

Internal Medicine Coding Alert

Reader Question: Same Day Tendon Injections and Strapping

Question: Our clinician performed injection of a therapeutic agent into a tendon sheath of the right foot and also performed strapping on the left foot on the same day. Can both the procedures be reported, or should I report only one code? If only one, which of the codes should I report?

Minnesota Subscriber

Answer: You will have to report 20550 (Injection[s]; single tendon sheath, or ligament, aponeurosis [e.g., plantar "fascia"]) for the injection into the tendon sheath on the right foot. You report 29540 (Strapping; ankle and/or foot) for the strapping procedure that your physician performed on the left foot.

If you look at Correct Coding Initiative (CCI) edits, you will see that the CPT® code 29540 is bundled into 20550. In the edit bundle, 20550 is the column 1 code -- the more extensive procedure -- which includes the column 2 code -- the lesser procedure (29540). So, if your clinician performs a related tendon sheath or ligament injection on the same day as the patient undergoes a strapping to the same ankle or foot, you should report only the injection.

CCI assigns the bundle a modifier indicator of "1," which means that you can break the bundle using a modifier in certain clinical circumstances. If the documentation shows that your clinician performed the injection and the strapping at different anatomical sites, during different patient encounters, or for different clinical/diagnostic reasons, you can report both the strapping and the injection. Append modifier 59 (Distinct procedural service) to 29540.

Since your clinician performed the injection procedure on the right foot and the strapping procedure on the left foot, you can report both 20550 and 29540-59 in the case scenario that you have described.