EXPLORATION OF SPINAL FUSION WITH OTHER SURGERY

Policy # 21

Implementation Date: 9/1/05

Revision Dates: 9/1/12, 7/15/14

Disclaimer:

1. Policies are subject to change without notice.

2. Policies outline coverage determinations for SelectHealth Commercial, SelectHealth Advantage (Medicare), and SelectHealth Community Care (Medicaid) plans. Refer to the "Policy" section for more information.

Description

A fusion site is routinely checked during the performance of a spinal fusion or removal of hardware to determine if the fusion is stable. CPT allows separate reporting of the spinal fusion but Medicare considers the exploration included in the other procedure(s).

The National Correct Coding Initiative (CCI) Policy Manual for Medicaid and Medicare Services states: "Exploration of the surgical field is a standard surgical practice. Physicians should not report a HCPCS/CPT code describing exploration of a surgical field with another HCPCS/CPT code describing a procedure in that surgical field. For example, CPT code 22830 describes exploration of a spinal fusion. CPT code 22830 should not be reported with another procedure of the spine in the same anatomic area. However, if the spinal fusion exploration is performed in a different anatomic area than another spinal procedure, CPT code 22830 may be reported separately with modifier 59. Although exploration of a previous fusion may be undertaken, once a bone graft and instrumentation have been removed and a new fusion has been performed, the procedure ceases being an exploration and instead becomes a major spinal fusion procedure.

Commercial Plan Policy

When a fusion site is routinely checked during the performance of a spinal fusion at an adjacent site, the exploration is included in the more major spinal fusion procedure. Exploration of a spinal fusion should only be paid on appeal when it meets the criteria for use of modifier 59. (See 59 modifier policy)

SelectHealth Advantage (Medicare/CMS)

SelectHealth Advantage will follow the commercial plan policy

SelectHealth Community Care (Medicaid)

SelectHealth Community Care will follow the commercial plan policy

Applicable Codes

Codes	Descriptions
22830	Exploration of spinal fusion

Sources

Current Procedural Terminology (CPT®), (2014) – American Medical Association.

- ICD-9-CM Coding Guidelines. (2013, January 1). Retrieved July 8, 2014, from https://www.encoderpro.com/epro/physicianDoc/pdf/i9v1/i9_guidelines.pdf
- 3. National Correct Coding Initiative (NCCI), (V20.2 2014) Encoder Pro, Retrieved July 15, 2014.
- 4. Surgery: Musculoskeletal System CPT Codes 20000-29999, National Correct Coding Initiative Policy Manual for Medicare Services, Centers for Medicare and Medicaid Services (CMS), Chapter IV, (2014).
- 5. Policy Manual for Medicare Services, Revision Date: 1/1/2014.

Disclaimer

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The codes for treatments and procedures applicable to this policy are included for informational purposes. Inclusion or exclusion of a procedure, diagnosis or device code(s) does not constitute or imply member coverage or provider reimbursement policy. Please refer to the member's contract benefits in effect at the time of service to determine coverage or non-coverage of these services as it applies to an individual member.

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Members may contact Customer Service at the phone number listed on their member ID Card to discuss their benefits more specifically. Providers with questions about this Coverage Policy may call SelectHealth Provider Relations at 801-442-3692.

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