

# Women's Pelvic Health 2021 Reimbursement Reference Guide

All payments shown in this reimbursement reference guide are 2021 Medicare national averages; actual rates can vary by geography and/or by facility. The codes in this guide are thought to be relevant to sling procedures for female stress urinary incontinence and sacrocolpopexy procedures. We recommend consulting with your payers and reimbursement specialists on appropriate coding options.

### Medicare Payments - Physician, Hospital Outpatient, and ASC

CPT Code	Description	Physician In-Facility	Hospital Outpatient	Ambulatory Surgery Center
Sling Procedure for Female Stress Urinary Incontinence				
57288	Sling operation for stress incontinence	\$760	\$4,410	\$2,533
57287	Removal or revision of sling for SUI	\$755	\$2,623	\$1,305
Sacrocolpopexy				
57280	Colpopexy, abdominal approach	\$992	N/A	N/A
57425	Laparoscopy, surgical, colpopexy	\$1,000	\$8,908	\$3,813

N/A: Medicare does not reimburse this procedure in this setting.

#### **Medicare C Codes - Hospital Outpatient**

C codes are used to track device cost information for future APC rate setting purposes. No additional payment will be provided to the facility. The C code should be added to the hospital's charge master to report device costs.

C Code	Description
Sling Procedure for Female Stress Urinary Incontinence	
C1771	Repair device, urinary, incontinence, with sling graft
Sacrocolpopexy	
C1763	Connective tissue, non-human (includes synthetic)

#### **Medicare Payments - Hospital Inpatient**

Possible MS-DRG Code	Description	Hospital Inpatient
662	Minor bladder procedures with major complication or comorbidity (MCC)	\$18,831
663	Minor bladder procedures with complication or comorbidity (CC)	\$10,251
664	Minor bladder procedures without CC/MCC	\$7,611
748	Female reproductive system reconstructive procedures	\$8,666

## **ICD-10 CM Diagnosis Codes**

ICD-10 CM Diagnosis Code	Description	
Sling Procedure for Female Stress Urinary Incontinence		
N36.41	Hypermobility of urethra	
N36.42	Intrinsic sphincter deficiency (ISD)	
N36.43	Combined hypermobility of urethra and intrinsic sphincter deficiency	
N39.3	Stress incontinence, female	
Sacrocolpopexy		
N81.0	Urethrocele	
N81.10	Cystocele, unspecified	
N81.11	Cystocele, midline	
N81.12	Cystocele, lateral	
N81.2	Incomplete uterovaginal prolapse	
N81.3	Complete uterovaginal prolapse	
N81.4	Uterovaginal prolapse, unspecified	
N81.5	Vaginal enterocele	
N81.6	Rectocele	
N81.82	Incompetence or weakening of pubocervical tissue	
N81.83	Incompetence or weakening of rectovaginal tissue	
N81.84	Pelvic tissue wasting	
N81.89	Other female genital prolapse	
N81.9	Female genital prolapse, unspecified	
N99.3	Prolapse of vaginal vault after hysterectomy	

## **ICD-10 PCS Procedure Codes**

ICD-10 CM Procedure Code	Description		
Sling Procedure	Sling Procedure for Female Stress Urinary Incontinence		
0TQD0ZZ	Repair urethra, open approach		
0TQD4ZZ	Repair urethra, percutaneous endoscopic approach		
OTSC0ZZ	Reposition bladder neck, open approach		
OTSC4ZZ	Reposition bladder neck, percutaneous endoscopic approach		
0TUC07Z	Supplement bladder neck with autologous tissue substitute, open approach		
OTUC0KZ	Supplement bladder neck with nonautologous tissue substitute, open approach		
OTUC47Z	Supplement bladder neck with autologous tissue substitute, percutaneous endoscopic approach		
0TUC4KZ	Supplement bladder neck with nonautologous tissue substitute, percutaneous endoscopic approach		
0TPD07Z	Removal of autologous tissue substitute from urethra, open approach		
0TPD0JZ	Removal of synthetic substitute from urethra, open approach		
0TPD0KZ	Removal of nonautologous tissue substitute from urethra, open approach		
0TWD07Z	Revision of autologous tissue substitute in urethra, open approach		
0TWD0JZ	Revision of synthetic substitute in urethra, open approach		
0TWD0KZ	Revision of nonautologous tissue substitute in urethra, open approach		

## ICD-10 PCS Procedure Codes (continued)

ICD-10 CM Procedure Code	Description	
Sacrocolpopexy		
0JQC0ZZ	Repair pelvic region subcutaneous tissue and fascia, open approach	
0JUC07Z	Supplement of pelvic region subcutaneous tissue and fascia with autologous tissue substitute, open approach	
OJUCOJZ	Supplement of pelvic region subcutaneous tissue and fascia with synthetic substitute, open approach	
0JUC0KZ	Supplement of pelvic region subcutaneous tissue and fascia with nonautologous tissue substitute, open approach	
0UHH0YZ	Insertion of other device into vagina and cul-de-sac, open approach	
0UHH4YZ	Insertion of other device into vagina and cul-de-sac, percutaneous endoscopic approach	
0UPH07Z	Removal of autologous tissue substitute from vagina and cul-de-sac, open approach	
0UPH0JZ	Removal of synthetic substitute from vagina and cul-de-sac, open approach	
0UPH0KZ	Removal of nonautologous tissue substitute from vagina and cul-de-sac, open approach	
0UPH0YZ	Removal of other device from vagina and cul-de-sac, open approach	
0UPH4YZ	Removal of other device from vagina and cul-de-sac, percutaneous endoscopic approach	
0UQF0ZZ	Repair cul-de-sac, open approach	
0UQG0ZZ	Repair vagina, open approach	
0USF0ZZ	Reposition cul-de-sac, open approach	
0USG0ZZ	Reposition vagina, open approach	
0USG4ZZ	Reposition vagina, percutaneous endoscopic approach	
0UTF4ZZ	Resection of cul-de-sac, percutaneous endoscopic approach	
0UUF07Z	Supplement cul-de-sac with autologous tissue substitute, open approach	
0UUF0JZ	Supplement cul-de-sac with synthetic substitute, open approach	
0UUF0KZ	Supplement cul-de-sac with nonautologous tissue substitute, open approach	
0UUG07Z	Supplement vagina with autologous tissue substitute, open approach	
0UUG0JZ	Supplement vagina with synthetic substitute, open approach	
0UUG0KZ	Supplement vagina with nonautologous tissue substitute, open approach	
0UUG47Z	Supplement vagina with autologous tissue substitute, percutaneous endoscopic approach	
0UUG4JZ	Supplement vagina with synthetic substitute, percutaneous endoscopic approach	
0UUG4KZ	Supplement vagina with nonautologous tissue substitute, percutaneous endoscopic approach	
0UWH07Z	Revision of autologous tissue substitute in vagina and cul-de-sac, open approach	
0UWH0JZ	Revision of synthetic substitute in vagina and cul-de-sac, open approach	
0UWH0KZ	Revision of nonautologous tissue substitute in vagina and cul-de-sac, open approach	

**IMPORTANT**: Reimbursement information provided by Caldera Medical is presented for illustrative purposes only and may include codes for procedures for which Caldera Medical currently offers no cleared or approved products. This information does not constitute reimbursement or legal advice, and Caldera Medical makes no representation or warranty regarding this information or its completeness, accuracy, or timeliness. Laws, regulations, and payer policies concerning reimbursement are complex and change frequently, and service providers are responsible for all decisions relating to coding and reimbursement submissions. Accordingly, Caldera Medical strongly recommends that you consult with your payers, reimbursement specialists and/or legal counsel regarding coding, coverage, and reimbursement matters.

Desara® Sling System for Female Stress Urinary Incontinence – CAUTION: Federal Law restricts use of this device to physicians trained in performing midurethral sling procedures for treating stress urinary incontinence. Please refer to product labeling for Indications, Contraindications, Warnings, Precautions, Adverse Reactions, Instructions for Use, etc. prior to using this product.

Vertessa® Lite Polypropylene Mesh for Sacrocolpopexy – CAUTION: Federal Law restricts this device to physicians trained in implanting synthetic mesh to treat pelvic organ prolapse. Please refer to product labeling for use for Indications, Contraindications, Warnings, Precautions, Adverse Reactions, Instructions for Use, etc. prior to using this product.

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www.calderamedical.com/medical-professionals/reimbursement-information/



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