



Spinal fusion MS-DRG changes for FY 2025

Medicare Severity Diagnosis Related Groups, or MS-DRGs, are used by Medicare to classify inpatient stays into clinically cohesive groups that demonstrate similar consumption of hospital resources and length-of-stay patterns. As part of the inpatient prospective payment system (IPPS), MS-DRGs have 3 major functions – calculate reimbursement, evaluate quality of care and evaluate utilization of services.

Each year, effective Oct. 1, new MS-DRGs are added and/or current MS-DRGs are deleted or revised for the next fiscal year. This reorganization is based on the review and analysis of historical data by the Centers for Medicare and Medicaid Services (CMS) to determine if patient cases categorized to certain MS-DRGs accurately reflect the resource utilization and cost of caring for those patients. For FY2025, CMS analyzed cases grouping to the following FY2024 MS-DRGs:

- 453–455 (Combined Anterior and Posterior Spinal Fusion)
- 456–458 (Spinal Fusion Except Cervical with Spinal Curvature, Malignancy, Infection, or Extensive Fusions)
- 459–460 (Spinal Fusion Except Cervical)

Fusion procedures treat degenerative, traumatic or congenital lesions, herniated discs, fractures that need stabilization and spinal dislocations that need stabilization. The root operation fusion is defined as “joining together portions of an articular body part rendering the articular body part immobile.” Spinal fusions permanently connect 2 or more vertebrae in the spine so that any movement between them is eliminated. In many spinal fusions, the process involves the use of grafting material with interbody fusion devices, implants, or spacers that help facilitate the patient’s own bone growth. The number of fusions is counted by the number of intervertebral joints, also called interspaces, fused – not the number of vertebrae involved. For example, a fusion that spans from T2 through T9 is considered 7 joint interspaces (8 vertebrae, but 7 joint spaces).

Initially, the review involved the analysis of spinal fusion cases that used the aprevo® customized interbody fusion device, only but was eventually expanded to include all spinal fusion cases within these DRGs. One of the primary goals in this expanded analysis was to determine the impact multiple-level versus single-level fusions had on resource utilization. CMS developed 3 categories of spinal fusion procedures to help with this examination – single-level combined anterior and posterior fusions except cervical; multiple-level combined anterior and posterior fusions except cervical; and combined anterior and posterior cervical spinal fusions.

The CMS review of historical cases also investigated the necessity of dividing these categories into 3- or 2-way MS-DRG splits. The MS-DRG classification incorporates a tiered system in which MS-DRGs are often grouped into a family of 2 or more MS-DRGs. The same base patient characteristics are applied to all MS-DRGs in the family, with each individual MS-DRG in the family further differentiated by severity through the presence of a secondary diagnosis code that is a major complication or comorbidity (MCC), a complication or comorbidity (CC), or by the presence of a procedure code that can be used in place of the MCC or CC. Understanding the clinical impact a MCC or CC condition will have on resource utilization was another critical aspect CMS focused on during its spinal fusion case review.

CMS concluded that new MS-DRGs were needed to separately identify:

- Multilevel from single-level spinal fusions
- Spinal fusions requiring combined anterior and posterior fusion from those that are not combined
- Thoracic and lumbar region spinal fusions from cervical region spinal fusions

Along with its analysis of MCC and CC criteria to determine the efficacy of creating 3-tiered or 2-tiered families, CMS proposed and finalized the addition of 6 new spinal DRGs for FY2025, specific to combined anterior and posterior spinal fusions:

DRG 402	Single Level Combined Anterior and Posterior Spinal Fusion Except Cervical
DRG 426	Multiple Level Combined Anterior and Posterior Spinal Fusion Except Cervical with MCC or Custom-made Anatomically Designed Interbody Fusion Device
DRG 427	Multiple Level Combined Anterior and Posterior Spinal Fusion Except Cervical with CC
DRG 428	Multiple Level Combined Anterior and Posterior Spinal Fusion Except Cervical without CC/MCC
DRG 429	Combined Anterior and Posterior Cervical Spinal Fusion with MCC
DRG 430	Combined Anterior and Posterior Cervical Spinal Fusion without MCC CMS – also added 4 new MS-DRGs to capture spinal fusion cases that did not involve combined anterior and posterior fusions:
DRG 447	Multiple Level Spinal Fusion Except Cervical with MCC or Custom-made Anatomically Designed Interbody Fusion Device
DRG 448	Multiple Level Spinal Fusion Except Cervical without MCC
DRG 450	Single Level Spinal Fusion Except Cervical with MCC or Custom-made Anatomically Designed Interbody Fusion Device
DRG 451	Single Level Spinal Fusion Except Cervical without MCC

The 10 new MS-DRGs described above will replace the following MS-DRGs which were deleted effective Oct.1 2024:

453	Combined Anterior and Posterior Spinal Fusion with MCC
454	Combined Anterior and Posterior Spinal Fusion with CC
455	Combined Anterior and Posterior Spinal Fusion without CC/MCC
459	Spinal Fusion Except Cervical with MCC
460	Spinal Fusion Except Cervical without MCC

CMS also decided to maintain the following MS-DRGs:

456	Spinal Fusion Except Cervical with Spinal Curvature, Malignancy, Infection or Extensive Fusions with MCC
457	Spinal Fusion Except Cervical with Spinal Curvature, Malignancy, Infection or Extensive Fusions with CC
458	Spinal Fusion Except Cervical with Spinal Curvature, Malignancy, Infection or Extensive Fusions without CC/MCC
471	Cervical Spinal Fusion with MCC
472	Cervical Spinal Fusion with CC
473	Cervical Spinal Fusion without CC/MCC

*** Specialties:** All Specialties, Allergy/Immunology, Anesthesia, Behavioral Health, Cardiac Surgery, Cardiology, Cardiothoracic, Cardiovascular surgery, Chargemaster, Chiropractic, Clinical Social Worker, Clinical Trials, Colorectal Surgery, Critical Care, Dental, Dermatology, DME, Emergency Department, Emergency Medicine, Endocrinology, ENT, E/M, Family Practice, Gastroenterology, Gastrointestinal Surgery, General Practice, General Surgery, Genitourinary Surgery, Geriatric Medicine, Gynecology, Hand Surgery, Head and Neck Surgery, Hematology, Hepatology, Home Health, Hospice, Hospitalist, Infectious Disease, Infusions, Inpatient Rehab, Internal Medicine, Interventional Radiology, Laboratory, Long Term Care, Medical Device, Medical Toxicology, Minor Surgery, Musculoskeletal, Nephrology, Nervous System, Neurology, Neurosurgery, OB/GYN, Obstetrics, Occupational Therapy, Oncology, Ophthalmology, Oral Maxillofacial Surgery (OMS), Orthopedics, Orthopedic surgery, Otolaryngology, Pain Management, Part A, Part B, Pathology, Pediatric Medicine, Pharmacy, Physical Therapy, Plastic and Reconstructive Surgery, Podiatry, Primary Care, Psychiatry, Psychologist, Pulmonary, Radiation Oncology, Radiology, Rehabilitation Medicine, Respiratory, Rheumatology, Social Work, Skilled Nursing, Speech Language Pathology, Sports Medicine, Surgical Oncology, Surgical Specialties, Transplant Cardiology, Transplants, Thoracic Surgery, Trauma, Urology, Wound Care, Vascular Surgery.



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