



Physicians
Office



2024

Symphony™

Physicians Office

Stock no.	Product Size	Area	Billing Units	HCPCS Code	Description	Physician Office Reimbursement
CM04HA0202	2.5 x 2.5 cm	6.25 cm ²	7	A2009	Symphony , per sq cm	Determined by MAC Carrier
CM04HA0505	5 x 5 cm	25 cm ²	25	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) plus a percentage, 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

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Site Preparation

CPT Code	Code Description	Medicare National Average Payment 2024 Non-Facility (Office)	Medicare National Average Payment 2024 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	\$337.27	\$213.82
+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)	\$68.11	\$43.88
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	\$385.07	\$252.46
+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)	\$113.95	\$87.10

Application of Skin Substitute Grafts

CPT Code	Code Description	Medicare National Average Payment 2024 Non-Facility (Office)	Medicare National Average Payment 2024 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	\$151.61	\$81.86
+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)	\$24.23	\$16.37
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	\$303.21	\$189.92
+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)	\$79.57	\$43.22
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	\$156.19	\$90.70
+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)	\$31.76	\$24.23
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	\$334.65	\$216.44
+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.)	\$92.99	\$54.03



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