

**Complexity Adjustments Resulting in Adjusted APC Assignment when Qualifying Combinations of Vertebral Augmentation, Vertebroplasty and/or Radiofrequency (RF) Bone Ablation Procedures Are Performed**

**Comprehensive Ambulatory Payment Classifications (C-APCs)**

(Calendar Year Jan 1, 2021 – Dec 31, 2021)

Beginning in Calendar Year (CY 2015), as proposed in the Calendar Year (CY) 2014 Outpatient Prospective Payment System (OPPS) Final Rule, CMS implemented comprehensive APCs (C-APCs) payment packaging policy. The C-APC payment policy packages payments for covered services, drugs, and supplies under a primary service (“J1” status indicator) when the primary service is reported on the claim. As discussed in the CY 2021 OPPS Final Rule, CMS continues to utilize C-APCs to provide a single all-inclusive payment for the primary service with no separate reimbursement for additional adjunctive services and supplies used during the delivery of the primary service. CMS groups procedures within C-APCs on the basis of clinical and resource utilization similarities. The table below displays the CY 2021 APC family for Musculoskeletal Procedures, a majority of which consist of “J1” primary services:

APC	Group Title	SI	Relative Weight	Payment Rate <sup>1</sup>
5111	Level 1 Musculoskeletal Procedures	T	2.4903	\$206.19
5112	Level 2 Musculoskeletal Procedures	J1	16.8164	\$1,392.35
5113	Level 3 Musculoskeletal Procedures	J1	34.1848	\$2,830.40
5114	Level 4 Musculoskeletal Procedures	J1	75.6664	\$6,264.95
5115	Level 5 Musculoskeletal Procedures	J1	148.7344	\$12,314.76
5116	Level 6 Musculoskeletal Procedures	J1	191.651	\$15,868.13

**Qualifying Complexity Adjustments**

As discussed in the CY 2021 Outpatient Prospective Payment System Final Rule, to provide increased payment for certain comprehensive services, CMS applies a complexity adjustment promoting qualifying “J1” service code combinations or code combinations of “J1” services and certain add-on codes to the next higher paying C-APC in the same clinical family of C-APCs. CMS implements the complexity adjustment when a qualifying code combination represents a complex, costly form of the primary service that also meets certain frequency and cost criteria thresholds.<sup>1</sup>

Under the CY2021 OPPS Final Rule, CMS has identified certain code combinations related to vertebral augmentation, vertebroplasty, and RF bone ablation that qualify for a complexity adjustment (Addendum J for CY2021: complexity adjustments of combinations of comprehensive HCPCS codes).<sup>2</sup>

Primary HCPCS Code	Primary Short Descriptor	Primary SI	Primary APC Assignment	Secondary J1 or Add-on HCPCS Code	Secondary Short Descriptor	Secondary SI	Secondary APC Assignment	Complexity Adjusted APC Assignment
20982	Ablate bone tumor(s) perq	J1	5114	22513	Perq vertebral augmentation	J1	5114	5115
20982	Ablate bone tumor(s) perq	J1	5114	22514	Perq vertebral augmentation	J1	5114	5115
22510	Perq cervicothoracic inject	J1	5113	22512	Vertebroplasty addl inject	N		5114
22511	Perq lumbosacral injection	J1	5113	22512	Vertebroplasty addl inject	N		5114
22513	Perq vertebral augmentation	J1	5114	22510	Perq cervicothoracic inject	J1	5113	5115
22513	Perq vertebral augmentation	J1	5114	22514	Perq vertebral augmentation	J1	5114	5115
22513	Perq vertebral augmentation	J1	5114	22515	Perq vertebral augmentation	N		5115
22514	Perq vertebral augmentation	J1	5114	22510	Perq cervicothoracic inject	J1	5113	5115
22514	Perq vertebral augmentation	J1	5114	22511	Perq lumbosacral injection	J1	5113	5115
22514	Perq vertebral augmentation	J1	5114	22515	Perq vertebral augmentation	N		5115
22514	Perq vertebral augmentation	J1	5114	63047	Remove spine lamina 1 Imbr	J1	5114	5115

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## CY 2021 Hospital Outpatient Musculoskeletal Procedures C-APCs and Complexity Adjustments

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1. CY 2021 Medicare Hospital Outpatient Prospective Payment System Final Rule; (Federal Register, Vol. 85, No. 249, CMS-1736-FC, 1736-IFC, 12/29/2020) OPPS Addendum A effective January 1, 2021.

2. CY 2021 Medicare Hospital Outpatient Prospective Payment System Final Rule; (Federal Register, Vol. 85, No. 249, CMS-1736-FC, 1736-IFC, 12/29/2020) OPPS Addendum J 11/30/2020, effective January 1, 2021.