

CODING/REIMBURSEMENT POLICY

SHOULDER DEBRIDEMENT

Policy #72

Implementation Date: 1/1/17 Review Dates: Revision Dates: 10/1/20

Disclaimer:

- 1. Policies are subject to change without notice.
- 2. Policies outline coverage determinations for Select Health Commercial, Select Health Advantage (Medicare/CMS), and Select Health Community Care (Medicaid/CHIP) plans. Refer to the "Policy" section for more information.

Description

The global package for surgical procedures includes debridement, done on (or in), the same anatomical structure during the same surgical session. For coding purposes, the shoulder is considered one anatomical structure.

In 2017, CMS determined that extensive debridement (29823) done with an arthroscopic claviculectomy (29824), a rotator cuff repair (29827), or biceps tenodesis (29828), may be allowed if the documentation supports the debridement was extensive and done in a different area of the shoulder.

Limited debridement (29822) remains included in the global surgical package and is not separately payable even if done on a different area of the shoulder or through a separate incision. The only exception would be a limited debridement done on the opposite shoulder.

COMMERCIAL PLAN POLICY AND CHIP (CHILDREN'S HEALTH INSURANCE PROGRAM)

Select Health will NOT separately reimburse for limited arthroscopic debridement (29822) when done on the same shoulder as another arthroscopic shoulder procedure (29805–29824, 29827–29828).

CPT code 29822 can be billed as the primary procedure when performed with add-on CPT code 29826.

**On appeal, extensive arthroscopic debridement (29823) will be allowed with CPT code 29824, 29827, or 29828, if the documentation supports the debridement was extensive and performed in a different area of the shoulder.

SELECT HEALTH ADVANTAGE (MEDICARE/CMS)

SelectHealth Advantage will follow the commercial plan policy.

SELECT HEALTH COMMUNITY CARE (MEDICAID)

Select Health Community Care will follow the commercial plan policy.

Billing/Coding Information <u>CPT CODES</u>

29822	Arthroscopy, shoulder, surgical; debridement, limited
29823	Arthroscopy, shoulder, surgical; debridement, extensive
29824	Arthroscopy, shoulder, surgical; distal claviculectomy including distal articular surface (Mumford procedure)
29827	Arthroscopy, shoulder, surgical; with rotator cuff repair
29828	Arthroscopy, shoulder, surgical; biceps tenodesis

HCPCS CODES

No specific codes identified

Sources

- 1. American Medical Association (2017) Current Procedural Terminology (CPT®)
- 2. CMS. National Correct Coding Initiative (NCCI), Chapter I, Section B, General Coding Principles. Revision January 2017. Retrieved from https://www.cms.gov/Medicare/Coding/NationalCorrectCodInitEd/index.html?redirect=/nationalcorrectcodinited/
- CMS. National Correct Coding Initiative (NCCI), Chapter IV, Surgery: musculoskeletal system, CPT codes 20000-29999 (Revised January 1, 2017) Section E 4-7. Retrieved from https://www.cms.gov/Medicare/Coding/NationalCorrectCodInitEd/index.html?redirect=/nationalcorrectcodinited/

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