5–S1)
- No more than a grade 1 spondylolisthesis at the involved level, confirmed by radiographic study
- No contraindications
- Failure of conservative therapy after at least 6 months

Along with the above documentation, include a:

- **Letter of medical necessity**
(sample at www.synthesprodisc.com)

When the information is gathered into a package, call the payor for **prior authorization**. Remember that this is an unfamiliar benefit for most payors; you need to educate them and walk them through the process.

**Help is available at the Patient Assistance Line (PAL):
800-895-7764
and online at the ProDisc website:
www.synthesprodisc.com**

2. Procedure Codes

The ICD-9-CM code for lumbosacral disc arthroplasty is:

84.65 Insertion of total spinal disc prosthesis,
 lumbosacral

MS-DRGs

As of October 2007, Medicare has changed the DRGs to MS-DRGs. This procedure maps to MS-DRG 490.

The descriptor is:

Back and neck procedures except spinal fusion with CC/MCC or disc device/neurostim.

The previous DRGs for this procedure were/are 499 and 500. There could also be procedures that mapped to 531 and 532.

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Disc arthroplasty should be preauthorized by the provider.

3. Payment

278 Revenue Code

- Disc arthroplasty is considered new technology
- Documentation of the work involved and the supplies used will be required to support payment for disc arthroplasty
- You should explain the procedure for the payor to ensure adequate payment to you

**Documentation templates for ProDisc are available online, and may be downloaded at any time (24/7) from the website:
www.synthesprodisc.com**

**Or contact the Patient Assistance Line (PAL):
800-895-7764**

PAL personnel are available 9 am–8 pm (ET), Mon–Fri. These professionals can share their experiences with you and help you to prepare a clean claim.

- 1. Documentation**
- 2. Documentation**
- 3. Documentation**

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- Disc Arthroplasty is a new therapy for DDD**
 - Third-party payors need education on the therapy and evidence of medical necessity**
 - You need to help the payor through the payment process**

Disclaimer

All billing and coding information contained herein is for informational purposes only. Synthes Spine makes no claims of correctness, warranty, guarantee or assertion that the information will assure payment. We strongly urge you to consult the payor to determine the requirements for reimbursement for disc arthroplasty.



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