



## 2018 Medicare Rates – Physician Office Setting

### Apligraf, Dermagraft, Affinity, NuShield, PuraPly and PuraPly AM

	Product Payment:	First 25 sq. cm	Additional 25 sq. cm	First 100 sq. cm	Additional 100 sq. cm
		CPT 15271/ 15275	CPT 15272/ 15276	CPT 15273/ 15277	CPT 15274/ 15278
<b>Physician Office Payment</b>	See Product Listing Below	\$143.33-\$152.89	\$27.65- \$35.37	\$302.38-\$331.53	\$71.08-\$85.25

- **15271** (Application of skin substitute graft to trunk, arms, legs, total wound surface area up to 100 sq. cm; first 25 sq. cm or less of wound surface area)
- **15272** (each additional 25 sq. cm wound surface area, or part thereof) (List separately in addition to code for primary procedure)
- **15273** (Application of skin substitute graft to trunk, arms, legs, total wound surface greater than or equal to 100 sq. cm; first 100 sq. cm wound surface area, or 1% of body area of infants and children)
- **15274** (each additional 100 sq. cm wound surface area, or part thereof, or each additional 1% of body area of infants and children, or part thereof) (List separately in addition to code for primary procedure)
  
- **15275** (Application of skin substitute graft to face, scalp, feet, etc., total wound surface area up to 100 sq. cm; first 25 sq. cm or less )
- **15276** (each additional 25 sq. cm wound surface area, or part thereof) (List separately in addition to code for primary procedure)
- **15277** (Application of skin substitute graft to face, scalp, feet, etc., total wound surface area greater than or equal to 100 sq. cm; first 100 sq. cm wound surface area, or 1% of body area of infants and children)
- **15278** (each additional 100 sq. cm wound surface area, or part thereof, or each additional 1% of body area of infants and children) (List separately in addition to code for primary procedure)

<u>Product</u>	<u>HCPCS Code</u>	<u>Physician Office Reimbursement Rates</u>
Apligraf	Q4101	\$30.894 per sq. cm
Dermagraft	Q4016	\$33.11 per sq. cm
Affinity	Q4159	Reimbursement is estimated at invoice cost.
NuShield	Q4160	Reimbursement is estimated at invoice cost.
PuraPly/PuraPly AM	Q4172	Reimbursement is estimated at invoice cost.

The payments specified in this document are national unadjusted averages that do not include the 2% sequestration. All codes provided herein are for information purposes only and shall not be construed as a statement, promise or guarantee that these codes are accurate or reimbursement will be received. Coding practice will vary by site of care, patient condition, range of services provided, local Carrier and Fiscal Intermediary instructions, and other factors. Coding requirements are subject to change at any time, therefore check with your local payer regularly. REV 01/2018

