Ethical Coding in Shoulder Instability

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MOUNT KILIMANJARO
CONGRATULATIONS
YOU ARE NOW AT
UHURU PEAK, TANZANIA 5895M/19341FT AMSL
• AFRICA’S HIGHEST POINT
• WORLD’S HIGHEST FREE STANDING MOUNTAIN
• ONE OF WORLD’S LARGEST VOLCANOES
• WORLD HERITAGE SITE WONDER OF AFRICA
The Adventures of... SUPERCODER

CURSES!! Mr. Audit
Mr. Downcode
Mr. Denial
CPT Coding

• Coding is a team sport.
• Doctor **must** be “involved” in coding:
  – You are the only one who knows what was done.
  – An informed MD coder is always better than a non-MD coder, for procedures.
  – Learn and use CPT language.
CPT Coding

- Coding is not black and white.
- May be several ways to code a procedure.
- If you are smart enough to do the surgery, you’re smart enough to pick the code.
CPT Coding

- CPT updated yearly.
- Stay up to date.
- List of changes in appendix B.
- Insurance companies lag behind.
Consultations

- Any time you see a patient at request of another individual involved in the patient’s care, it can be a consultation.
- Three conditions necessary:
  - Meets documentation guidelines.
  - Request for consultation documented.
  - Communicate findings in writing.
CPT Principles

• Codes are not technique specific nor implant specific.
• Technique chosen by the surgeon should not influence reimbursement.
• Must bill same amount to all carriers.
Operative Report

- Increase revenue without increasing work.
- Key to correct and timely reimbursement.
- Needs to be a stand-alone document.
- Improvements immediate.
- Payment denied based on medical necessity.
Operative Report

- Dictate OR note immediately after case.
- List ALL diagnoses.
- List ALL procedures in CPT language with CPT codes.
- Short indications paragraph.
Modifier 22

• “Increased Procedural Services”
• Unmodified code covers the work averaged from easy cases to the difficult cases.
• Work required to provide a service is substantially greater than typically required
• Most used (abused?) modifier.
Modifier 22

• Keywords: “Altered surgical field”
  • abnormal anatomy
  • major scarring
  • profuse bleeding
  • morbid obesity
  • complexity of service much greater than normative procedure
Modifier 22

- Documentation must support substantial additional work and reason(s) for increased:
  - Intensity
  - Time
  - Technical difficulty
  - Severity of patient’s condition
  - Physical and mental effort required
Open Instability Codes

- 23450 Capsulorrhaphy, anterior; Putti Platt or Magnuson
- 23455 Capsulorrhaphy, anterior; with labral repair
- 23460 Capsulorrhaphy, any type, anterior; with bone block
- 23462 Capsulorrhaphy, any type, anterior; with coracoid transfer
Open Instability Codes

- 23465 Capsulorrhaphy, GH joint, posterior, +/- bone block
- 23466 Capsulorrhaphy, GH joint, any type MDI
- 23929 Unlisted procedure, shoulder
Scope Instability Codes

- 29806  Arthroscopy, shoulder, surgical; capsulorrhaphy
- 29807  Arthroscopy, shoulder, surgical; SLAP repair
- 29999  Unlisted procedure, arthroscopy
- At beginning of note, refer to the CPT code that it is most similar to.
Repeat Procedures

- 76 Repeat by same surgeon
  - Complication
- 77 Repeat by another surgeon
  - Complication
- 78 Return to OR for Related Procedure
  - Complication
- 79 Return to OR for Unrelated Procedure
  - ORIF wrist fx after TSA
Growth Promoting Factors

• Global Service Data has for all surgical procedures as an inclusion:
  – Preparation and insertion of synthetic bone substitutes, osteoconductive and osteoinductive agents (eg BMP, etc) except where specifically excluded.
  – Local infiltration of medication, anaesthetic or contrast before during or after surgery
Stiff Shoulders Postop

- 29822  Arthroscopy, shoulder, surgical; debridement, limited
- 29823  Arthroscopy, shoulder, surgical; debridement, extensive
- 29825  Arthroscopy, shoulder, surgical; with lysis and resection of adhesions
Postoperative Injections

- 20610 Injection, shoulder
- Need a 24 modifier on E&M code with a new ICD 9/10 code
- Need a 25 modifier if not planned and can bill the E&M code
<table>
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<tr>
<th>ICD 9-CM</th>
<th>ICD 10-CM &amp; PCS</th>
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<tbody>
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<td><strong>Dxs: ICD9-CM</strong></td>
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<td><strong>Dx Codes</strong></td>
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<td>Injuries grouped by type of injury</td>
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<td>Only open vs closed fracture</td>
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<td>Injuries grouped by anatomical site</td>
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<td>Gustilo open fracture type</td>
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<td></td>
<td>Expanded combination codes</td>
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ICD 10-CM Information

- **AAOS:**
  www.aaos.org/prac-man

- **CDC:**
  www.cdc.gov/nchs/icd.htm
  www.cdc.gov/nchs/data/icd9/10cmguidelines2011

- **CMS:**
  www.cms.gov/icd10
Sometimes I feel that I have the worst job in the world!

Ya...Right!

Tim Peckham
Thank You.