

Q4 2020 Medicare Rates-Physician Office Setting

Apligraf, Dermagraft, Affinity, NuShield, PuraPly/PuraPly AM/PuraPly XT

	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
Physician Office Payment	See Product Listing Below	\$154.82- \$161.68	\$35.00-\$27.07	\$322.28-\$355.32	\$81.56-\$94.36

- 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)

Product	HCPCS Code	Physician Office Reimbursement Rates
Apligraf	Q4101	\$30.458 per sq. cm 44 sq cm= \$1,340.15
Dermagraft	Q4106	\$32.007 sq. cm 38 sq cm=\$1,216.26
Affinity	Q4159	Estimated invoice cost
NuShield	Q4160	\$100.110 per sq. cm
PuraPly	Q4195	\$105.940 per sq. cm
PuraPly AM	Q4196	\$111.585 per sq. cm
PuraPly XT	Q4197	Estimated 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 10/2020