

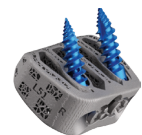
aprevo® lumbar

What Hospitals Need to Know:

1. Cases using the aprevo® Custom-Made Anatomically and Virtually Designed Interbody Fusion Devices will be assigned to MS-DRGs based on ICD-10-PCS and ICD-10-CM codes
2. Update charge masters to appropriately account for the higher acquisition costs of aprevo® compared to stock devices
3. Commercial payer reimbursement varies by contract

To Support Claims Processing, the Surgeon's Operative Notes May Indicate the Following:

1. The use of aprevo® Custom-Made Anatomically and Virtually Designed Interbody Fusion Devices
2. All applicable primary and secondary diagnoses
3. All procedures performed



aprevo® Anterior
ALIF-X



aprevo® Anterior
ALIF



aprevo® Lateral
LLIF



aprevo® Transforaminal
TLIF-O



aprevo® Transforaminal
TLIF-C | TLIF-C Articulating

ICD-10-PCS Codes for Anterior Column Fusions Using Custom-Made Anatomically and Virtually Designed Interbody Fusion Devices, **EFFECTIVE OCTOBER 1, 2026:**

ICD-10-PCS CODE	FUSION LOCATION AND QUANTITY	ANATOMICAL APPROACH	SURGICAL OPENING AND VISUALIZATION
0SG00E0	1 Lumbar Vertebral Joint	Anterior Approach	Open Approach
0SG00EJ	1 Lumbar Vertebral Joint	Posterior Approach	Open Approach
0SG03E0	1 Lumbar Vertebral Joint	Anterior Approach	Percutaneous Approach
0SG03EJ	1 Lumbar Vertebral Joint	Posterior Approach	Percutaneous Approach
0SG04E0	1 Lumbar Vertebral Joint	Anterior Approach	Percutaneous Endoscopic Approach
0SG04EJ	1 Lumbar Vertebral Joint	Posterior Approach	Percutaneous Endoscopic Approach
0SG10E0	2 or more Lumbar Vertebral Joints	Anterior Approach	Open Approach
0SG10EJ	2 or more Lumbar Vertebral Joints	Posterior Approach	Open Approach
0SG13E0	2 or more Lumbar Vertebral Joints	Anterior Approach	Percutaneous Approach
0SG13EJ	2 or more Lumbar Vertebral Joints	Posterior Approach	Percutaneous Approach
0SG14E0	2 or more Lumbar Vertebral Joints	Anterior Approach	Percutaneous Endoscopic Approach
0SG14EJ	2 or more Lumbar Vertebral Joints	Posterior Approach	Percutaneous Endoscopic Approach
0SG30E0	Lumbosacral Joint	Anterior Approach	Open Approach
0SG30EJ	Lumbosacral Joint	Posterior Approach	Open Approach
0SG33E0	Lumbosacral Joint	Anterior Approach	Percutaneous Approach
0SG33EJ	Lumbosacral Joint	Posterior Approach	Percutaneous Approach
0SG34E0	Lumbosacral Joint	Anterior Approach	Percutaneous Endoscopic Approach
0SG34EJ	Lumbosacral Joint	Posterior Approach	Percutaneous Endoscopic Approach



Hospital Coding Tips:

- **Specific ICD-10-PCS codes have been created** to describe the procedures using the aprevo® Custom-Made Anatomically and Virtually Designed Interbody Fusion Device. See CMS's ICD-10-CM/PCS MS-DRG v44.0 Definitions Manual for mappings of ICD-10 codes¹ to the new MS-DRGs²
- **Hospitals have the ability to set charges for items properly so that charges converted to costs can appropriately account fully for their acquisition and overhead costs³**
- The Centers for Medicare & Medicaid Services (CMS) has stated **there is nothing that precludes hospitals from setting their charges consistent with their CCRs⁴**
- Hospitals may consider the cost of the aprevo® Custom-Made Anatomically and Virtually Designed Interbody Fusion Devices to their facility **when setting charges for the procedures that use aprevo® devices**

1. <https://www.cms.gov/medicare/coding-billing/icd-10-codes>

2. [CMS, ICD-10-CM/PCS MS-DRG v44.0 Definitions Manual.](#)

3. [70 FR 68654.](#)

4. [86 FR 44953.](#)

5. [91 FR 49608.](#)

Abbreviations:

MS-DRG = Medicare Severity Diagnosis Related Group

ICD-10-PCS = International Classification of Diseases, Tenth Revision, Procedure Coding System

Inpatient Fusion Procedures Using aprevo® Lumbar Devices Are Assigned to the Following MS-DRGs, **EFFECTIVE OCTOBER 1, 2026:**

CMS finalized the reassignment of cases reporting a spinal fusion procedure with use of aprevo® from MS-DRGs 402, 426, 427, 428, 447, 448, 450, 451, 456, 457, and 458 to new MS-DRGs 523, 524, and 525⁵

See applicable ICD-10-PCS codes on reverse side

MS-DRG CODE	DESCRIPTION
MS-DRG 523	Extensive or Complex Spinal Fusion Procedures Except Cervical with MCC
MS-DRG 524	Extensive or Complex Spinal Fusion Procedures Except Cervical with CC
MS-DRG 525	Extensive or Complex Spinal Fusion Procedures Except Cervical without CC/MCC

For Coding Questions, Contact the aprevo® Coding Hotline

866-aprevo1 (866-277-3861) | aprevocoding@jdlaccess.com

Disclaimer - It is the responsibility of the provider to determine and report appropriate codes, modifiers, and charges for healthcare services rendered to patients in their care. This document is made available to U.S. customers and prospective customers of Carlsmed, Inc. for informational purposes only. Similarly, all codes are referenced herein for informational purposes only and represent no statement, promise or guarantee by Carlsmed® that these code selections are appropriate for any given prospective service, or that reimbursement will be made to the provider reporting these services. Carlsmed® strongly recommends consulting your respective contracted payor organizations regarding its coding and coverage medical policies.

