

## Part B Insider (Multispecialty) Coding Alert

## **Reader Question: Not All Hardware Removals Are Payable**

**Question:** My physician's note states, "Previous incisions incised.....bluntly dissected down onto screw heads. Guidewires were placed. One screw was backed out, the other was advanced 7 mm. The lateral incision was incised approximately 2.5 cm on the fibula. Dissection carried down onto suture material, which was removed without difficulty. Wounds were irrigated and closed. Dx: prominent medial hardware."

Do I code anything other than 20680 for:

- 1. Removal of medial malleolar screw.
- 2. Advancement of secondary medial malleolar screw beneath the bone.
- 3. Removal of lateral sutures?

**Answer:** You should report the screw extraction with 20680 (Removal of implant; deep [e.g., buried wire, pin, screw, metal band, nail, rod or plate). The advancement of other screw would not be separately reportable for the same site/incision.

For the lateral side, you can report the removal of sutures with 15850 (Removal of sutures under anesthesia [other than local], same surgeon) or 15851 (Removal of sutures under anesthesia [other than local], other surgeon).