Part B Insider (Multispecialty) Coding Alert

PODIATRY: Reader Question--Conquer Compression Therapy Coding With This Advice

Question: I have documentation for a patient who received compression therapy for a venous stasis ulcer. What codes should I report?

Maryland Subscriber

Answer: Unlike statin therapy, there's no one code for compression therapy for venous stasis ulcers. Podiatrists treat venous stasis ulcers with a number of modalities, depending on the situation. Examples include the Unna boot, for which you may only report the application of the boot (29582, Strapping; Unna boot).

Caution: You cannot report a separate service for removing the Unna boot. Coders sometimes mistakenly report 29700 (Removal or bivalving; gauntlet, boot or body cast) for this service, but this is incorrect. Noridian Medicare, for instance, specifically instructs, "Removal of Unna boot is not a separately reimbursable service. Code 29700 is not appropriate to report this service."

Other modalities include Ace wraps with compression markers (HCPCS code A6449, Light compression bandage, elastic, knitted/woven...) and Profore, a multi-layer compression bandage system. Do this: Report Profore with 29580, and consider appending modifier 22 (Unusual procedural services) to account for the multiple layers that the podiatrist must apply. You should link the COT code to ICD-9 code 454.0 (Varicose veins of lower extremities; with ulcer).

Venous stasis wounds result when the veins in the lower leg don't work so well, and you get leakage of venous blood and swelling of the legs. The ulcers are a result of the poor blood exchange and the swelling, according to **Lawrence A. Lavery, DPM**, assistant professor in the department of surgery at **Scott and White Hospital** in Temple, TX.