

# SternaLock® Rigid Sternal Fixation Coding Reference Guide



## SternaLock Blu®

SternaLock Blu is indicated for stabilization and fixation of fractures of the anterior chest wall including sternal fixation following sternotomy or sternal reconstructive surgical procedures to aid in the alignment and stabilization of bone.

## SternaLock® 360 Sternal Closure System

SternaLock 360 Sternal Closure System is intended for use in the stabilization and fixation of fractures of the sternum including sternal fixation following sternotomy and sternal reconstructive surgical procedures, to promote fusion. The system is intended for use in patients with normal and/or poor bone quality.

Physician	
CPT® Code	CPT Description
21750	Closure of median sternotomy separation with or without debridement (separate procedure)

NOTE: This separate procedure by definition is usually a component of a more complex service and is not identified separately. When performed alone or with other unrelated procedures/services, it may be reported.

Hospital Inpatient	
ICD-10-PCS Code and Description	MS-DRG and Description*
ØPSØØØZ Reposition sternum with rigid plate internal fixation device, open approach	<p>ICD-10-PCS indicates this procedure does not affect MS-DRG assignment. The patient's diagnoses and procedures performed will determine MS-DRG assignment.</p> <p><b>Based on ICD-9-CM Procedure Code and MS-DRG assignment when this service is performed as a stand-alone procedure, potential MS-DRGs may include<sup>1</sup>:</b></p> <p>166 Other Respiratory System O.R. Procedures with MCC            167 Other Respiratory System O.R. Procedures with CC            168 Other Respiratory System O.R. Procedures without CC/MCC</p> <p>264 Other Circulatory System O.R. Procedures</p> <p>515 Other Musculoskeletal System and Connective Tissue O.R. Procedure with MCC            516 Other Musculoskeletal System and Connective Tissue O.R. Procedure with CC            517 Other Musculoskeletal System and Connective Tissue O.R. Procedure without CC/MCC</p>

CC – Complication and/or Comorbidity, MCC – Major Complication and/or Comorbidity  
 \*MS-DRG – Medicare Severity Diagnosis Related Group.  
<sup>1</sup>Other MS-DRGs may apply

Hospital Outpatient and Free-Standing Ambulatory Surgery Center (ASC)			
CPT Code	CPT Description	APC	ASC Payment Indicator
21750	Closure of median sternotomy separation with or without debridement (separate procedure)	NA <sup>2</sup>	NA <sup>3</sup>

APC – Ambulatory Payment Classification  
<sup>2</sup>Procedure is on Medicare's List of Inpatient Only Procedures.  
<sup>3</sup>This procedure is not on Medicare's List of ASC Covered Surgical Procedures.

## HCPCS (Healthcare Common Procedure Coding System)

HCPCS Code	HCPCS Description
C1713	Anchor/screw for opposing bone-to-bone or soft tissue-to-bone (implantable)

Note: C-codes report devices used in conjunction with outpatient procedures billed and paid for under Medicare's Outpatient Prospective Payment System (OPPS)

**For further assistance with reimbursement questions, contact the Zimmer Biomet Reimbursement Hotline at 866-946-0444 or [reimbursement@zimmerbiomet.com](mailto:reimbursement@zimmerbiomet.com), or visit our reimbursement website at [reimbursement.zimmerbiomet.com](http://reimbursement.zimmerbiomet.com).**

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