



Coding Surgical Scenarios

presented by
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Disclaimer

Harry Goldsmith, DPM is solely responsible for the content and delivery of this presentation so don't complain to or blame the APMA for any demonstrated insensitivity, poor judgment, unfunny jokes, puns that aren't punny, or a general lack of good taste. Blame Jeff.

Also, regarding the APMA Coding Resource Center... I have no apologies for promoting it...it's the best thing out there.



Hallux Rigidus

Hallux Rigidus: CPT

- 28289** Hallux rigidus correction with cheilectomy, debridement and capsular release of the first metatarsophalangeal joint; without implant
- 28291** Hallux rigidus correction with cheilectomy, debridement and capsular release of the first metatarsophalangeal joint; with implant
- 28750** Arthrodesis, great toe; metatarsophalangeal joint

Hallux Rigidus: ICD-10

ICD-10-CM	Library	ICD-9-CM	Favorites	Crosswalk	Codingline
<p>A B C D E F G H I J K L M N O P Q R S T U V W X Y Z</p>					
<p>Hallux</p> <ul style="list-style-type: none"> deformity (acquired) NEC M20.5X- limitus M20.5X- malleus (acquired) NEC M20.3- rigidus (acquired) M20.2- <ul style="list-style-type: none"> congenital Q74.2 sequelae (late effect) of rickets E64.3 valgus (acquired) M20.1- <ul style="list-style-type: none"> congenital Q66.6 varus (acquired) M20.3- <ul style="list-style-type: none"> congenital Q66.3 					

Hallux Rigidus: ICD-10

ICD-10-CM	Library	ICD-9-CM	Favorites	Crosswalk	Codingline
<p>A B C D E F G H I J K L M N O P Q R S T U V W X Y Z</p>					
<p>Hallux</p> <ul style="list-style-type: none"> limitus M20.5X- rigidus (acquired) M20.2- <ul style="list-style-type: none"> congenital Q74.2 sequelae (late effect) of rickets E64.3 					

Hallux Rigidus: ICD-10

ICD-10-CM Library ICD-9-CM Favorites Crosswalk **Codingline**

A B C D E F G **H** I J K L M N O P Q R S T U V W X Y Z

Hallux

- limitus M20.5X-
- rigidus (acquired) M20.2-

Hallux Rigidus: ICD-10

Hallux Limitus

M20.5X Other deformities of toe(s) (acquired)

M20.5X1 Other deformities of toe(s) (acquired), right foot

M20.5X2 Other deformities of toe(s) (acquired), left foot

M20.5X9 Other deformities of toe(s) (acquired), unspecified foot

Hallux Rigidus

M20.20 Hallux rigidus, unspecified foot

M20.21 Hallux rigidus, right foot

M20.22 Hallux rigidus, left foot



Neoplasm: Uncertain Behavior vs Unspecified

Neoplasm: Uncertain Behavior vs Unspecified

D48.5 Neoplasm of uncertain behavior of skin

D49.2 Neoplasm of unspecified behavior of bone, soft tissue, and skin

Neoplasm: Uncertain Behavior vs Unspecified

D48.5 Neoplasm of uncertain behavior of skin

Uncertain behavior is a diagnosis that is rendered by the pathologist when the cellular activity observed is uncertain as to its morphology

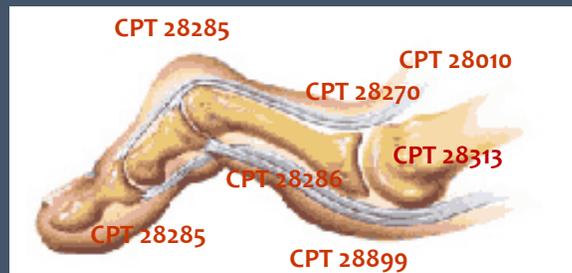
Neoplasm: Uncertain Behavior vs Unspecified

D49.2 Neoplasm of unspecified behavior of bone, soft tissue, and skin

Unspecified behavior is sometimes called a working diagnosis, and is used when a preliminary diagnostic workup is inconclusive, most commonly used when the decision comes back as a tumor.

Hammertoe Correction

Hammertoe Coding Options



CPT 28313

Reconstruction, angular deformity of toe, soft tissue procedures only (eg, overlapping second toe, fifth toe, curly toes)

- No bone of contention 5th digit correction
- Hallux varus
- Abducted or adducted digit at MTPJ

Hammertoe Dislocation (at the MPJ)

I have a patient with a hammertoe which she says has been present for years. Can I bill the MTPJ release as an open treatment of dislocation?

No.



Fracture Coding

Fracture Coding

When treating fractures, what are the rules governing the use of the fracture management codes? Can't I just bill E/M codes, and bill for x-rays, cast application, supplies, etc.?

Fracture Coding

The correct way to code fracture treatment is with the use of the appropriate global fracture code

Instructions for Use of the CPT Codebook

Select the name of the procedure or service that accurately identifies the service performed. Do not select a CPT code that merely approximates the service provided. If no such specific code exists, then report the service using the appropriate unlisted procedure or service code. In surgery, it may be an operation; in medicine, a diagnostic or therapeutic procedure; in radiology, a radiograph.

Multiple Fracture Coding

How would I code the closed reduction of 2 adjacent metatarsal fractures?

CPT 28470



Hallux Varus Coding

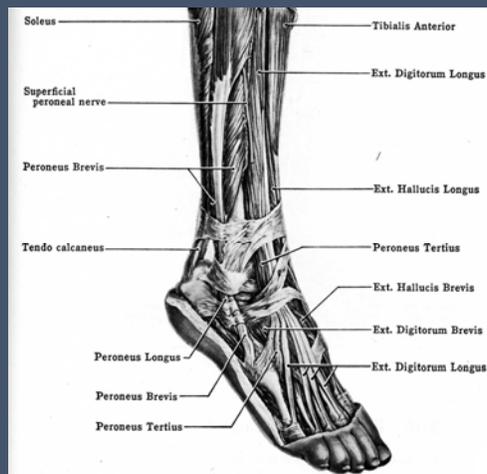
Hallux Varus Coding

You bill what you did...sort of:

- Metatarsal osteotomy? **CPT 28306**
- Soft tissue release only? **CPT 28313**
(Reconstruction, angular deformity of toe, soft tissue procedures only)
or CPT 28270
- Phalangeal osteotomy? **CPT 28310**

Tendon Repair

Tendon Repair



Tendon Repair

Repair, Revision, and/or Reconstruction (27650-27745)

- ☆ **27650** Repair, primary, open or percutaneous, ruptured Achilles tendon.
GP: 090 | Assist: Y | NF RVU: | FAC RVU: 18.9 | Work RVU: 9.21 | Bilat: Y | CCI Edits | CPT to ICD9 | CPT to ICD10
- ☆ **27652** Repair, primary, open or percutaneous, ruptured Achilles tendon; with graft (includes obtaining graft)
GP: 090 | Assist: N | NF RVU: | FAC RVU: 19.67 | Work RVU: 10.78 | Bilat: Y | CCI Edits | CPT to ICD9 | CPT to ICD10
- ☆ **27654** Repair, secondary, Achilles tendon, with or without graft
GP: 090 | Assist: Y | NF RVU: | FAC RVU: 20.34 | Work RVU: 10.53 | Bilat: Y | CCI Edits | CPT to ICD9 | CPT to ICD10
- ☆ **27656** Repair, fascial defect of leg
GP: 090 | Assist: Y | NF RVU: 17.74 | FAC RVU: 11.2 | Work RVU: 4.71 | Bilat: Y | CCI Edits | CPT to ICD9 | CPT to ICD10
- ☆ **27658** Repair, flexor tendon, leg, primary, without graft, each tendon
GP: 090 | Assist: Y | NF RVU: | FAC RVU: 10.7 | Work RVU: 5.12 | CCI Edits | CPT to ICD9 | CPT to ICD10
- ☆ **27659** Repair, flexor tendon, leg, secondary, with or without graft, each tendon
GP: 090 | Assist: Y | NF RVU: | FAC RVU: 13.73 | Work RVU: 7.1 | CCI Edits | CPT to ICD9 | CPT to ICD10
- ☆ **27664** Repair, extensor tendon, leg, primary, without graft, each tendon
GP: 090 | Assist: Y | NF RVU: | FAC RVU: 10.4 | Work RVU: 4.73 | CCI Edits | CPT to ICD9 | CPT to ICD10
- ☆ **27665** Repair, extensor tendon, leg, secondary, with or without graft, each tendon
GP: 090 | Assist: Y | NF RVU: | FAC RVU: 11.78 | Work RVU: 5.57 | CCI Edits | CPT to ICD9 | CPT to ICD10

Definition: Primary vs. Secondary

“Would someone explain the difference between primary and secondary tendon repair as it pertains to coding (for example, a peroneal tendon repair that is not an acute injury)?”

Primary vs. Secondary

Primary repair: Any repair of an acute injury completed within the first 24 hours after the injury.

Delayed primary repair: A repair performed within 24 hours to two weeks of the injury.

Secondary repair: A repair performed after two weeks of injury.

Primary vs. Secondary

“Primary repairs usually involve direct surgical correction of the injury, while secondary repairs may include tendon grafts or other more complex procedures.”

Tendon Repair

Repair, Revision, and/or Reconstruction (27650-27745)

- ☆ **27650** Repair, primary, open or percutaneous, ruptured Achilles tendon;
GP: 090 | Assist: Y | NF RVU: | FAC RVU: 18.9 | Work RVU: 9.21 | Bilat: Y | CCI Edits | CPT to ICD9 | CPT to ICD10
- ☆ **27652** Repair, primary, open or percutaneous, ruptured Achilles tendon; with graft (includes obtaining graft)
GP: 090 | Assist: N | NF RVU: | FAC RVU: 19.67 | Work RVU: 10.78 | Bilat: Y | CCI Edits | CPT to ICD9 | CPT to ICD10
- ☆ **27654** Repair, secondary, Achilles tendon, with or without graft
GP: 090 | Assist: Y | NF RVU: | FAC RVU: 20.34 | Work RVU: 10.53 | Bilat: Y | CCI Edits | CPT to ICD9 | CPT to ICD10

Achilles Insertional Calcific Tendinosis

I have a patient with a spur and prominent “bump” of bone on the posterior superior aspect of the calcaneus as well as an intraAchilles tendon calcification at its insertion. The tendon was noted to have areas of degeneration. I resected the bony prominence, as well as split the Achilles to remove the bone within it. I repaired the Achilles and anchored it back down.

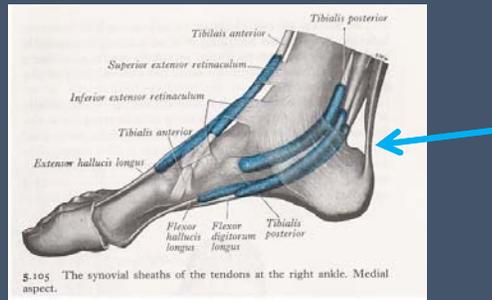
How do I bill this?

Achilles Insertional Calcific Tendinosis

- ☆ **28118** Ostectomy, calcaneus;
GP: 090 | Assist: Y | NF RVU: 17.08 | FAC RVU: 11.84 | Work RVU: 6.13 | Bilat: Y | CCI Edits | CPT to ICD9 | CPT to ICD10

- ☆ **28119** Ostectomy, calcaneus; for spur, with or without plantar fascial release
GP: 090 | Assist: N | NF RVU: 15.17 | FAC RVU: 10.39 | Work RVU: 5.56 | Bilat: Y | CCI Edits | CPT to ICD9 | CPT to ICD10

- ☆ **28120** Partial excision (craterization, saucerization, sequestrectomy, or diaphysectomy) bone (eg, osteomyelitis or bossing); talus or calcaneus
GP: 090 | Assist: N | NF RVU: 19.5 | FAC RVU: 14.3 | Work RVU: 7.31 | Bilat: Y | CCI Edits | CPT to ICD9 | CPT to ICD10



Achilles Insertional Calcific Tendinosis

...and...

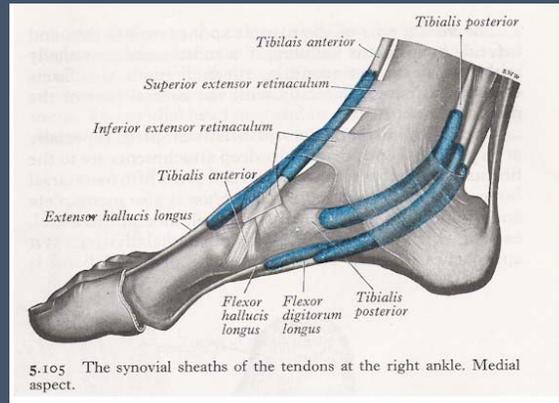
Repair, Revision, and/or Reconstruction (27650-27745)

- ☆ **27650** Repair, primary, open or percutaneous, ruptured Achilles tendon;
GP: 090 | Assist: Y | NF RVU: | FAC RVU: 18.9 | Work RVU: 9.21 | Bilat: Y | CCI Edits | CPT to ICD9 | CPT to ICD10

- ☆ **27652** Repair, primary, open or percutaneous, ruptured Achilles tendon; with graft (includes obtaining graft)
GP: 090 | Assist: N | NF RVU: | FAC RVU: 19.67 | Work RVU: 10.78 | Bilat: Y | CCI Edits | CPT to ICD9 | CPT to ICD10

- ☆ **27654** Repair, secondary, Achilles tendon, with or without graft
GP: 090 | Assist: Y | NF RVU: | FAC RVU: 20.34 | Work RVU: 10.53 | Bilat: Y | CCI Edits | CPT to ICD9 | CPT to ICD10

What About Anchoring the Achilles?



Your Questions...