

## **Outpatient Facility Coding Alert**

## Reader Question: Codes 28725 and 38220 Can Be Reported Together -- But Not Re-injection

**Question:** Our podiatrist will be performing a subtalar arthrodesis and aspirating bone marrow from the proximal medial tibia. The bone marrow is spun down to concentrated bone marrow cells and mixed with the bone graft. He then injects this into the fusion site. He wants to code for all three services (arthrodesis, aspiration, and injection). Is this choice of codes appropriate? Would these procedures be included in the subtalar arthrodesis?

Alaska Subscriber

**Answer:** Begin with 28725 (Arthrodesis; subtalar) for the subtalar arthrodesis. The services associated with the code do not include the bone marrow aspiration, so you also can report 38220 (Bone marrow; aspiration only). The placement of the bone marrow is, however, included in 38220. Therefore, you should not include the bone marrow injection on the claim.