

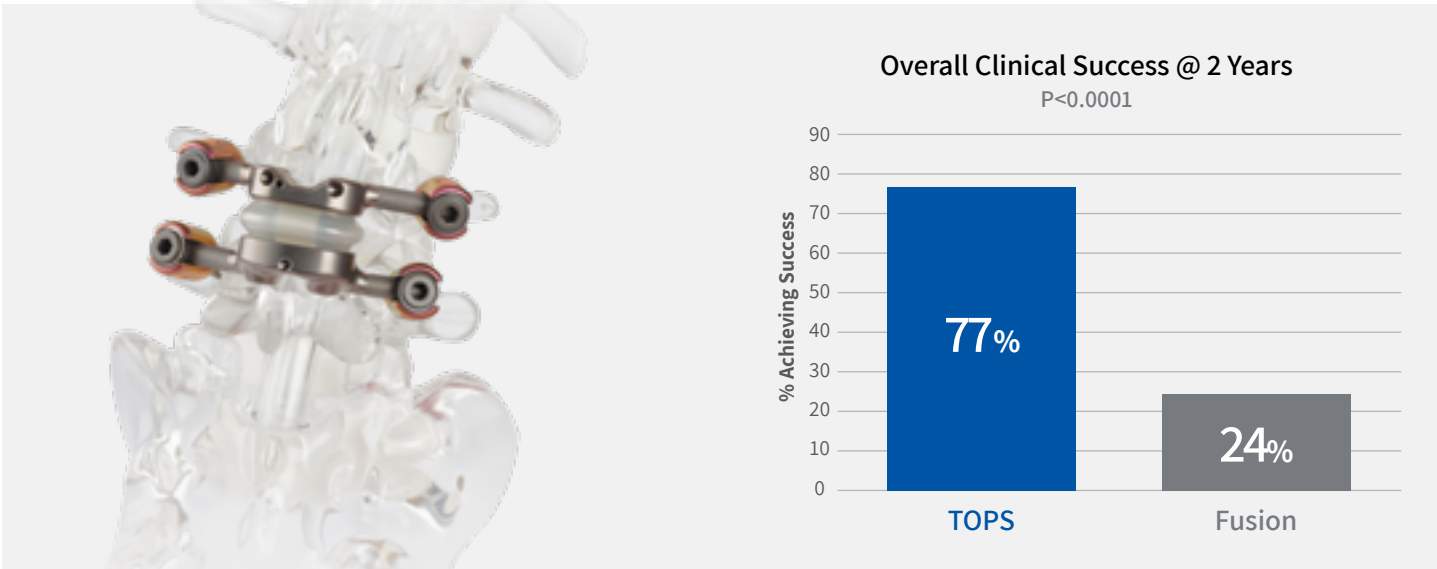
Facet Replacement

The New Motion Treatment Paradigm for Spinal Stenosis and Spondylolisthesis Patients

TOPS™ System

The TOPS™ System is an artificial facet joint treating spondylolisthesis and spinal stenosis. TOPS stabilizes the segment after decompression and reproduces normal motion. TOPS demonstrates several advantages over fusion in leg/back pain, function, patient recovery and reoperation.

The FDA has labelled TOPS as superior to fusion in overall clinical benefit.



“The TOPS group demonstrated a clinically meaningful and substantial advantage over the Fusion control group, with 77% of subjects randomized to the TOPs group achieving composite clinical success, compared to 24% of subjects randomized to the fusion control. Based on these results, the TOPS System was deemed to be superior to the Fusion control with respect to composite clinical success while maintaining equivalent safety.”

The Food & Drug Administration, June 15, 2023

FDA trial details

Facility Payment

New Technology Add-On Payment (NTAP) Approved

The TOPS™ System was awarded the prestigious New Technology Add-on Payment (NTAP) by the Centers for Medicare & Medicaid Services (CMS). This is only the 3rd time that CMS has granted an NTAP to a spinal implant. Beginning October 1, 2023, and through September 30, 2026, qualifying TOPS procedures are **eligible for up to \$11,375 in additional reimbursement beyond the DRG.**

| ICD-10-PCS Code | Description | DRG Assignment |
|-----------------|-----------------------------------------------------------------------------------------------------------------------------|----------------|
| XRHB018 | Insertion of posterior spinal motion preservation device into lumbar vertebral joint, open approach, New Technology Group 8 | 518 |

US National Average Hospital Reimbursement

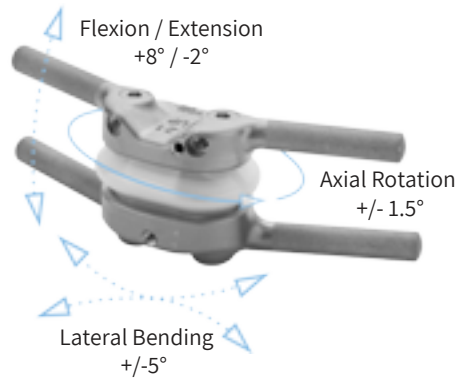
| Surgical Treatment | MS-DRG | FY 2025 Base Payment | Max. NTAP | Max. Total |
|--------------------|--------|----------------------|-----------|------------|
| Facet Arthroplasty | 518 | \$23,963 | \$11,375 | \$34,724 |
| Lumbar Fusion | 451 | \$20,768 | \$0 | \$20,768 |



Physician Payment

Recommended Primary CPT Procedure Code

| CPT Code | Description |
|----------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 0202T | Posterior vertebral joint(s) arthroplasty (eg, facet joint[s] replacement), including facetectomy, laminectomy, foraminotomy, and vertebral column fixation, injection of bone cement, when performed, including fluoroscopy, single level, lumbar spine |



Assigning Value to a Cat III Code

Providers are required to assign a value to all T-codes when submitting a reimbursement claim. The amount requested can be based on procedures that are similar in time, skill, and effort. For instance, providers can refer to several existing Category I codes in describing the work performed (e.g., 22214, 63047, 63012, 22840) when assigning value for the 0202T.

Further, ISASS published the results of an analysis of the TOPS procedure aimed at helping providers and payors determine an appropriate reimbursement amount.

The analysis concluded that the **bundled TLIF procedure is a comparable procedure to TOPS in terms of RVUs¹.**

1. Lorio, Morgan et al "Paired Comparison Survey Analysis Utilizing Rasch Methodology of the Relative Difficulty and Estimated Work Relative Value Units of CPT Code 0202T." International Journal of Spine Surgery (2024): 8587. Web. 03 Mar. 2025.

Link to article