

Orthopaedics - Upper: Spine and Above

A comprehensive illustrated guide
to coding and reimbursement

SAMPLE

— 2017 ICD-10

A full suite of resources including the latest code set,
mapping products, and expert training to help you make
a smooth transition. www.optumcoding.com/ICD10

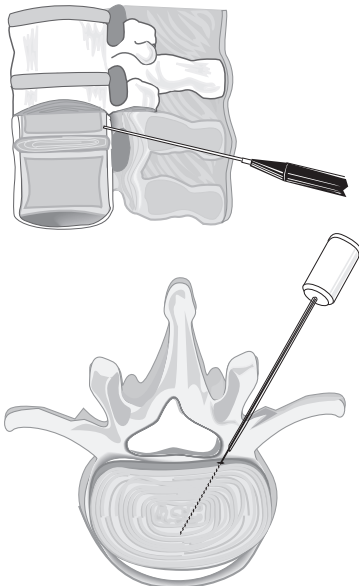
Contents

Getting Started with Coding Companion	i	Hand/Fingers.....	520
Integumentary.....	1	Casts and Strapping	655
Nails	10	Arthroscopy.....	668
Repair	21	Hemic.....	693
Destruction.....	73	Spinal Nerves	696
General Musculoskeletal	76	Extracranial Nerves	746
Neck/Thorax.....	130	HCPCS	785
Spine	149	Appendix.....	789
Shoulder.....	209	Correct Coding Initiative Update 21.3	839
Humerus/Elbow	281	Evaluation and Management	859
Forearm/Wrist.....	383	Index.....	879

SAMPLE

22513-22515

- 22513** Percutaneous vertebral augmentation, including cavity creation (fracture reduction and bone biopsy included when performed) using mechanical device (eg, kyphoplasty), 1 vertebral body, unilateral or bilateral cannulation, inclusive of all imaging guidance; thoracic
- 22514** lumbar
- 22515** each additional thoracic or lumbar vertebral body (List separately in addition to code for primary procedure)



Vertebral augmentation is performed percutaneously

Explanation

The physician performs a percutaneous kyphoplasty, a modification of the percutaneous vertebroplasty, to reduce the pain associated with osteoporotic vertebral compression fractures. This procedure has the added advantage of restoring vertebral body. The patient is placed in a prone, slightly flexed position. A 5 mm to 7 mm incision is made and small cannulae are inserted into the vertebral body from one or both sides. Balloon catheters, called “tamps,” are inserted into the vertebra and inflated. Tamps create a void in the soft trabecular bone and restore vertebral alignment. The balloon is removed and bone cement is injected into the cavity. Report 22513 when the procedure is performed in the thoracic spine; 22514 when the procedure is performed in the lumbar spine; and 22515 for each additional vertebral body. These codes include all imaging guidance performed.

Coding Tips

As an “add-on” code, 22515 is not subject to multiple procedure rules. No reimbursement reduction or modifier 51 is applied. Add-on codes describe additional intra-service work associated with the primary procedure. They are performed by the same physician on the same date of service as the primary service/procedure, and must never be reported as a stand-alone code. Use 22515 in conjunction with 22513–22514. Do not report 22513–22515 in conjunction with 20225, 22310–22315, 22325, or 22327 when they are performed at the same vertebral level. Moderate (conscious) sedation performed with 22513–22515 is considered to be an integral part of the procedure and is not reported separately. However, anesthesia services (00100–01999) may be reported separately when performed by an anesthesiologist (or other qualified provider) other than the physician performing the procedure. Imaging guidance is included in these procedures

and is not reported separately. For percutaneous vertebroplasty, see 22510–22512.

ICD-10-CM Diagnostic Codes

- M48.43XA Fatigue fracture of vertebra, cervicothoracic region, initial encounter for fracture
- M48.44XA Fatigue fracture of vertebra, thoracic region, initial encounter for fracture
- M48.45XA Fatigue fracture of vertebra, thoracolumbar region, initial encounter for fracture
- M48.46XA Fatigue fracture of vertebra, lumbar region, initial encounter for fracture
- M48.47XA Fatigue fracture of vertebra, lumbosacral region, initial encounter for fracture
- M48.53XA Collapsed vertebra, not elsewhere classified, cervicothoracic region, initial encounter for fracture
- M48.54XA Collapsed vertebra, not elsewhere classified, thoracic region, initial encounter for fracture
- M48.55XA Collapsed vertebra, not elsewhere classified, thoracolumbar region, initial encounter for fracture
- M48.56XA Collapsed vertebra, not elsewhere classified, lumbar region, initial encounter for fracture
- M48.57XA Collapsed vertebra, not elsewhere classified, lumbosacral region, initial encounter for fracture
- M80.08XA Age-related osteoporosis with current pathological fracture, vertebra(e), initial encounter for fracture
- M88.1 Osteitis deformans of vertebrae
- S22.011A Stable burst fracture of first thoracic vertebra, initial encounter for closed fracture
- S22.011B Stable burst fracture of first thoracic vertebra, initial encounter for open fracture
- S22.012A Unstable burst fracture of first thoracic vertebra, initial encounter for closed fracture
- S22.012B Unstable burst fracture of first thoracic vertebra, initial encounter for open fracture
- S22.021A Stable burst fracture of second thoracic vertebra, initial encounter for closed fracture
- S22.021B Stable burst fracture of second thoracic vertebra, initial encounter for open fracture
- S22.022A Unstable burst fracture of second thoracic vertebra, initial encounter for closed fracture
- S22.022B Unstable burst fracture of second thoracic vertebra, initial encounter for open fracture
- S22.031A Stable burst fracture of third thoracic vertebra, initial encounter for closed fracture
- S22.031B Stable burst fracture of third thoracic vertebra, initial encounter for open fracture
- S22.032A Unstable burst fracture of third thoracic vertebra, initial encounter for closed fracture
- S22.032B Unstable burst fracture of third thoracic vertebra, initial encounter for open fracture
- S22.041A Stable burst fracture of fourth thoracic vertebra, initial encounter for closed fracture
- S22.041B Stable burst fracture of fourth thoracic vertebra, initial encounter for open fracture
- S22.042A Unstable burst fracture of fourth thoracic vertebra, initial encounter for closed fracture

S22.042B Unstable burst fracture of fourth thoracic vertebra, initial encounter for open fracture

S22.051A Stable burst fracture of T5-T6 vertebra, initial encounter for closed fracture

S22.051B Stable burst fracture of T5-T6 vertebra, initial encounter for open fracture

S22.052A Unstable burst fracture of T5-T6 vertebra, initial encounter for closed fracture

S22.052B Unstable burst fracture of T5-T6 vertebra, initial encounter for open fracture

S22.061A Stable burst fracture of T7-T8 vertebra, initial encounter for closed fracture

S22.061B Stable burst fracture of T7-T8 vertebra, initial encounter for open fracture

S22.062A Unstable burst fracture of T7-T8 vertebra, initial encounter for closed fracture

S22.062B Unstable burst fracture of T7-T8 vertebra, initial encounter for open fracture

S22.071A Stable burst fracture of T9-T10 vertebra, initial encounter for closed fracture

S22.071B Stable burst fracture of T9-T10 vertebra, initial encounter for open fracture

S22.072A Unstable burst fracture of T9-T10 vertebra, initial encounter for closed fracture

S22.072B Unstable burst fracture of T9-T10 vertebra, initial encounter for open fracture

S22.081A Stable burst fracture of T11-T12 vertebra, initial encounter for closed fracture

S22.081B Stable burst fracture of T11-T12 vertebra, initial encounter for open fracture

S22.082A Unstable burst fracture of T11-T12 vertebra, initial encounter for closed fracture

S22.082B Unstable burst fracture of T11-T12 vertebra, initial encounter for open fracture

S32.011A Stable burst fracture of first lumbar vertebra, initial encounter for closed fracture

S32.011B Stable burst fracture of first lumbar vertebra, initial encounter for open fracture

S32.012A Unstable burst fracture of first lumbar vertebra, initial encounter for closed fracture

S32.012B Unstable burst fracture of first lumbar vertebra, initial encounter for open fracture

S32.021A Stable burst fracture of second lumbar vertebra, initial encounter for closed fracture

S32.021B Stable burst fracture of second lumbar vertebra, initial encounter for open fracture

S32.022A Unstable burst fracture of second lumbar vertebra, initial encounter for closed fracture

S32.022B Unstable burst fracture of second lumbar vertebra, initial encounter for open fracture

S32.031A Stable burst fracture of third lumbar vertebra, initial encounter for closed fracture

S32.031B Stable burst fracture of third lumbar vertebra, initial encounter for open fracture

S32.032A Unstable burst fracture of third lumbar vertebra, initial encounter for closed fracture

S32.032B Unstable burst fracture of third lumbar vertebra, initial encounter for open fracture

S32.041A Stable burst fracture of fourth lumbar vertebra, initial encounter for closed fracture

S32.041B Stable burst fracture of fourth lumbar vertebra, initial encounter for open fracture

S32.042A Unstable burst fracture of fourth lumbar vertebra, initial encounter for closed fracture

S32.042B Unstable burst fracture of fourth lumbar vertebra, initial encounter for open fracture

S32.051A Stable burst fracture of fifth lumbar vertebra, initial encounter for closed fracture

S32.051B Stable burst fracture of fifth lumbar vertebra, initial encounter for open fracture

S32.052A Unstable burst fracture of fifth lumbar vertebra, initial encounter for closed fracture

S32.052B Unstable burst fracture of fifth lumbar vertebra, initial encounter for open fracture

HCPSC Equivalent Codes

N/A

Medicare Edits

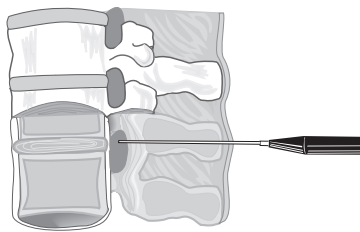
	Fac RVU	Non-Fac RVU	FUD	Status	MUE
22513	15.65	209.45	10	A	1(2)
22514	14.59	209.22	10	A	1(2)
22515	6.61	126.77	N/A	A	5(3)

	Modifiers				Medicare Reference
22513	51	N/A	N/A	N/A	None
22514	51	N/A	N/A	N/A	
22515	N/A	N/A	N/A	N/A	

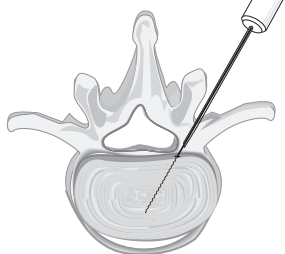
* with documentation

62267 Percutaneous aspiration within the nucleus pulposus, intervertebral disc, or paravertebral tissue for diagnostic purposes

Physician aspirates paravertebral tissue



Center of soft disk is liquid



Nucleus pulposus, intervertebral disc or paravertebral tissue is aspirated for diagnostic evaluation

Explanation

The physician removes contents within the intervertebral disc, nucleus pulposus, or paravertebral tissue with a needle for diagnostic purposes. Separately reportable computed tomography or fluoroscopic guidance verifies placement of the needle. A spinal needle is inserted, the contents of the targeted location are aspirated, and the needle is removed. The wound is dressed. If this procedure is performed under fluoroscopic guidance, injection of the contrast is an inclusive component and is not reported separately.

Coding Tips

For imaging guidance of needle placement, see 77003. Do not report 62267 with 10022, 20225, 62287, 62290 or 62291.

ICD-10-CM Diagnostic Codes

G06.1	Intraspinal abscess and granuloma
M46.02	Spinal enthesopathy, cervical region
M46.03	Spinal enthesopathy, cervicothoracic region
M46.04	Spinal enthesopathy, thoracic region
M46.05	Spinal enthesopathy, thoracolumbar region
M46.06	Spinal enthesopathy, lumbar region
M46.07	Spinal enthesopathy, lumbosacral region
M46.08	Spinal enthesopathy, sacral and sacrococcygeal region
M46.22	Osteomyelitis of vertebra, cervical region
M46.23	Osteomyelitis of vertebra, cervicothoracic region
M46.24	Osteomyelitis of vertebra, thoracic region
M46.25	Osteomyelitis of vertebra, thoracolumbar region
M46.26	Osteomyelitis of vertebra, lumbar region
M46.27	Osteomyelitis of vertebra, lumbosacral region
M46.28	Osteomyelitis of vertebra, sacral and sacrococcygeal region
M46.32	Infection of intervertebral disc (pyogenic), cervical region
M46.33	Infection of intervertebral disc (pyogenic), cervicothoracic region

M46.34	Infection of intervertebral disc (pyogenic), thoracic region
M46.35	Infection of intervertebral disc (pyogenic), thoracolumbar region
M46.36	Infection of intervertebral disc (pyogenic), lumbar region
M46.37	Infection of intervertebral disc (pyogenic), lumbosacral region
M46.38	Infection of intervertebral disc (pyogenic), sacral and sacrococcygeal region
M46.42	Discitis, unspecified, cervical region
M46.43	Discitis, unspecified, cervicothoracic region
M46.44	Discitis, unspecified, thoracic region
M46.45	Discitis, unspecified, thoracolumbar region
M46.46	Discitis, unspecified, lumbar region
M46.47	Discitis, unspecified, lumbosacral region
M46.48	Discitis, unspecified, sacral and sacrococcygeal region
M46.52	Other infective spondylopathies, cervical region
M46.53	Other infective spondylopathies, cervicothoracic region
M46.54	Other infective spondylopathies, thoracic region
M46.55	Other infective spondylopathies, thoracolumbar region
M46.56	Other infective spondylopathies, lumbar region
M46.57	Other infective spondylopathies, lumbosacral region
M46.58	Other infective spondylopathies, sacral and sacrococcygeal region
M46.82	Other specified inflammatory spondylopathies, cervical region
M46.83	Other specified inflammatory spondylopathies, cervicothoracic region
M46.84	Other specified inflammatory spondylopathies, thoracic region
M46.85	Other specified inflammatory spondylopathies, thoracolumbar region
M46.86	Other specified inflammatory spondylopathies, lumbar region
M46.87	Other specified inflammatory spondylopathies, lumbosacral region
M46.88	Other specified inflammatory spondylopathies, sacral and sacrococcygeal region
M46.92	Unspecified inflammatory spondylopathy, cervical region
M46.93	Unspecified inflammatory spondylopathy, cervicothoracic region
M46.94	Unspecified inflammatory spondylopathy, thoracic region
M46.95	Unspecified inflammatory spondylopathy, thoracolumbar region
M46.96	Unspecified inflammatory spondylopathy, lumbar region
M46.97	Unspecified inflammatory spondylopathy, lumbosacral region
M46.98	Unspecified inflammatory spondylopathy, sacral and sacrococcygeal region

HCPCS Equivalent Codes

N/A

Medicare Edits

	Fac RVU	Non-Fac RVU	FUD	Status	MUE
62267	4.6	7.09	0	A	2(3)

	Modifiers				Medicare Reference
62267	51	N/A	N/A	80*	None

* with documentation