

Eli's Rehab Report

You Be the Coder: Splinting Codes

Test your coding knowledge. Determine how you would code this situation before looking at the box below for the answer.

Question: We have been billing 29125 when the therapist applies a custom-made splint to a patient, but we just found some HCPCS codes that are used for the same splints. Can we use the HCPCS codes with the CPT Codes because HCPCS are for supplies, not application?

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Answer: Yes, you definitely should bill for both the splinting procedure and the splint being applied. For instance, if you applied a short-arm splint, you would bill the appropriate CPT code, either 29125 (Application of short arm splint [forearm to hand]; static) or 29126 (dynamic), as well as the supply code, which can be found in the range of Q4021 to Q4024 for short-arm splints.

Other supplies, such as those in categories A4454 (Tape, all types, all sizes), A4455 (Adhesive remover or solvent [for tape, cement or other adhesive], per ounce), A4460 (Elastic bandage, per roll [e.g., compression bandage]) and A4462 (Abdominal dressing holder/binder, each), are considered "incident to" physician's services and generally cannot be billed with the splint code.