

April 16, 2025

Independent Review and Opinion Summary

Scott Martin, MD

Review Focus:

The following questions/scenarios were submitted to AAPC Services for review:

Confirmation that the codes below are active and BioDisc being an allogenic tissue-based product for homologous disc injection meets the code description.

0627T - Percutaneous injection of allogenic cellular and/or tissue-based product, intervertebral disc, unilateral or bilateral injection, with fluoroscopic guidance, lumbar; first level

0628T - Percutaneous injection of allogenic cellular and/or tissue-based product, intervertebral disc, unilateral or bilateral injection, with fluoroscopic guidance, lumbar; each additional level

0629T - Percutaneous injection of allogenic cellular and/or tissue-based product, intervertebral disc, unilateral or bilateral injection, with CT guidance, lumbar; first level

0630T - Percutaneous injection of allogenic cellular and/or tissue-based product, intervertebral disc, unilateral or bilateral injection, with CT guidance, lumbar; each additional level

Audit Services Opinion:

BioDisc meets the definition of allogenic tissue-based product for homologous injection per the CPT description. The above codes are the appropriate codes for reporting these BioDisc injections.

Category III codes do not have established RVUs or Fees in the Medicare Physician Fee Schedule, but rather carry Code Status "C" – Carriers price the code. Carriers will establish RVUs and payment amounts for these services, generally on an individual case basis following review of documentation.

MACs who have established RVUs have an assignment of 1.008 wRVU and 2.888 total RVU.

Name & Credentials of Reviewer:

Shirley A. Ledbetter, CPC, CPMA, CRC, CEMC

Resources:

www.biodisc.com

www.ama-assn.org/system/files/cpt-category3-codes-long-descriptors.pdf

<https://www.novitas-solutions.com/webcenter/portal/MedicareJH/FeeLookup>

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