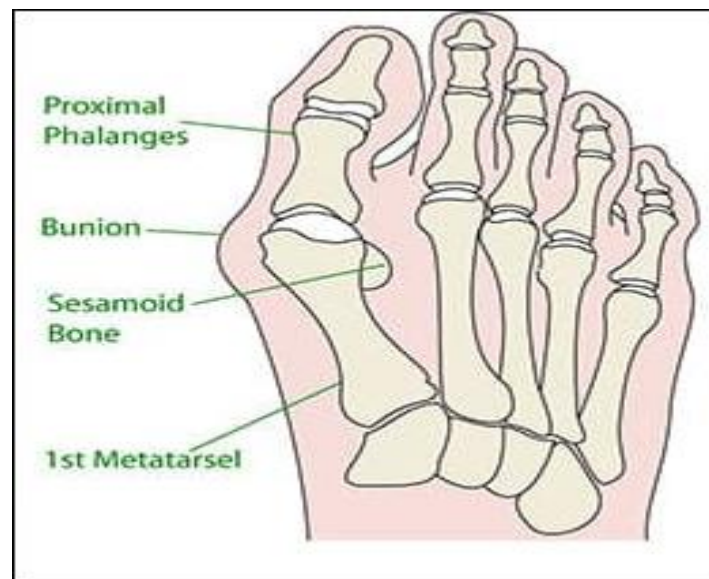


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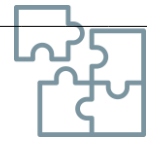
Outpatient Bunionectomy Coding

What is a bunion?

A bunion, or hallux valgus, is a bony bump on the side of the big toe joint. These bumps grow on the outside edge of the foot. You can see them at the part of the joint where the toe meets the foot, called the metatarsophalangeal (MTP) joint



- **Exostectomy:** During this surgery, your surgeon shaves off the bunion. Often, healthcare providers combine this approach with osteotomy to reposition the toe. This procedure is rarely done and is only used in the most minor bunions.
- **Osteotomy:** Your surgeon makes a few small incisions in the bones. Then the surgeon uses screws or pins to realign your big toe joint. This is the most performed procedure for bunions.
- **Arthrodesis:** Sometimes, arthritis inflammation can lead to bunions. In arthrodesis joint fusion, your surgeon removes any parts of the big toe joint that have arthritis. Your surgeon then places screws in the toe to hold the bones together while they heal. This surgery is only done with the most severe of bunions.



CPT codes 28292, 28296, 28295, 28297, 28298 & 28299 are used for coding bunionectomy.

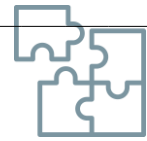
There are many small and minor procedures included in the bunionectomy. Minor procedures included in Bunionectomy are:

- Removal of the bony prominence (bunion)
- Removal of additional osteophytes
- Arthrotomy
- Capsulotomy
- Tenotomy
- Tendon release
- Tenolysis
- Placement of internal fixation
- Removal of bursal tissue
- Articular shaving at the first metatarsophalangeal joint

When to use CPT code 28292 and 28295

To report procedure code **28282**, a bunionectomy should be performed to correct hallux valgus by removing the medial eminence of the metatarsal bone and resecting the base of the proximal phalanx. The base of the proximal phalanx is resected, and two sesamoid bones located on either side of the metatarsal head may also be excised if they are fractured or inflamed. This is generally done for mild deformities where there is very little deviation of the metatarsal.

To report procedure code **28295**, a first metatarsal osteotomy is performed to correct hallus valgus in a bunionectomy procedure. The osteotomy site is proximal. It includes sesamoidectomy when performed. An osteotomy is performed when there is moderate metatarsus primus varus (deviation of the first metatarsal away from the other metatarsals) and the intermetatarsal angle is greater than 40 degrees.



When to report CPT code 28296 & 28297

CPT code 28296 is reported to correct a hallux valgus deformity with a distal metatarsal osteotomy. The procedure includes sesamoid bone removal, when necessary, to help with bone realignment. This type of correction is done for patients with mild hallux valgus of less than 40 degrees and a minimal increase in the deviation of the metatarsal.

For coding CPT code 28297, a bunionectomy involving excision of the medial eminence, tenotomy, and joint fusion of the first metatarsal bone to the first cuneiform bone is performed to correct hallux valgus. The fusion may be done with sesamoid bone removal, when necessary. This type of correction is done for a severe intermetatarsal angle or instability of the first tarsometatarsal joint.

When to report CPT code 28298 & 28299

To report CPT code 28298, a proximal phalanx osteotomy is performed to correct hallux valgus in a bunionectomy procedure. This procedure may be performed with sesamoid bone removal, when necessary, to help with bone realignment

To report CPT code 28299, two or double osteotomy procedures are done to straighten the toe and the metatarsal. This procedure may be done along with sesamoid bone removal, when necessary, to help with realignment. The double osteotomy can be a combination of an osteotomy of the phalanx and the metatarsal (proximal or distal) or a proximal and distal metatarsal osteotomy.

Happy Coding!

Note: While the above education will assist the coder with accuracy each encounter may have specific variations of documentation for both diagnosis coding and/or procedure coding. Please note all encounters should be reviewed for possible query for clarification of **documentation in the health record for accurate code assignment.**