

ICD-10-PCS Procedure Codes		
	CODE	DESCRIPTION
Lead Implantation or Replacement	00H00MZ	Insertion of Neurostimulator Lead into Brain, Open Approach
Generator Implantation or Replacement	ONH00NZ	Insertion of Neurostimulator Generator into Skull, Open Approach
Lead Removal	00P00MZ	Removal of Neurostimulator Lead from Brain, Open Approach
Generator Removal	ONP00NZ	Removal of Neurostimulator Generator from Skull, Open Approach

MS-DRG Assignments				
	ICD-10 CODE(S)	MS-DRG	MS-DRG TITLE	MEDICARE RELATIVE WEIGHT
Implantation of Leads and Generator	00H00MZ AND ONH00NZ	023	Craniotomy with Major Device Implant or Acute Complex CNS Principal Diagnosis with MCC or Chemo Implant	5.3762
		024	Craniotomy with Major Device Implant or Acute Complex CNS Principal Diagnosis without MCC	4.0114
Replacement of Generator Only or Removal of Generator Only	ONH00NZ OR ONP00NZ	040	Peripheral/Cranial Nerve & Other Nervous System Procedures with MCC	3.7117
		041	Peripheral/Cranial Nerve & Other Nervous System Procedures with CC or Peripheral Neurostimulator	2.1218
		042	Peripheral/Cranial Nerve & Other Nervous System Procedures without CC/MCC	1.8984
Removal of Leads and Generator	00P00MZ AND ONP00NZ	025	Craniotomy and Endovascular Intracranial Procedures with MCC	4.2413
		026	Craniotomy and Endovascular Intracranial Procedures with CC	2.9723
		027	Craniotomy and Endovascular Intracranial Procedures without CC/MCC	2.3761

ICD-10-CM Diagnosis Codes	
CODE	DESCRIPTION
G40.011	Localization-related (focal) (partial) idiopathic epilepsy and epileptic syndromes with seizures of localized onset, intractable, with status epilepticus
G40.019	Localization-related (focal) (partial) idiopathic epilepsy and epileptic syndromes with seizures of localized onset, intractable, without status epilepticus
G40.111	Localization-related (focal) (partial) symptomatic epilepsy and epileptic syndromes with simple partial seizures, intractable, with status epilepticus
G40.119	Localization-related (focal) (partial) symptomatic epilepsy and epileptic syndromes with simple partial seizures, intractable, without status epilepticus
G40.211	Localization-related (focal) (partial) symptomatic epilepsy and epileptic syndromes with complex partial seizures, intractable, with status epilepticus
G40.219	Localization-related (focal) (partial) symptomatic epilepsy and epileptic syndromes with complex partial seizures, intractable, without status epilepticus

Important Notes

Correct coding is important for receiving appropriate reimbursement and for setting future reimbursement rates for MS-DRGs.

About NeuroPace and the RNS® System

NeuroPace was founded to design, develop, manufacture and market implantable devices for the treatment of neurological disorders by responsive brain stimulation. The company's first product is the RNS® System, a cranially implanted responsive neurostimulator for the treatment of medically intractable partial onset seizures in adults with epilepsy. NeuroPace received approval from the U.S. Food and Drug Administration (FDA) for the RNS® System in November 2013.

FDA Indication for Use

The RNS® System is an adjunctive therapy in reducing the frequency of seizures in individuals 18 years of age or older with partial onset seizures who have undergone diagnostic testing that localized no more than 2 epileptogenic foci, are refractory to two or more antiepileptic medications, and currently have frequent and disabling seizures (motor partial seizures, complex partial seizures and/or secondarily generalized seizures). The RNS® System has demonstrated safety and effectiveness in patients who average 3 or more disabling seizures per month over the three most recent months (with no month with fewer than two seizures), and has not been evaluated in patients with less frequent seizures.



See labeling for prescribing information, including indications, contraindications, warnings, precautions and adverse events.

This document has been prepared for providers using the RNS® System, and is intended for informational purposes only. NeuroPace does not promise or guarantee coverage or any level of payment by any third party payer. While NeuroPace believes this information to be correct, it is subject to change at any time. As with all reimbursement claims, providers are solely responsible for determining the appropriate codes, modifiers and charges for services provided. NeuroPace recommends that you contact your local payer with questions regarding coding and payment guidelines.

The FY17 Medicare MS-DRGs and relative weights can be found in the Federal Register, Volume 81, Number 162, August 22, 2016.