



**2022 HCPCS Overview for Synthetic Skin Substitutes
Hospital Outpatient Department**

CMS Approved HCPCS Code	Description	Skin Sub Cost Category
C1849	Skin substitute, synthetic, resorbable per sq. cm	High Cost

“High” Cost Skin Substitutes Hospital Outpatient Clinic (HOPC)

CPT	Code Description	Status Indicator	APC 2022	2022 National Allowable ¹ Hospital Outpatient
15271	Application of skin substitute graft to trunk, arms, legs, total wound surface up to 100 sq cm: first 25 sq cm or less wound surface area – “High-cost”	T	5054	\$1,749.26
+15272	Each additional 25 sq cm wound surface area, or part thereof (Add on code: List separately in addition to code for primary procedure 15271) – “High-cost”	N	N/A	Packaged with 15271
15273	Application of skin substitute graft to trunk, arms, legs, total wound surface greater or equal to 100 sq cm: first 100 sq cm wound surface area, or 1% of body area of infants and children – “High-cost”	T	5055	\$3596.22
+15274	Each additional 100 sq cm wound surface area or part thereof, or each additional 1% of body area of infants or children, or part thereof (Add on code: List separately in addition to code for primary procedure 15273) – “High-cost”	N	N/A	Packaged with 15273
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 cm or less wound surface area – “High-cost”	T	5054	\$1,749.26
+15276	Each additional 25 sq cm wound surface area, or part thereof (Add on code: List separately in addition to code for primary procedure 17525) - “High-cost”	N	N/A	Packaged with 15275
15277	Application of skin substitute graft to face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits, total wound surface greater than 100 sq cm: first 100 sq cm wound surface area, or 1% of body area of infants or children – “High-cost”	T	5055	\$3596.22
+15278	Each additional 100 sq cm wound surface area or part thereof, or each additional 1% of body area of infants or children, or part thereof. (Add on code: List separately in addition to code for primary procedure 15277) – “High-cost”	N	N/A	Packaged with 15277

CMS Hospital Outpatient PPS, Addendum Updates: <https://www.cms.gov/Medicare/Medicare-Fee-for-ServicePayment/HospitalOutpatientPPS/Addendum-A-and-Addendum-B-Updates.html>



2022 HCPCS Overview for Synthetic Skin Substitutes
Ambulatory Surgical Center Setting

CMS Approved HCPCS Code	Description	Skin Sub Cost Category
C1849	Skin substitute, synthetic, resorbable per sq. cm	High Cost

“High” Cost Skin Substitutes for Ambulatory Surgery Center (ASC)

CPT	Code Description	Payment Indicator	2022 National Allowable ¹
15271	Application of skin substitute graft to trunk, arms, legs, total wound surface up to 100 sq cm: first 25 sq cm or less wound surface area – “High-cost”	G2	\$887.09
+15272	Each additional 25 sq cm wound surface area, or part thereof (Add on code: List separately in addition to code for primary procedure 15271) – “High-cost”	N1	Packaged with 15271
15273	Application of skin substitute graft to trunk, arms, legs, total wound surface greater or equal to 100 sq cm: first 100 sq cm wound surface area, or 1% of body area of infants and children – “High-cost”	G2	\$1823.73
+15274	Each additional 100 sq cm wound surface area or part thereof, or each additional 1% of body area of infants or children, or part thereof (Add on code: List separately in addition to code for primary procedure 15273) – “High-cost”	N1	Packaged with 15273
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 cm or less wound surface area – “High-cost”	G2	\$887.09
+15276	Each additional 25 sq cm wound surface area, or part thereof (Add on code: List separately in addition to code for primary procedure 17525) - “High-cost”	N1	Packaged with 15275
15277	Application of skin substitute graft to face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits, total wound surface greater than 100 sq cm: first 100 sq cm wound surface area, or 1% of body area of infants or children – “High-cost”	G2	\$1823.73
+15278	Each additional 100 sq cm wound surface area or part thereof, or each additional 1% of body area of infants or children, or part thereof. (Add on code: List separately in addition to code for primary procedure 15277) – “High-cost”	N1	Packaged with 15277

* Fees listed are the National Average and will be have a wage index adjustment based on geographic location.

For general information, product information, reimbursement & billing questions: info@renovoderm.tech or call (614) 602-1852.

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