

Outpatient Facility Coding Alert

You Be the Coder: Know What to Report for Septal Spur Excision

Question: I'm working on a functional endoscopic sinus surgery (FESS) involving a left maxillary antrostomy, endoscopic submucous bilateral inferior turbinate ablation, and the removal of a left septal bone spur. For the bone spur removal, the physician documents "a mucosal flap elevating the bone of the spur was detached using an osteotome with removal of the contents and good coaptation of flaps following removal." How should I code these services?

South Carolina Subscriber

Answer: You've got to consider codes for three distinct services - the maxillary antrostomy, the bilateral inferior turbinate reduction via ablation (submucosal), and the excision of the septal spur. Two of these three services are relatively straightforward.

For the left maxillary antrostomy, you will report 31256 (Nasal/sinus endoscopy, surgical, with maxillary antrostomy) with modifier LT (Left Side). For the submucosal bilateral inferior turbinate ablation, you will report 30802 (Ablation, soft tissue of inferior turbinates, unilateral or bilateral, any method (eg, electrocautery, radiofrequency ablation, or tissue volume reduction); intramural (ie, submucosal)).

The coding of the septal spur excision is a little trickier. There's a misconception that in order to report a septoplasty code, the physician must perform work that involves correcting a deviated septum. However, according to Dorland's Illustrated Medical Dictionary, a septoplasty simply involves the "surgical reconstruction of the nasal septum." This may involve endoscopic surgery to treat a deviated septum or another cartilaginous abnormality. In this patient's case, the surgical reconstruction does not include correcting a deviated septum, but rather the removal (excision) of a protruding septal spur that's causing discomfort or difficulty breathing.

Therefore, for the excision of the septal spur, you will report 30520-LT (Septoplasty or submucous resection, with or without cartilage scoring, contouring or replacement with graft). You won't find any National Correct Coding Initiative (NCCI, or CCI) edits between these three codes, so they are eligible to submit without any additional modifiers outside of laterality.