

Symphony TM

Physician's Office

| Stock no. | Product Size | Area | Billing Units | HCPCS Code | Description | Physician Office Reimbursement |
|------------|--------------|--------------------|------------------|---------------|---------------------|-----------------------------------|
| CM03HA002D | 16 mm disc | 2 cm ² | 2 | A2009 | Symphony, per sq cm | Determined by MAC Carrier |
| CM03HA004S | 2 x 2 cm | 4 cm ² | 4 | A2009 | Symphony, per sq cm | Determined by MAC Carrier |
| CM03HA006R | 2 x 3 cm | 6cm² | 6 | A2009 | Symphony, per sq cm | Determined by MAC Carrier |
| CM03HA012R | 4 x 3 cm | 12cm ² | 12 | A2009 | Symphony, per sq cm | Determined by MAC Carrier |
| CM03HA016S | 4 x 4 cm | 16cm² | 16 | A2009 | Symphony, per sq cm | Determined by MAC Carrier |
| CM03HA025S | 5 x 5 cm | 25 cm ² | 25 | A2009 | Symphony, per sq cm | Determined by MAC Carrier |
| CM03HA050R | 10 x 5 cm | 50cm ² | 50 | A2009 | Symphony, per sq cm | Determined by MAC Carrier |

HCPCS codes not listed on the Medicare Part B ASP file are priced individually by Medicare Administrative Contractor (MAC). Contractors may use Wholesale Acquisition Cost* (WAC) +3% or 6%, or the invoice cost.

Modifier JC: Skin substitute used as a graft

Modifier JW: Drug amount discarded/ not administered to any patient **Modifier KX:** Requirements in the medical policy have been met

Disclaimer: The information provided in this guide is offered as general information only and should not be construed as providing clinical advice, dictating reimbursement policy or substituting for the judgment of a healthcare provider. While Aroa Biosurgery Limited has taken reasonable efforts to provide accurate information regarding Medicare payment rates specified for items and services related to its products, it shall not be liable for the accuracy or completeness of the information in this guide. Aroa Biosurgery Limited provides this guide as a frame of reference for providers only and does not assume any responsibility for coding decisions, nor does it recommend codes for specific patient procedures. Nothing in this guide guarantees coverage by Medicare or other payers. Providers are always responsible for: (1) consulting with their payors, coding specialists, and/or legal counsel regarding any coverage, coding, or payment issues; (2) checking current reimbursement laws, regulations and payor policies; and (3) determining and submitting appropriate codes, charges and modifiers for goods and services it provides. This information is confirmed to be accurate as at 21 January 2025.





Site Preparation

| CPT Code | CPT Description | Medicare National Average Payment 2025 Non-Facility (Office) | Medicare National Average Payment 2025 Facility |
|----------|---|---|---|
| 15002 | Surgical preparation or creation of recipient site by excision of open wounds, burn eschar, or scar (including subcutaneous tissues), or incisional release of scar contracture, trunk, arms, legs; first 100 sq cm or 1% of body area of infants and children | \$331.23 | \$213.49 |
| +15003 | Each additional 100 sq cm, or part thereof, or each additional 1% of body area of infants and children (List separately in addition to code for primary procedure) | \$66.63 | \$43.02 |
| 15004 | Surgical preparation or creation of recipient site by excision of open wounds, burn eschar, or scar (including subcutaneous tissues), or incisional release of scar contracture, face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet and/or multiple digits; first 100 sq cm or 1% of body area of infants and children | \$380.07 | \$252.63 |
| +15005 | Each additional 100 sq cm, or part thereof, or each additional 1% of body area of infants and children (List separately in addition to code for primary procedure) | \$113.21 | \$86.69 |

Application of Skin Substitute Grafts

| CPT Code | CPT Description | Medicare National Average Payment 2025 Non-Facility (Office) | Medicare National Average Payment 2025 Facility |
|----------|---|---|---|
| 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 wound surface area | \$148.47 | \$81.51 |
| +15272 | Application of skin substitute graft to trunk, arms, legs, total wound surface area up to 100 sq. cm; each additional 25 sq. cm wound surface area, or part thereof (List separately in addition to code for primary) | \$23.61 | \$16.17 |
| 15273 | Application of skin substitute graft to trunk, arms, legs, 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 | \$295.00 | \$187.29 |
| +15274 | Application of skin substitute graft to trunk, arms, legs, total wound surface area greater than or equal to 100 sq. cm; 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) | \$76.98 | \$42.37 |
| 15275 | Application of skin substitute graft to face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits, total wound surface area up to 100 sq. cm; first 25 sq. cm or less wound surface area | \$153.97 | \$90.57 |
| +15276 | Application of skin substitute graft to face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits, total wound surface area up to 100 sq. cm; each additional 25 sq. cm wound surface area, or part thereof (List separately in addition to code for primary procedure) | \$31.70 | \$23.94 |
| 15277 | Application of skin substitute graft to face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits, 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 | \$329.93 | \$215.75 |
| +15278 | Application of skin substitute graft to face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits, total wound surface area greater than or equal to 100 sq. cm; 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.) | \$91.22 | \$54.02 |



For assistance with coding and reimbursement, please contact our AROA Reimbursement Support Team at:



1-800-807-2762 (1-800-807-AROA)



reimbursement@aroa.com



Fax: 1-877-775-3157