

Current Effective Date: 5/1/25

Status: Approved

Reviewed by Medical Policy Subcommittee: 5/1/25

Reviewed Dates: 4/4/25

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#### **INSTRUCTIONS FOR USE DISCLAIMER:**

SummaCare posts policies relating to coverage and medical necessity issues to assist members and providers in administering member benefits. These policies do not constitute a contract or agreement between SummaCare and any member or provider. The policies are guidelines only and are intended to assist members and providers with coverage issues. SummaCare is not a health care provider, does not provide or assist with health care services or treatment, and does not make guarantees as to the effectiveness of treatment administered by providers. The treatment of members is the sole responsibility of the treating provider, who is not an employee of SummaCare, but is an independent contractor in private practice. The policies posted to this site may be updated and are subject to change without prior notice to members or providers.

Medical policies in conjunction with other nationally recognized standards of care are used to make medical coverage decisions.

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### **Orthopedic Procedures Policy**

#### **Indication/Usage:**

**All of the following orthopedic procedures are to be performed in an ambulatory surgery center unless otherwise specified when medical necessity criteria is met. The member's network benefits will need to be reviewed and applied.**

#### **Medical Indications for Authorization Commercial and Medicare Members**

##### **1. Biceps Tenodesis CPT code 29828**

CPT code 29828 biceps tenodesis is a surgical procedure that involves the arthroscopic repair of a torn tendon in the shoulder, specifically focusing on the biceps tendon. This procedure is typically performed to restore function by reattaching the tendon to the bone when there is instability of the biceps tendon, using minimally invasive techniques. Biceps tenodesis can be performed clinical situations where a patient presents with instability of the biceps tendon and symptoms that include pain and limited mobility. Biceps tenodesis is considered integral to all shoulder arthroplasty surgery CPT 23472, and is not separately reimbursed

SummaCare considers CPT code 29828 biceps tenodesis medically necessary when **all** of the following criteria below has been met

- A. Biceps tenodesis CPT code 29828 is not requested separately form shoulder arthroplasty surgery CPT 23472 at the same time.
- B. Chronic pain and functional disability that interferes with ADL's
- C. Imaging evidence confirming the diagnosis
- D. 12 week history of failed conservative therapy
  - Anti-inflammatory medications or analgesics
  - Activity modification
  - Supervised physical therapy within the past year

## **Limitations**

The following codes will not be covered when unbundled from CPT 23472 shoulder arthroplasty surgery.

- 29807: SLAP repair
- 29827: biceps tenodesis
- 29828: rotator cuff repair

## **2. Arthroscopy, shoulder, surgical; debridement, extensive, 3 or more discrete structures CPT code 29823**

CPT code 29023 involves extensive surgical debridement procedure performed via arthroscopy on the shoulder joint. This procedure is done for patients suffering from significant shoulder damage due to trauma or degenerative conditions done by arthroscope.

SummaCare considers shoulder arthroscopy CPT 29823 medically necessary when **all** of the following criteria below has been met

- A. Radiographic confirmation of arthritis, tendon impingement, or bone spurs of the shoulder
- B. Chronic pain interfering with activity and ADL's
- C. Six months of failed conservative management
  - Anti-inflammatory medications or analgesics
  - Activity modification
  - Supervised physical therapy

Extensive debridement is performed in a different area of the same shoulder.

Note – CPT code 29823 can be billed separately from CPT codes 29824, 29827 and 29828

**3. Correction, Hallux Valgus (bunion) CPT code 28289 or Correction, hallux valgus (bunion), with or without Sesamoidectomy CPT code 28292**

CPT code 28289 is a surgical intervention aimed at correcting hallux rigidus, a condition causing significant discomfort and limited mobility in the big toe. This procedure is performed on the first metatarsophalangeal joint, which is the joint connecting the big toe to the foot. Hallux rigidus is caused by arthritis, leading to the formation of bone spurs causing restricted movement and pain. The procedure involves Cheilectomy, which is the removal of bone spurs; debridement and capsule release.

CPT code 28292 is a surgical procedure aimed at correcting hallux valgus, which is a common foot deformity characterized by the lateral deviation of the big toe. The surgery may involve the removal of the bunion (Bunionectomy), the excision of the sesamoid bones located beneath the big toe joint (Sesamoidectomy)

SummaCare considers CPT code 28289 surgical correction of the first MTP joint ( hallux rigidus), including to arthrodesis , Cheilectomy or the Keller procedure or Correction, hallux valgus (bunion), with or without Sesamoidectomy CPT 28292 medically necessary when **all** of the following criteria are met:

- A. Radiographic confirmation of Hallux valgus angle (HVA) > 30 degrees **and** An inter-metatarsal angle (IMA) > 125
- B. Documentation of continued pain and difficulty with walking and ADL's despite at least six months of conservative management
  - Modified footwear or Foot orthotics
  - Corticosteroid injections
  - Debridement of hyperkeratotic lesions
  - Oral analgesics or nonsteroidal anti-inflammatory drugs (NSAIDS)
  - Protective cushions or pads
- C. Documentation of Skeletal Maturity
- D. One or more of the following upon exam
  - Neuroma secondary to the bunion
  - Difficulty or pain with a dorsiflexed second toe due to over-riding of the great toe
  - Limited or painful range of motion at the first toe MTP joint
  - Ulceration caused by bunion
  - Recurrent bursitis

**4. Open treatment of distal radial intra-articular fracture or epiphyseal separation; with internal fixation and including three or more fragments CPT code 25609**

CPT code 25609 is used for surgical repairs a fracture of the lower radius, beyond the joint or a separation of the radius from the joint through an incision and fixes three or more radial bone fragments in place with internal wires, screws, or pins.

SummaCare considers CPT code 25609 ORIF of distal radial intra-articular fracture or epiphyseal separation; including three or more fragments medically necessary when all of the following criteria are met:

- A. Acute distal radius fracture with or without ulna fracture by imaging

- B. Inability For grade 1 fracture to obtain adequate reduction after cast immobilization greater than 1 week **or**
- C. Grade 2 or grade 3 open fracture

**5. Arthroscopy, knee, surgical; with lysis of adhesions CPT code 29884**

CPT 289884 code used for surgical arthroscopy of the knee that includes the lysis of adhesions. This code should not be used in conjunction with diagnostic arthroscopy codes, as it is included in this code.

SummaCare considers CPT code 29884 surgical arthroscopy of the knee for lysis of adhesions medically necessary when **all** of the following criteria are met:

- A. Radiographic confirmation of knee adhesions
- B. Chronic knee pain interfering with activity and ADL's
- C. Knee stiffness with limited range of motion
- D. Six months of failed conservative management
  - Anti-inflammatory medications or analgesics
  - Activity modification
  - Supervised physical therapy

There are currently no NCD or LCD per CMS

## **Coverage Decisions**

Coverage decisions made per CMS, Hayes and industry standards research

## **Plans Covered By This Policy**

Commercial and Medicare

Self-funded Commercial groups refer to plan document for coverage

## **Sources Reviewed**

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[Overcome Quirky NCCI Bundling Rules for Shoulder Arthroscopy - AAPC Knowledge Center](#)

[Head Off Costly Penalties for Shoulder Unbundling Errors](#)

[How To Use CPT Code 28289 - Updated 2025 - Coding Ahead](#)

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[CPT® Code 25609 - Fracture and/or Dislocation Procedures on the Forearm and Wrist - Codify by AAPC](#)

[How To Use CPT Code 29824 - Updated 2025 - Coding Ahead](#)

[How To Use CPT Code 29884 - Updated 2025 - Coding Ahead](#)

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