

Part B Insider (Multispecialty) Coding Alert

ORTHOPEDIC SURGEONS: Be Sure To Collect Every Penny For Multiple Knee Compartments

Capture maximum payment on knee surgeries--and make up for upcoming \$50 cut

Starting Oct. 3, your knee surgeon may be receiving around \$50 less for separate compartment chondroplasty (G0289) claims if he also performs a meniscectomy (29881) or meniscus repair (29882). But you can help recoup that loss.

The change: The **Centers for Medicare & Medicaid Services** changed the multiple procedure indicator for [HCPCS G0289](#) from "0" to "2." Now, instead of receiving the full reimbursement for G0289 when you perform it with other procedures, you'll only receive 50 percent, or around \$50 instead of around \$100.

This change occurred in Transmittal 652 (Change Request 4031), which took effect Oct. 3 and also affected several arterial procedures. (See PBI, Vol. 6, No. 31.)

Most orthopedic coders had assumed that the low reimbursement for G0289 was because you would usually report it only with another code, such as 29881 or 29882. So coders and payers treated G0289 like an add-on code, which meant that no multiple procedure reduction applied.

Do this: You can recapture some of the lost reimbursement by paying attention to all of the work your surgeon performed, advises **Margaret Atkinson**, business manager with **Centennial Surgery Center**. Often, if the physician performs a chondroplasty in one compartment, the coder will miss work, such as debridement, that the physician did in one or both other compartments.

"The physicians will need to be better documentors," says Atkinson. Encourage your surgeon to separate the documentation into procedures performed in each compartment. And if a surgeon does an arthroscopy, he'll generally check all three compartments. "It's a rare case that he's doing one thing, especially for knees," says Atkinson.

More: Transmittal 652 also changed the bilateral status for hammertoe correction code 28285. But Atkinson says you can get around this simply by using the LT and RT modifiers, which are more likely to obtain correct reimbursement the first time anyway.