## Oral Surgery Coding \& Reimbursement Alert

## You Be the Coder: Discern When to Use Multiple Units of 20680

Question: I am new to oral surgery coding and would like to know how to report this procedure. Our oral surgeon recently removed a previously implanted plate and screws using an intraoral approach. The patient had earlier suffered from a fracture of the body of the mandible on the right side. What CPT® codes should I report for this procedure? Also, do let me know how many units of the code should be reported (one for each screw and one for the plate or just one code)?

## Minnesota Subscriber

Answer: You will have to report the CPT® code 20680 (Removal of implant; deep [e.g., buried wire, pin, screw, metal band, nail, rod or plate]) for the removal of the implanted plate and screws.
You will just have to report the removal code once, irrespective of the number of screws and plate that your surgeon removed from the fracture site. You have to just report one unit of the code even if your clinician removed the implanted hardware from the site using different incisions.

So, in your case scenario, you will only have to report one unit of 20680 for the procedure or else your claim will be denied.

Reminder: If your clinician were to remove the implants from two different sites (mandible and the zygomatic arch) and one fracture was not related to the other, then you can report the multiple removal using 20680 and 20680 with the modifier 59 (Distinct procedural service) appended to the second unit. Provide documentation to identify that both the fractures were in different sites and not linked to one another.

To tell if you should use one unit or two, look at the fracture care codes and check "if they are the same" If they're different, you may report two units, if the implants are not all parts of the same fixation device. The hardware has to be two independent entities; otherwise, you should consider this one fixation device and one unit of 20680.

