

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

PREAMBLE

- A. Corrective splints must be corrective to qualify for a benefit as such. The corrective splint listings are not applicable to simple immobilization such as with a Jones bandage or metal finger splint following soft tissue injury.
- B. The removal of a wire or pin or other device when used for traction or external fixation (except for rigid external fixators) in the treatment of a fracture or other orthopaedic procedure is to be included in the procedural fee (unless otherwise stated in the *Schedule*) unless a general anaesthetic is required, in which case a fee may be claimed. Removal of devices used for internal fixation more than 30 days after insertion may be claimed for in addition to the procedural benefit.
- C. The benefit for total joint replacement also includes denervation of the joint, all tenotomies and division and repair of muscle.
- D. The benefit for obtaining a bone graft is not to be claimed in cases of pseudoarthrosis repair, fusions or for listings in which bone grafting is included.
- E. For the supervision of limb fitting and 6 *months* post-operative care following amputation, claim visit fees. Amputation with immediate fitting to include supervision of final limb fitting, add 40% (E586).

Note:

Reconstruction or Arthroplasty Procedures: If other procedures are claimed, same joint, same time, e.g. debridement, synovectomy, tendon release etc., the *Medical Consultant* will assess the surgeon's claim.

| | | | |
|--------|--|-----|--------|
| # E554 | - synovectomy requiring a minimum of 30 minutes to resect, to R236, R240, R241, R244, R281, R288, R436, R437, R438, R439, R440, R441, R443, R453, R454, R456, R479, R481, R482, R483, R485, R486, R487, R488, R491, R493, R496, R497, R498, R499, R500, R509, R510 | add | 175.00 |
|--------|--|-----|--------|

Payment rules:

Synovectomy codes other than E554 are *not eligible for payment* when rendered in addition to the codes listed above.

FRACTURES AND DISLOCATIONS

1. For fractures or dislocations requiring open or closed reduction or no reduction, the major pre-operative visit, i.e. consultation or appropriate assessment, may be claimed in addition to the listed benefits.
2. **OPEN REDUCTION** shall mean the treatment of a fracture and/or dislocation by either closed intramedullary fixation or by an operative procedure to expose the fracture. The benefits include fixation by internal or external devices.
3. **CLOSED REDUCTION** shall mean the reduction of a fracture or dislocation by non-operative methods (including traction).
4. **NO REDUCTION** shall mean the treatment of a fracture or dislocation by any other method and includes the use of the initial external support other than a simple splint. No reduction, rigid immobilization, means that the device used to achieve a rigid immobilization is custom-molded and is applied by the physician. In cases involving no reduction, application of a simple splint, such as a metal splint, is not billable as rigid immobilization (visit fees only apply).
5. The service includes all related follow-up treatment by the physician for 2 *weeks* from the date of treatment of the fracture or dislocation except:
 - a. for the first and second post-treatment visits to a hospital in-patient;
 - b. for the subsequent visit by the *MRP - day* of discharge (C124);
 - c. for the first post-treatment visit when the patient is no longer a hospital in-patient;
 - d. if additional reductions are necessary;
 - e. if the patient is transferred to another surgeon; or
 - f. if the patient is a paraplegic.

[Commentary:

The first and second post-treatment visits in hospital for 2 *weeks* from the date of treatment of the fracture or dislocation are payable at the specialty specific subsequent visit fee.]

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

PREAMBLE

6. In multiple fractures or dislocations, the benefit for the major fracture or dislocation shall be 100% and the benefit for the other fractures or dislocations is 85%. When no procedural benefit is applicable, but that fracture or dislocation necessitates hospitalization or concurrent care over that demanded by the major injury, a visit benefit may be claimed in addition to other procedural benefits.
7. For repeat reductions (closed or open) for the same fracture or dislocation, the full benefit should be claimed for the final reduction and after care; previous reductions by the same surgeon should be claimed at 85%.
8. Emergency splinting of fractures in the emergency department should be on the basis of appropriate visit benefit, plus application of cast if appropriate.
9. Transferred cases:
 - a. When patients are transferred to a chronic or convalescent facility, additional visit benefits on a chronic care basis shall be allowed to other than the operating surgeon (and also to the surgeon after 2 *weeks*).
 - b. When patients are transferred to another physician for after care of fractures and dislocations treated by closed or no reduction, the physician rendering the initial care should claim 75% of the listed fee and the surgeon rendering subsequent care should claim visit fees except where otherwise specified. In cases involving open reduction, the percentage should be 80% for the surgeon providing the initial care.
 - c. In cases where the original physician's attempts to reduce a fracture or dislocation under *general anaesthesia* is unsuccessful, and the patient is referred to another physician for definitive care, the original physician should claim 75% of the listed fee.
10. Pseudoarthrosis may be allowed as the appropriate benefit after the fracture is 4 *months* old.
11. For fractures and dislocations not requiring reduction, visit fees apply unless a specific fee is listed. If the listed fee is less than the consultation, the consultation should be claimed under the fracture/dislocation fee code number.

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

GENERAL FEES

| | Asst | Surg | Anae |
|--|------|--------|------|
| BONE/FASCIAL/DERMIS GRAFTS | | | |
| Autogenous | | | |
| # E551 - separate incision..... add | | 86.30 | |
| # E552 - same incision..... add | | 58.45 | |
| # Z279 - different surgeon..... | | 193.00 | |
| Homogenous | | | |
| # E553 - banked bone or bone substitutes..... add | | 25.15 | |
| Allograft | | | |
| # R200 - cadaver - per long bone, each..... | | 144.80 | |
| Note: Other donor allografts are payable at 85% of the listed excision fee. | | | |
| FIXATION | | | |
| # E547 - methyl methacrylate (not arthroplasty)..... add | | 59.40 | |
| # E555 - rigid external fixation (excluding casts) for closed reduction, to closed reduction fee..... add 50% | | | |
| # E544 - cast bracing with closed reduction, to closed reduction fee..... add 40% | | | |
| # E569 - percutaneous pinning, to closed reduction fee..... add 50% | | | |
| # E826 - percutaneous pinning, to F005, F006, F009, F013 or F016..... add 75% | | | |
| Note: E569 is <i>not eligible for payment</i> with E826. | | | |
| # E590 - rigid external fixation - pseudoarthrosis..... add | | 76.10 | |
| Removal of internal fixation device | | | |
| # R267 - general anaesthetic..... | 6 | 158.65 | 6 |
| # R268 - local anaesthetic..... | 6 | 54.85 | 6 |
| # R598 Removal of extensive external fixation device under general anaesthetic..... | | 48.25 | 6 |
| Adjustment of circumferential external fixation | | | |
| # Z280 - without general anaesthetic..... | | 72.35 | |
| # Z281 - with general anaesthetic..... | | 145.70 | 6 |
| # Z210 - Insertion traction pin - excludes fractures and dislocations..... | | 33.35 | |
| WOUND CARE | | | |
| E550 - insertion of closed irrigation system during a surgical procedure for post-operative management..... add | | 63.15 | |
| # E556 - extensive debridement of compound fractures or dislocations, to reduction fee..... add 50% | | | |
| # Z783 Secondary closure..... | | 97.35 | 7 |
| Note: Z783 is <i>only eligible for payment</i> for the delayed surgical closure of a wound. Debridement of a wound with healing by secondary intention is not payable as Z783. | | | |
| # R517 Excision of foreign body..... | | 107.70 | 6 |
| # Z250 Chronic Electrical Stimulation (not to include T.E.N.S.) external or internal..... | | 193.00 | 7 |
| # Z273 Muscle core biopsy using a 6mm or larger Bergstrom muscle biopsy needle or equivalent kit - includes one or more biopsies..... | | 63.35 | |
| Note: Z219 is <i>not eligible for payment</i> when rendered in addition to Z273. | | | |

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

GENERAL FEES

Asst

Surg

Anae

ORTHOPAEDIC TUMOUR SURGERY

| | | | | |
|------|---|----|--------|----|
| R226 | Biopsy of suspected sarcoma, or resection of a complex bone or complex soft tissue tumour(s), per 15 minutes..... | 10 | 100.00 | 15 |
|------|---|----|--------|----|

Payment rules:

1. R226 is eligible for payment only to an oncological orthopaedic surgeon with fellowship training in orthopaedic oncology. Documentation of fellowship training must be provided to the ministry prior to submitting a claim for R226.

[Commentary:

Surgeons eligible to claim R226 will typically be working within a multidisciplinary sarcoma subspecialty group.]

2. R226 is a time based service. Except when rendering the services of a surgical assistant, time calculation for the purpose of R226A includes all resection and reconstruction components of the procedure rendered by the physician claiming R226A.

[Commentary:

For any period of time that a surgeon claiming R226A renders the services of an assistant, the time spent assisting constitutes surgical assist time and is *not eligible for payment* as time for the purpose of R226A.]

3. Biopsy of suspected sarcoma, or resection of a complex bone or complex soft tissue tumour(s) is *not eligible for payment* as R226 when rendered in conjunction with another procedure(s) by the same surgeon when the biopsy or tumour resection is not the major procedure.

[Commentary:

In these circumstances (payment rule 3), use the appropriate fee code listing in the *Schedule* under biopsy or excision of bone or soft tissue.]

4. R226 is eligible for payment for complex tumour resection by amputation only when the tumour resected is malignant.

[Commentary:

For other tumour resection by amputation, use the appropriate fee code listing in the *Schedule* under amputation.]

5. If the nature, complexity and/or length of the procedure require(s) two oncological orthopaedic surgeons to render components of the same procedure simultaneously or sequentially, R226A is eligible for payment to each surgeon.

Claims submission instructions:

Submit R226A claims for a second surgeon using the manual review indicator and accompanied by operative report.

[Commentary:

In accordance with the Surgical Preamble, if a surgeon who is not an oncological orthopaedic surgeon renders a specialized component of the procedure (eg reconstructive flaps or grafts), the surgeon should claim the appropriate fee code(s) from the *Schedule* for the service(s) rendered.]

6. Time calculation commences when the surgeon begins the procedure and ends when the surgeon leaves the operating room.

7. Time unit calculation is based on full 15 minute time units.

Medical record requirements:

This service is eligible for payment only if start and stop times of the service are recorded in the patient's permanent medical record.

[Commentary:

Any surgeon rendering R226A should also record in the patient's permanent medical record the start and stop times of surgical assistant services when rendered.]

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

GENERAL FEES

Asst

Surg

Anae

CASTS

Application of plaster casts or corrective splints are not to be claimed if applied at the time of surgery (except for the application of a cast brace) or applied during the first 2 weeks for a fracture or dislocation when a procedural fee is applicable. The subsequent application of plaster casts may be claimed according to the following *Schedule*.

Direct supervision requires the physical presence of the physician in the office in which the cast is applied at the time the cast is applied unless all conditions listed on page GP42 to GP42 of the General Preamble (Delegated Procedures) are met.

| | | | | |
|--------|--|-----|--------|---|
| Z201 | Finger..... | | 10.25 | |
| E584 | - application of plaster cast outside hospital | add | 11.15 | |
| Z202 | Hand | | 14.90 | 6 |
| E584 | - application of plaster cast outside hospital | add | 11.15 | |
| Z203 | Arm, forearm or wrist | | 24.10 | 6 |
| E584 | - application of plaster cast outside hospital | add | 11.15 | |
| Z199 | Foot..... | | 14.90 | 6 |
| E584 | - application of plaster cast outside hospital | add | 11.15 | |
| # Z213 | Below knee, knee splints (Stove pipe, etc.) | | 24.10 | 6 |
| # Z211 | Whole leg (mid thigh to toes) | | 28.80 | 6 |
| Z198 | Toes | | 10.25 | 6 |
| E584 | - application of plaster cast outside hospital | add | 11.15 | |
| # Z205 | Head and torso | 6 | 97.35 | 6 |
| # Z208 | Shoulder spica | 6 | 97.35 | 7 |
| # Z206 | Body cast..... | 6 | 57.50 | 6 |
| | Hip spica | | | |
| # Z207 | - unilateral | 6 | 97.35 | 6 |
| # Z209 | - bilateral | 6 | 121.60 | 7 |
| Z216 | Wedging of casts in other than fracture treatment..... | | 10.25 | |
| Z200 | Application of Unna's paste | | 14.90 | |
| Z873 | Application of cast brace (must include hinge) | | 67.75 | |
| Z204 | Removal of plaster (not associated with fractures or dislocations within 2 weeks of initial treatment) | | 10.25 | |

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

HAND AND WRIST

| | Asst | Surg | Anae |
|---|------|--------|------|
| AMPUTATION | | | |
| # R606 Phalanx..... | | 161.45 | 6 |
| # R608 Metacarpal or metaphalangeal joint..... | | 190.20 | 7 |
| # E583 - each additional..... add | | 94.60 | |
| # R610 Trans. metacarpal 2nd to 5th ray..... | | 279.35 | 7 |
| # R611 Hand - all metacarpals..... | 6 | 289.50 | 6 |
| # R612 Wrist..... | 6 | 289.50 | 6 |
| # R629 Revision of amputated finger tip..... | 6 | 241.55 | 6 |
| ARTHRODESIS | | | |
| # R465 Finger-thumb..... | 6 | 256.15 | 7 |
| # R466 Wrist..... | 6 | 400.00 | 6 |
| ARTHROPLASTY | | | |
| # E564 - revision of arthroplasty..... add 35% | | | |
| Wrist | | | |
| # R437 - interposition..... | 6 | 374.00 | 7 |
| # R485 - total..... | 6 | 426.90 | 6 |
| # R479 - removal only..... | 6 | 193.00 | 6 |
| Hand - interposition | | | |
| # R435 - single..... | 6 | 254.35 | 7 |
| # R436 - multiple..... | 6 | 459.40 | 7 |
| # R489 Single joint - total (arthrodesis and/or arthroplasties) maximum of 4..... | 6 | 290.55 | 7 |
| # R209 Basal thumb - first carpometacarpal joint..... | 6 | 363.05 | 7 |
| # R500 Removal only..... | 6 | 144.80 | 6 |
| # R236 Carpal replacement..... | 6 | 322.05 | 7 |
| ARTHROSCOPY | | | |
| # R682 Wrist arthroscopy setup, includes when rendered debridement, synovectomy, synovial biopsy, removal of loose body(ies) and/or screw, drilling of defect or microfracture, and/or wrist ganglion debridement..... | 6 | 400.00 | 7 |
| Note: | | | |
| 1. A wrist procedure listed in the Hand and Wrist section of the <i>Schedule</i> performed arthroscopically is eligible for payment in addition to R682 if that procedure is not described as a component of R682 or described by an E-add-on code to R682. | | | |
| 2. Arthroscopic E-add-on codes listed below are <i>not eligible for payment</i> in addition to R682 when the service described by the E-code is a generally accepted component of a procedure described in Note #1. | | | |
| # E479 Arthroscopy of midcarpal and/or distal radio-ulnar joint, through separate portals, to R682..... add | | 192.00 | |
| # E478 Pinning of osteochondral fragment, to R682..... add | | 251.55 | |
| Note: | | | |
| F-prefix fracture procedures are <i>not eligible for payment</i> with E478 for the same fracture. | | | |
| # E480 Triangular fibrocartilage complex repair, to R682..... add | | 350.65 | |
| # E482 Soft tissue capsular release, for contractures, without bone procedure, to R682..... add | | 251.55 | |
| # E483 Synovectomy for inflammatory arthritis requiring a minimum of 90 minutes to resect, to R682..... add | | 326.55 | |
| Payment rules: | | | |
| 1. Synovectomy less than 90 minutes in duration is included in R682. | | | |
| 2. Only one of E482 or E483 is eligible for payment same patient same day. | | | |

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

HAND AND WRIST

| | Asst | Surg | Anae |
|--|------|--------|------|
| ARTHROTOMY | | | |
| # R409 Finger..... | | 168.00 | 6 |
| # R410 Wrist..... | 6 | 212.50 | 6 |
| ASPIRATION/INJECTION | | | |
| See Diagnostic and Therapeutic Procedures - Injections and Infusions. | | | |
| BIOPSY | | | |
| Bone | | | |
| # Z230 - punch, x-ray control | | 89.70 | 6 |
| # Z214 - open biopsy or taking of bone graft by other than operating surgeon..... | 6 | 144.80 | 6 |
| Joint | | | |
| Z221 - needle | | 49.20 | |
| # R409 - open finger | | 168.00 | 6 |
| # R410 - open wrist..... | 6 | 212.50 | 6 |
| Soft tissue | | | |
| # Z228 - open | | 97.35 | 6 |
| Z219 Muscle needle biopsy, soft tissue, per site..... | | 31.20 | |
| DECOMPRESSION - DENERVATION | | | |
| # N290 Decompression median nerve at wrist (carpal tunnel syndrome)..... | 6 | 156.75 | 6 |
| # N285 Exploration and/or decompression and/or transposition and/or neurolysis of major nerve (excluding carpal tunnel nerve)..... | 6 | 256.15 | 7 |
| INCISION AND DRAINAGE | | | |
| # R409 Finger joint..... | | 168.00 | 6 |
| # R410 Wrist joint..... | 6 | 212.50 | 6 |
| Phalanx/metacarpal/carpus | | | |
| # R219 - incision and drainage | 6 | 182.90 | 6 |
| # R218 - sequestrectomy..... | 6 | 144.80 | 6 |
| # R217 - saucerization and bone graft..... | 6 | 242.25 | 7 |
| # R534 Tendon sheath | 6 | 225.00 | 6 |
| EXAMINATION/MANIPULATION | | | |
| Z222 Manipulation - under general anaesthetic (see Surgical Preamble SP4). | | 24.10 | 6 |
| Note: | | | |
| Without general anaesthetic, see Diagnostic and Therapeutic Procedures - Physical Medicine. | | | |

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

HAND AND WRIST

Asst

Surg

Anae

EXCISION

Bone

| | | | | |
|--------|---|-----|--------|-----|
| # R316 | Proximal row carpectomy | 6 | 338.75 | 7 |
| # R285 | Carpal - bone (one)..... | 6 | 214.45 | 7 |
| # R317 | Dorsal exostosis (triquetrum)..... | 6 | 189.75 | 6 |
| # R286 | Radial styloid | 6 | 234.75 | 7 |
| # R283 | Phalanx/metacarpal | 6 | 193.00 | 7 |
| # R272 | Bone tumour (see General Preamble GP8)..... | I.C | I.C | I.C |

Joint

Synovectomy/capsulectomy/debridement

| | | | | |
|--------|--|---|--------|---|
| # R425 | - finger joint | 6 | 226.40 | 6 |
| # R414 | - two or more joints..... | 6 | 339.65 | 7 |
| # R407 | Synovectomy of extensor or flexor tendons..... | | 224.45 | 6 |
| # R418 | Synovectomy/debridement - wrist..... | 6 | 342.55 | 7 |
| # R492 | Radio-ulnar meniscectomy | 6 | 231.10 | 7 |

Soft tissue

| | | | | |
|--------|---|---|--------|---------|
| # R549 | Ganglion - Simple or complex..... | 6 | 177.80 | 6 |
| # R551 | Excision of fascia for Dupuytren's (palmar fibromatosis), single ray, with or without flaps. | 6 | 322.15 | 7 |
| # E832 | - excision of fascia for Dupuytren's, one or more additional rays, to R551.. add | | 273.85 | |
| # E831 | - use of skin grafts, or revision surgery (with or without skin grafts), to R549 or R551 | | | add 30% |

Payment rules:

1. R551 is not payable for treatment of Dupuytren's by aponeurotomy.
2. A maximum of one R551 is eligible for payment per limb, per day.

Note:

1. Services listed under "Skin Flaps and Grafts" are *not eligible for payment* with R549 or R551.
2. R551, E832 and E831 include the palmar and digital components of the Dupuytren's procedure, when rendered.

Muscle

| | | | | |
|--------|----------------|---|--------|---|
| # R522 | - simple..... | 6 | 193.00 | 6 |
| # R523 | - complex..... | 6 | 484.35 | 7 |

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

HAND AND WRIST

Asst

Surg

Anae

RECONSTRUCTION

Bone - Pseudoarthrosis/non-union/avascular necrosis

| | | | | |
|--------|--|---|--------|---|
| # R321 | Phalanx, metacarpal | 6 | 260.75 | 7 |
| # R322 | Scaphoid..... | 6 | 500.00 | 6 |
| # R345 | Carpal bone, other than scaphoid..... | 6 | 260.75 | 6 |
| # E497 | - pedicled vascularized bone graft, to R322 or R345..... add | | 350.00 | |

Note:

1. R322 and R345 must include fixation and a non-vascularized bone graft.
2. E497 is payable in addition to R322 and R345 if a pedicled vascularized bone graft is used in addition to, or in place of a non-vascularized bone graft.
3. F019 and Z279 rendered in conjunction with R322 and R345 are *not eligible for payment*.

Bone - Deformity

Osteotomy - phalanx

| | | | | |
|--------|---------------------------------------|---|--------|---|
| # R257 | - terminal | | 162.65 | 6 |
| # R258 | - middle proximal or metacarpal | 6 | 193.20 | 7 |
| # E591 | - each additional..... add | | 158.65 | |

Ligaments

| | | | | |
|--------|--|---|--------|---|
| # R597 | Simple/single repair - wrist..... | 6 | 301.60 | 7 |
| # R548 | Extensive/multiple repair - wrist..... | 6 | 511.45 | 7 |
| # R601 | Metacarpal phalangeal repair | 6 | 316.75 | 7 |

Note:

Reconstruction - Nerve - see page X8.

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

HAND AND WRIST

Asst

Surg

Anae

RECONSTRUCTION

Tendon

Tenoplasty

| | | | | |
|--------|----------------------------|---|--------|---|
| # R557 | - one | 6 | 223.65 | 7 |
| # E050 | - each additional..... add | | 77.05 | |

Tendon graft

| | | | | |
|--------|----------------------------|---|--------|---|
| # R559 | - one | 6 | 306.30 | 7 |
| # E052 | - each additional..... add | | 259.85 | |

| | | | | |
|--------|---|--|-------|---|
| # R586 | Reconstruction of flexor tendon pulley, per finger..... | | 97.35 | 7 |
|--------|---|--|-------|---|

Silicone rod insertion

| | | | | |
|--------|----------------------------|---|--------|---|
| # R554 | - one | 6 | 294.20 | 7 |
| # E051 | - each additional..... add | | 245.90 | |

Transplant/transfer

| | | | | |
|--------|----------------------------|---|--------|---|
| # R563 | - single..... | 6 | 284.95 | 7 |
| # E054 | - each additional..... add | | 236.10 | |

Tendon repair - extensor

| | | | | |
|--------|--------------------------|---|--------|---|
| # R578 | - single..... | 6 | 164.10 | 7 |
| # E580 | - each additional* | | 70.95 | |

Flexor

| | | | | |
|--------|--------------------------|---|--------|---|
| # R585 | - single..... | 6 | 307.60 | 7 |
| # E581 | - each additional* | | 128.95 | |

Mallet finger

| | | | | |
|--------|---------------|---|------------|---|
| UVC | - closed..... | | visit. fee | |
| # R574 | - K-wire..... | | 133.95 | 7 |
| # R573 | - open..... | 6 | 147.20 | 6 |

Boutonniere

| | | | | |
|--------|---------------|---|------------|---|
| UVC | - closed..... | | visit. fee | |
| # R577 | - open..... | 6 | 147.30 | 6 |
| # R582 | - late | 6 | 246.65 | 7 |

Note:

*If additional tendon repair(s) requires a separate incision, bill according to Surgical Preamble SP2.

Extremities

| | | | | |
|--------|---|-----|---------|-----|
| # R602 | Pollicization..... | 6 | 596.35 | 6 |
| # R603 | Digital reimplantation involving microvascular and neuro anastomosis..... | 8 | 1586.20 | 8 |
| # R604 | Revision of R602, R603 (see General Preamble GP8) | I.C | I.C | I.C |
| # R605 | Reconstruction and plastic repair of traumatically amputated extremities (see General Preamble GP8) | I.C | I.C | I.C |

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

HAND AND WRIST

Asst

Surg

Anae

RELEASE

Tendon

Tenolysis - flexor and/or extensor tendon of

| | | | | |
|--------|---|---|--------|---|
| # R575 | - one digit | 6 | 194.05 | 6 |
| # E537 | - each additional digit..... add | | 165.20 | |
| # R541 | Flexor tenolysis with pulley preservation | 6 | 309.00 | 6 |

Tenotomy or fasciotomy (closed)

Finger

| | | | | |
|--------|---------------------------|--|-------|---|
| # Z247 | - one | | 49.20 | 6 |
| # Z248 | - two | | 72.35 | 7 |
| # Z249 | - three or more | | 99.15 | 6 |
| # Z231 | - palmar or plantar | | 73.70 | 7 |

Tendon release (open)

| | | | | |
|--------|--------------------------------|---|--------|---|
| # R536 | - finger/palm | | 156.50 | 6 |
| # E592 | - more than one, to R536 | | 133.05 | |
| # R537 | - wrist..... | 6 | 175.00 | 6 |
| # E571 | - more than one, to R537 | | 148.75 | |

REDUCTION

Fractures

Phalanx

| | | | | |
|--------|--|---|--------|---|
| F004 | - no reduction, rigid immobilization..... | | 49.20 | |
| F005 | - closed reduction..... | | 99.25 | 6 |
| E584 | - application of plaster cast outside hospital | | 11.15 | |
| E558 | - each additional..... add | | 22.25 | |
| # F007 | - open reduction | 6 | 298.45 | 7 |

Metacarpal

| | | | | |
|--------|---|---|--------|---|
| F008 | - no reduction, one or more, rigid immobilization | | 49.20 | |
| F009 | - closed reduction..... | | 99.25 | 6 |
| E584 | - application of plaster cast outside hospital | | 11.15 | |
| E504 | - each additional..... add | | 22.20 | |
| # F011 | - open reduction | 6 | 262.60 | 7 |
| E559 | - each additional (open)..... add | | 142.90 | |

Intra-articular

| | | | | |
|--------|--|---|--------|---|
| F006 | - closed reduction..... | | 119.75 | |
| E584 | - application of plaster cast outside hospital | | 11.15 | |
| E503 | - each additional..... add | | 26.85 | |
| # F010 | - open reduction | 6 | 335.80 | 7 |

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

HAND AND WRIST

Asst

Surg

Anae

REDUCTION

Fractures

Bennett's

| | | | | |
|--------|--|---|--------|---|
| F012 | - no reduction, rigid immobilization..... | | 49.20 | |
| E584 | - application of plaster cast outside hospital | | 11.15 | |
| # F013 | - closed reduction..... | 6 | 119.80 | 6 |
| # F015 | - open reduction | 6 | 335.80 | 7 |

Carpus

| | | | | |
|--------|--|---|--------|---|
| F102 | - no reduction, rigid immobilization..... | | 49.20 | |
| E584 | - application of plaster cast outside hospital | | 11.15 | |
| # F016 | - closed reduction, one or more | | 115.10 | 6 |
| # F017 | - open reduction, one or more..... | 6 | 346.15 | 7 |

Scaphoid

| | | | | |
|--------|--|---|--------|---|
| F018 | - no reduction, rigid immobilization..... | | 49.20 | |
| E584 | - application of plaster cast outside hospital | | 11.15 | |
| # F019 | - open reduction | 6 | 480.00 | 7 |
| # F020 | - excision | 6 | 193.00 | 7 |

Dislocations

Finger

| | | | | |
|--------|--|---|--------|---|
| D001 | - closed reduction..... | | 57.50 | 6 |
| E584 | - application of plaster cast outside hospital | | 11.15 | |
| E576 | - each additional..... | | 10.25 | |
| # D003 | - open reduction | 6 | 196.50 | 6 |

Metacarpal/phalangeal

| | | | | |
|--------|--|---|--------|---|
| D004 | - closed reduction..... | | 57.50 | 6 |
| E584 | - application of plaster cast outside hospital | | 11.15 | |
| E577 | - each additional..... | | 10.25 | |
| # D006 | - open reduction | 6 | 181.85 | 7 |

Carpal

| | | | | |
|--------|--|---|--------|---|
| D007 | - closed reduction..... | | 128.05 | 6 |
| E584 | - application of plaster cast outside hospital | | 11.15 | |
| # D008 | - open reduction | 6 | 241.30 | 7 |

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

ELBOW AND FOREARM

| | Asst | Surg | Anae |
|---|------|--------|------|
| AMPUTATION | | | |
| # R613 Through radius and ulna | 6 | 306.30 | 7 |
| # R614 Elbow disarticulation | 6 | 289.50 | 6 |
| ARTHRODESIS | | | |
| # R466 Elbow | 6 | 400.00 | 6 |
| ARTHROPLASTY | | | |
| # E564 revision of elbow arthroplasty add 35% | | | |
| # R281 Ulna replacement (lower end)..... | 6 | 296.90 | 6 |
| # R288 Implant radial head | 6 | 251.55 | 6 |
| # R499 Removal of total replacement | 6 | 402.75 | 7 |
| # R486 Complete arthroplasty replacement..... | 6 | 619.90 | 8 |
| # R510 Interposition arthroplasty | 6 | 435.20 | 7 |
| ARTHROSCOPY | | | |
| # R683 Elbow arthroscopy setup, includes when rendered debridement, synovectomy, synovial biopsy, removal of loose body(ies) and/or screw, drilling of defect or microfracture, and/or arthroscopic epicondylar release | 6 | 400.00 | 7 |
| Note: | | | |
| 1. An elbow procedure listed in the Elbow section of the <i>Schedule</i> performed arthroscopically is eligible for payment in addition to R683 if that procedure is not described as a component of R683 or described by an E-add-on code to R683. | | | |
| 2. Arthroscopic E-add-on codes listed below are <i>not eligible for payment</i> in addition to R683 when the service described by the E-code is a generally accepted component of a procedure described in Note #1. | | | |
| # E478 Pinning of osteochondral fragment, to R683 | | 251.55 | |
| Note: | | | |
| F-prefix fracture procedures are <i>not eligible for payment</i> with E478 for the same fracture. | | | |
| # E481 Osteochondroplasty (extensive bone and arthrofibrotic tissue removal requiring a minimum of 2 hours to resect), to R683..... | | 500.00 | |
| # E482 Soft tissue capsular release for contractures without bone procedure, to R683 | | 251.55 | |
| # E483 Synovectomy for inflammatory arthritis requiring a minimum of 90 minutes to resect, to R683 | | 326.55 | |
| Payment rules: | | | |
| 1. Only one of E481, E482 or E483 is eligible for payment same patient same <i>day</i> . | | | |
| 2. Synovectomy less than 90 minutes in duration is included in R683. | | | |
| 3. Osteochondroplasty less than 2 hours in duration is included in R683. | | | |
| ARTHROTOMY | | | |
| # R445 Elbow, loose body, etc. | 6 | 199.55 | 7 |
| ASPIRATION/INJECTION | | | |
| See Diagnostic and Therapeutic Procedures - Injections and Infusions. | | | |

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

ELBOW AND FOREARM

Asst

Surg

Anae

BIOPSY

Bone

| | | | | |
|--------|----------------|---|--------|---|
| Z225 | - needle | | 72.35 | 6 |
| # Z214 | - open | 6 | 144.80 | 6 |

Joint

| | | | | |
|--------|---|---|--------|---|
| # R432 | - open | 6 | 171.45 | 6 |
| # Z228 | - Muscle/soft tissue | | 97.35 | 6 |
| Z219 | - Muscle needle biopsy, soft tissue, per site | | 31.20 | |

DECOMPRESSION/DENERVATION

| | | | | |
|--------|---|---|--------|---|
| # R495 | Fasciotomy for compartment syndrome (not including secondary closure wound) . | 6 | 320.20 | 7 |
| # Z783 | - Secondary closure | | 97.35 | 7 |

Catheter

| | | | | |
|--------|---|---|-----------|---|
| # Z251 | - insertion | | 49.20 | |
| UVC | - monitoring | | visit.fee | |
| # N190 | Exploration and/or decompression and/or neurolysis of ulnar nerve (elbow) | 6 | 215.35 | 7 |
| # N189 | Ulnar nerve transposition at elbow - may include exploration, decompression and/or neurolysis | 6 | 279.25 | 7 |
| # R426 | Denervation - elbow | 6 | 258.00 | 7 |

INCISION AND DRAINAGE

| | | | | |
|--------|---|---|--------|---|
| # R228 | Acute | 6 | 302.55 | 7 |
| # Z226 | Soft tissue or bursa, incision and drainage | | 97.35 | 7 |
| # R445 | Elbow | 6 | 199.55 | 7 |
| # R231 | Sequestrectomy | 6 | 355.35 | 7 |
| # R229 | Saucerization and bone grafting | 6 | 452.90 | 7 |

EXAMINATION/MANIPULATION

| | | | | |
|------|---|--|-------|---|
| Z222 | Manipulation - under general anaesthetic (see Surgical Preamble SP4). | | 24.10 | 6 |
|------|---|--|-------|---|

Note:

Without general anaesthetic, see Diagnostic and Therapeutic Procedures - Physical Medicine.

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

ELBOW AND FOREARM

| | Asst | Surg | Anae | |
|-------------------------------|--|------|--------|---|
| EXCISION | | | | |
| Bone | | | | |
| # R287 | Radial head..... | 6 | 217.95 | 7 |
| # R286 | Radial styloid | 6 | 234.75 | 7 |
| # R643 | Ulna lower end..... | 6 | 193.00 | 7 |
| # R290 | Olecranon | 6 | 207.90 | 6 |
| # R291 | Olecranon with fascial repair | 6 | 309.00 | 7 |
| Bursae | | | | |
| # R595 | Olecranon | 6 | 101.25 | 6 |
| Joint Contents | | | | |
| # R421 | Synovectomy/capsulectomy/debridement, etc. | 6 | 311.85 | 7 |
| Muscles | | | | |
| # R524 | Myositis ossificans | 6 | 289.50 | 7 |
| # R517 | Foreign body removal | | 107.70 | 6 |
| Tumours | | | | |
| Soft tissues | | | | |
| # R591 | - superficial..... | 6 | 196.05 | 6 |
| # R592 | - deep | 6 | 484.35 | 7 |
| Bone tumours | | | | |
| # R294 | - exostosis | 6 | 165.20 | 7 |
| # R295 | - simple excision..... | 6 | 289.50 | 7 |
| # R293 | - extensive with replacement..... | 6 | 677.50 | 6 |
| RECONSTRUCTION | | | | |
| Bone - Pseudoarthrosis | | | | |
| # R323 | Radius or ulna..... | 6 | 304.40 | 7 |
| # R473 | Radius and ulna..... | 6 | 411.20 | 6 |
| # R950 | Radius and ulna - circular external fixation..... | 6 | 291.40 | 7 |
| Bone - Deformity | | | | |
| Osteotomy | | | | |
| # R259 | - ulna | 6 | 297.85 | 7 |
| # R261 | - radius with or without ulna | 6 | 411.20 | 6 |
| # R324 | - radius and/or ulna with reconstruction congenital abnormality, synostosis etc. . | 6 | 398.10 | 6 |
| # R951 | Single level correction - circular external fixation..... | 6 | 638.40 | 7 |
| # R952 | Double level correction - circular external fixation | 6 | 798.10 | 6 |
| Bone transport | | | | |
| # R953 | - circular external fixation (less than or equal to 6 cm)..... | 6 | 655.15 | 6 |
| # R954 | - circular external fixation (greater than 6 cm)..... | 6 | 763.80 | 7 |

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

ELBOW AND FOREARM

| | Asst | Surg | Anae |
|--|------|--------|------|
| RECONSTRUCTION | | | |
| Fascia | | | |
| Repair fascial defects | | | |
| # R476 - small..... | 6 | 144.80 | 7 |
| # R478 - large with or without synthetic graft or rotation flap..... | 6 | 290.55 | 7 |
| Ligaments | | | |
| # R597 Simple/single repair..... | 6 | 301.60 | 7 |
| # R548 Extensive/multiple repair..... | 6 | 511.45 | 7 |
| Tendons | | | |
| Suture extensor tendon | | | |
| # R578 - single..... | 6 | 164.10 | 7 |
| # E580 - each additional add | | 70.95 | |
| Suture flexor tendon | | | |
| # R585 - single..... | 6 | 307.60 | 7 |
| # E581 - each additional add | | 128.95 | |
| Tenoplasty | | | |
| # R557 - single..... | 6 | 223.65 | 7 |
| # E050 - each additional add | | 77.05 | |
| Tenolysis | | | |
| # R556 - single..... | 6 | 202.25 | 6 |
| # E599 - each additional add | | 87.20 | |
| Transposition/transplantation/transfer | | | |
| # R563 - single..... | 6 | 284.95 | 7 |
| # E056 - each additional add | | 91.90 | |
| # R583 Steindler flexoplasty..... | 6 | 344.85 | 7 |
| RELEASE | | | |
| Muscles and tendons | | | |
| # R519 - simple, e.g. tennis elbow..... | 6 | 136.35 | 6 |
| # R521 - radical, e.g. muscle slide..... | 6 | 314.60 | 7 |
| REDUCTION | | | |
| Dislocations | | | |
| Elbow joint | | | |
| # D009 - closed reduction..... | | 84.45 | 6 |
| # D010 - open reduction - acute..... | 6 | 252.45 | 7 |
| # R400 - repair chronic, recurrent..... | 6 | 379.50 | 6 |
| Radial head | | | |
| # D012 - closed reduction, pulled elbow..... | | 39.00 | 6 |
| # D011 - open reduction - acute..... | 6 | 193.00 | 7 |
| # R540 - open reduction - recurrent..... | 6 | 227.40 | 7 |
| # R558 - open reduction - late..... | 6 | 357.20 | 7 |

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

ELBOW AND FOREARM

Asst

Surg

Anae

REDUCTION

Fractures

Epicondyle

| | | | | |
|--------|-------------------------|---|--------|---|
| # F029 | - no reduction | | 67.75 | |
| # F037 | - closed reduction..... | 6 | 126.25 | 6 |
| # F038 | - open reduction | 6 | 214.45 | 7 |

Transcondylar/condylar

| | | | | |
|--------|---------------------------------------|---|--------|---|
| # F039 | - no reduction | | 67.75 | |
| # F040 | - closed reduction..... | 6 | 298.35 | 6 |
| # F045 | - closed reduction with traction..... | 6 | 312.70 | 6 |
| # F041 | - open reduction | 6 | 375.80 | 7 |

Olecranon

| | | | | |
|--------|---|---|--------|---|
| # F034 | - no reduction, rigid immobilization..... | | 126.25 | 6 |
| # F035 | - closed reduction..... | 6 | 129.00 | 6 |
| # F036 | - open reduction | 6 | 224.55 | 7 |

Radius and ulnar shaft

| | | | | |
|--------|---|---|--------|---|
| # F024 | - no reduction, rigid immobilization..... | | 67.75 | |
| # F025 | - closed reduction..... | 6 | 148.50 | 6 |
| # F026 | - open reduction | 6 | 368.40 | 7 |

Radius and ulna - Monteggia

| | | | | |
|--------|---|---|--------|---|
| # F014 | - no reduction, rigid immobilization..... | | 67.75 | |
| # F022 | - closed reduction..... | | 144.80 | 6 |
| # F023 | - open reduction of ulna plus closed reduction radial head..... | 6 | 242.25 | 7 |

Radius or ulna

| | | | | |
|--------|--|---|--------|---|
| F031 | - no reduction, rigid immobilization..... | | 81.30 | |
| E584 | - application of plaster cast outside hospital | | 11.15 | |
| # F032 | - closed reduction..... | 6 | 117.85 | 6 |
| # F033 | - open reduction | 6 | 274.00 | 7 |

Radius - distal, e.g. Colles', Smith's, or Barton's fracture

| | | | | |
|--------|--|---|--------|---|
| F027 | - no reduction, rigid immobilization..... | | 67.75 | |
| E584 | - application of plaster cast outside hospital | | 11.15 | |
| # F028 | - closed reduction, under local or regional anaesthetic..... | | 109.45 | |
| # F046 | - closed reduction, under general anaesthetic..... | 6 | 149.35 | 6 |
| # F030 | - open reduction | 6 | 420.00 | 7 |

Osteochondral

| | | | | |
|--------|------------------------|---|--------|---|
| # F021 | - open reduction | 6 | 392.40 | 7 |
|--------|------------------------|---|--------|---|

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

SHOULDER, ARM AND CHEST

| | Asst | Surg | Anae |
|--|------|--------|------|
| AMPUTATION | | | |
| # R617 Forequarter | 10 | 490.95 | 15 |
| # R616 Shoulder disarticulation | 9 | 373.10 | 9 |
| # R615 High humerus | 6 | 369.35 | 6 |
| ARTHRODESIS | | | |
| # R467 Shoulder | 6 | 468.65 | 6 |
| ARTHROPLASTY | | | |
| # E564 - revision of prosthesisadd 35% | | | |
| # R438 Humeral prosthesis | 6 | 449.20 | 10 |
| # R487 Total prosthesis..... | 8 | 695.10 | 10 |
| # R240 Revision total arthroplasty shoulder..... | 8 | 942.95 | 15 |
| # R498 Removal prosthesis/no replacement | 6 | 397.20 | 8 |
| ARTHROSCOPY | | | |
| # R684 Shoulder arthroscopy setup, includes when rendered debridement, synovectomy, removal of loose body(ies) and/or screw, drilling of defect or microfracture, and/or synovial biopsy | 6 | 400.00 | 10 |
| Note: | | | |
| 1. A shoulder procedure listed in the Shoulder section of the <i>Schedule</i> performed arthroscopically is eligible for payment in addition to R684 if that procedure is not described as a component of R684 or described by an E-add-on code to R684. | | | |
| 2. Arthroscopic E-add-on codes listed below are <i>not eligible for payment</i> in addition to R684 when the service described by the E-code is a generally accepted component of a procedure described in Note #1. | | | |
| # E478 Pinning of osteochondral fragment, to R684 | | 251.55 | |
| Note: | | | |
| F-prefix fracture procedures are <i>not eligible for payment</i> with E478 for the same fracture. | | | |
| # E484 Superior labral anterior posterior (SLAP) repair, to R684 | | 336.65 | |
| # E485 Arthroscopic capsular release for frozen shoulder, to R684 | | 240.50 | |
| Payment rules: | | | |
| E484 is <i>not eligible for payment</i> in addition to R401. | | | |
| ARTHROTOMY | | | |
| # R411 Shoulder | 6 | 223.65 | 7 |
| ASPIRATION/INJECTION | | | |
| See Diagnostic and Therapeutic Procedures - Injections and Infusions. | | | |

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

SHOULDER, ARM AND CHEST

| | | Asst | Surg | Anae |
|---|---|------|--------|------|
| BIOPSY | | | | |
| Bone | | | | |
| Z220 | - needle/punch, x-ray control..... | | 89.70 | 6 |
| # Z214 | - open..... | 6 | 144.80 | 6 |
| Joint | | | | |
| # R411 | - open..... | 6 | 223.65 | 7 |
| # Z228 | Soft tissue - open..... | | 97.35 | 6 |
| Z219 | Muscle needle biopsy, soft tissue, per site..... | | 31.20 | |
| Incision and Drainage | | | | |
| # R222 | Humerus/clavicle/scapula..... | 6 | 262.60 | 7 |
| # Z226 | Bursae/soft tissue..... | | 97.35 | 7 |
| # R411 | Joint..... | 6 | 223.65 | 7 |
| # R225 | Sequestrectomy..... | 6 | 290.55 | 7 |
| # R223 | Saucerization with bone graft..... | 6 | 387.90 | 7 |
| EXAMINATION AND MANIPULATION | | | | |
| Z223 | Manipulation under general anaesthetic (see Surgical Preamble SP4)..... | | 49.20 | 6 |
| Note: Without general anaesthetic, see Diagnostic and Therapeutic Procedures - Physical Medicine. | | | | |
| EXCISION | | | | |
| Clavicle or Acromion | | | | |
| # R298 | Simple (includes ligament)..... | 6 | 211.60 | 7 |
| Note: When R298 is rendered in association with R416, R298 is payable at 100% and R416 is payable at 85%. | | | | |
| # R641 | Major tumour..... | 6 | 290.55 | 7 |
| # R214 | Malignant tumour with reconstruction..... | 6 | 484.35 | 6 |
| Humerus | | | | |
| # R292 | Head..... | 6 | 299.75 | 6 |
| # R294 | Exostosis..... | 6 | 165.20 | 7 |
| # R295 | Benign tumour..... | 6 | 289.50 | 7 |
| # R297 | Malignant tumour with reconstruction..... | 6 | 681.10 | 6 |
| EXCISION | | | | |
| Joint | | | | |
| # R422 | Synovectomy and debridement..... | 6 | 425.10 | 10 |
| # R512 | Excision of subacromial bursa (not to be claimed with R416, R593 or R594)..... | 6 | 211.60 | 7 |
| Muscle/fascia | | | | |
| # R522 | - simple..... | 6 | 193.00 | 6 |
| # R523 | - complex..... | 6 | 484.35 | 7 |
| # R416 | Rotator cuff exploration - includes acromioplasty, excision of coraco-acromial ligament and subacromial bursa but excludes simple excision of clavicle..... | 6 | 206.90 | 10 |
| Note: When R416 is rendered in association with R298, R416 is payable at 85% and R298 is payable at 100%. | | | | |

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

SHOULDER, ARM AND CHEST

Asst

Surg

Anae

RECONSTRUCTION

Pseudoarthrosis

| | | | | |
|--------|--|---|--------|---|
| # R329 | Clavicle | 6 | 269.10 | 6 |
| # R325 | Humerus | 6 | 346.15 | 6 |
| # R956 | Humerus - circular external fixation | 6 | 291.40 | 7 |

DEFORMITY

Osteotomy

| | | | | |
|--------|--|---|--------|---|
| # R260 | - humerus | 6 | 292.35 | 7 |
| # R298 | - clavicle | 6 | 211.60 | 7 |
| # R235 | - glenoid | 6 | 279.35 | 6 |
| # R957 | Single level correction - circular external fixation..... | 6 | 510.35 | 6 |
| # R958 | Double level correction - circular external fixation. | 6 | 638.40 | 6 |

Bone transport

| | | | | |
|--------|--|---|--------|---|
| # R959 | - circular external fixation (less than or equal to 6 cm)..... | 6 | 655.15 | 6 |
| # R960 | - circular external fixation (greater than 6 cm)..... | 6 | 763.80 | 6 |

Humeral lengthening

| | | | | |
|--------|--|---|--------|---|
| # R961 | - circular external fixation (less than or equal to 6 cm)..... | 6 | 438.00 | 6 |
| # R962 | - circular external fixation (greater than 6 cm)..... | 6 | 655.15 | 6 |

Note:

Reconstruction - Nerves - see Operations on the Nervous System.

RECONSTRUCTION

Muscles/soft tissues

| | | | | |
|--------|---|---|--------|---|
| # R527 | Muscle transplant - pectoralis major..... | 6 | 434.25 | 6 |
| # R353 | Scapulopexy congenital elevation | 6 | 385.15 | 6 |
| # R568 | Trapezius/sternomastoid transplant..... | 6 | 338.65 | 7 |
| # R589 | Tendon repair or release - biceps | 6 | 227.40 | 7 |
| # R685 | Tendon release with tenodesis - biceps..... | 6 | 314.60 | 7 |

Rotator cuff repair

| | | | | |
|--------|---|---|--------|----|
| # R593 | - simple, end-to-end or side-to-side (includes acromioplasty, excision of coraco-acromial ligament and subacromial bursa) | 6 | 345.35 | 10 |
| # R594 | - complex (includes implantation into bone, and as required, acromioplasty, excision of coraco-acromial ligament, subacromial bursa and excision of distal clavicle)..... | 6 | 498.30 | 10 |
| # E057 | - revision/repair following previous rotator cuff surgery, to R594add 30% | | | |

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

SHOULDER, ARM AND CHEST

| | Asst | Surg | Anae |
|---|------|-----------|---------|
| RELEASE | | | |
| # R521 Muscle/tendon (other than biceps) | 6 | 314.60 | 7 |
| # R526 Sternomastoid | 6 | 296.05 | 7 |
| REDUCTION | | | |
| Fractures | | | |
| Tuberosity | | | |
| # F047 - no reduction | | 67.80 | |
| # F048 - closed reduction | 6 | 117.85 | 6 |
| # F049 - open reduction (without cuff tear) | 6 | 290.55 | 6 |
| Neck without dislocation of head | | | |
| # F053 - no reduction | | 67.80 | |
| # F054 - closed reduction | | 133.60 | 6 |
| # F055 - open reduction | 6 | 327.55 | 6 |
| Neck with dislocation of head | | | |
| # F050 - no reduction | | 67.80 | |
| # F051 - closed reduction | 6 | 183.80 | 6 |
| # F052 - open reduction | 6 | 385.15 | 6 |
| Shaft | | | |
| # F042 - no reduction | | 67.80 | |
| # F043 - closed reduction | 6 | 147.60 | 6 |
| # F044 - open reduction | 6 | 323.05 | 6 |
| Clavicle | | | |
| UVC - no reduction | | visit.fee | |
| # F110 - closed reduction with anaesthetic | 6 | 62.20 | 7 |
| # F118 - open reduction | 6 | 300.00 | 7 |
| Scapula | | | |
| # F119 - no reduction | | 67.80 | |
| # F121 - open reduction | 6 | 242.25 | 6 |
| Sternum | | | |
| # F123 - closed reduction | | 115.95 | |
| # F124 - open reduction - pleura open (see General Preamble GP8) | 9 | I.C | 13 |
| # F125 - pleura closed (see General Preamble GP8) | 6 | I.C | 6 |
| Ribs | | | |
| UVC - no reduction | | visit.fee | |
| # F131 - pleura closed (see General Preamble GP8) | 6 | I.C | 6 |
| Dislocations | | | |
| Acromio-clavicular/sterno-clavicular | | | |
| # D014 - no reduction | | 67.80 | |
| # D025 - closed with anaesthetic | 6 | 134.55 | 6 |
| # D023 - open reduction | 6 | 231.10 | 7 |
| # R596 - late | 6 | 286.70 | 6 |
| Glenohumeral joint | | | |
| # D015 - closed reduction without anaesthetic | | 49.20 | |
| # D016 - closed reduction with anaesthetic | | 111.40 | 6 |
| # D017 - open reduction, early | 6 | 323.85 | 6 |
| # R472 - open reduction, late | 6 | 580.90 | 10 |
| # R401 - open reduction, recurrent | 6 | 379.50 | 10 |
| # E058 - revision/repair following previous glenohumeral joint surgery, to R401 | | | add 30% |

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

SKULL AND MANDIBLE

| | Asst | Surg | Anae |
|--|------|--------|------|
| ARTHROPLASTY | | | |
| # R433 Temporomandibular joint - unilateral..... | 6 | 349.30 | 10 |
| BIOPSY | | | |
| Bone | | | |
| # Z869 - punch, simple..... | | 48.50 | 7 |
| # Z870 - punch, x-ray control | | 120.70 | 6 |
| # Z242 - open | 6 | 193.00 | 7 |
| INCISION AND DRAINAGE | | | |
| # Z234 Mandibular sequestrectomy..... | 7 | 281.25 | 7 |
| EXCISION | | | |
| # R272 Bone - tumour (see General Preamble GP8) | I.C | I.C | I.C |
| # R278 Maxilla, with exenteration of orbit and skin graft..... | 6 | 532.95 | 7 |
| # R279 Maxilla advancement..... | 6 | 440.15 | 8 |
| # R280 Mandible | 6 | 353.10 | 7 |
| # R284 Mandibular condyle..... | 6 | 276.55 | 7 |
| # R428 Temporomandibular meniscectomy..... | 6 | 249.75 | 7 |
| RECONSTRUCTION | | | |
| Facial paralysis | | | |
| # R531 - static slings | 6 | 307.15 | 6 |
| # R532 - dynamic slings | 6 | 399.00 | 6 |
| # R533 Composite repair for facial paralysis, plication of paralyzed muscles, and resection for paralysis of over active muscles | 6 | 511.90 | 7 |
| # E597 - with meloplasty | | 87.05 | |

Note:

Claims for R533 will be assessed by the *Medical Consultant*.

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

SKULL AND MANDIBLE

Asst

Surg

Anae

ORTHOGNATHIC SURGERY

Anterior dento-alveolar osteotomy, maxilla or mandible

| | | | | |
|--------|----------------------|---|--------|----|
| # R382 | - one segment | 6 | 803.80 | 15 |
| # R383 | - two segments | 6 | 932.10 | 15 |

Posterior dento-alveolar osteotomy, maxilla

| | | | | |
|--------|---------------------------------------|---|---------|----|
| # R349 | - one side | 6 | 803.80 | 15 |
| # R351 | - both sides, single segment | 6 | 932.10 | 15 |
| # R385 | - both sides, separate segments | 6 | 1187.50 | 15 |

Posterior dento-alveolar osteotomy, mandible

| | | | | |
|--------|--------------------|---|---------|----|
| # R462 | - one side | 6 | 803.80 | 15 |
| # R463 | - both sides | 6 | 1187.50 | 15 |

Total U dento-alveolar osteotomy

| | | | | |
|--------|---|---|---------|----|
| # R502 | - mandible | 6 | 1228.70 | 15 |
| # R507 | - maxilla | 6 | 1315.70 | 15 |
| # R511 | Mandibular or maxillary visor osteotomy for alveolar hypoplasia | 6 | 1146.40 | 15 |

Genioplasty

| | | | | |
|--------|--|---|--------|----|
| # R386 | - one segment | 6 | 384.60 | 10 |
| # R387 | - two segments, or for laterognathia | 6 | 575.45 | 10 |
| # R388 | - three segments | 6 | 767.85 | 10 |

Mandibular osteotomies for prognathism

| | | | | |
|--------|------------------------|---|--------|----|
| # R480 | - subcondylar | 6 | 420.10 | 7 |
| # R384 | - vertical ramus | 6 | 932.10 | 15 |
| # R518 | - sagittal split | 6 | 932.10 | 15 |

Mandibular osteotomies for retrognathia, any technique

| | | | | |
|--------|--|---|---------|----|
| # R520 | - advancement - up to 10 mm | 6 | 932.10 | 15 |
| # R529 | - advancement - 10 to 20 mm, inclusive | 6 | 1058.40 | 15 |
| # R535 | - advancement - greater than 20 mm | 6 | 1356.90 | 15 |
| # E588 | - for apertognathia or laterognathia | | 256.40 | |

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

SKULL AND MANDIBLE

| | Asst | Surg | Anae |
|---|------|---------|------|
| ORTHOGNATHIC SURGERY | | | |
| LeFort I advancement | | | |
| # R379 - in one segment | 10 | 803.80 | 20 |
| # E961 - in two segments..... add | | 296.60 | |
| # E962 - in three segments | | 594.20 | |
| LeFort I intrusion | | | |
| # R538 - in one segment | 10 | 1059.35 | 20 |
| # E963 - in two segments..... add | | 296.60 | |
| # E964 - in three segment..... add | | 594.20 | |
| LeFort I extrusion | | | |
| # R567 - in one segment* | 10 | 1315.70 | 20 |
| # E965 - in two segments..... add | | 296.60 | |
| # E966 - in three segments | | 594.20 | |
| LeFort I cleft palate | | | |
| # R580 - in one segment* | 10 | 1525.30 | 20 |
| # E967 - in two segments..... add | | 256.40 | |
| # E968 - in three segments | | 511.90 | |
| # E969 - with SMR | | 204.80 | |
| # E970 - with pharyngoplasty | | 307.15 | |
| # E971 - with closure alveolar fistula with or without bone graft | | 383.65 | |
| # E972 - with closure hard palate fistula with or without bone graft | | 511.90 | |
| # R588 Naso-maxillary osteotomy without LeFort I* | 6 | 803.80 | 15 |
| # R389 LeFort II maxillary osteotomy and advancement* | 10 | 1443.95 | 20 |
| # R395 Construction glenoid fossa and zygomatic arch* (Obwegeser technique) | 10 | 1402.75 | 20 |
| # R396 Construction absent condyle and ascending ramus* | 6 | 803.80 | 10 |
| # R609 Combined LeFort I and LeFort III osteotomy in hemifacial microsomia..... | 10 | 1586.20 | 20 |
| # R145 Mandibular condylotomy..... | 6 | 204.80 | 7 |
| # R618 Coronoidotomy | 6 | 204.80 | 7 |
| # R644 Coronoidectomy..... | 6 | 307.15 | 6 |

Note:

* Includes harvesting and grafting of bone or cartilage grafts.

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

SKULL AND MANDIBLE

Asst

Surg

Anae

ORTHOGNATHIC SURGERY

Reconstruction mandible with bone grafts* and/or plate or prosthesis.

Unilateral

| | | | | |
|--------|------------------|---|--------|----|
| # R334 | - partial | 6 | 409.55 | 15 |
| # R335 | - complete | 6 | 819.15 | 15 |

Bilateral

| | | | | |
|--------|------------------|---|---------|----|
| # R645 | - partial | 6 | 819.15 | 15 |
| # R646 | - complete | 6 | 1023.95 | 15 |

Oral vestibuloplasty

| | | | | |
|--------|---------------------------------------|---|--------|---|
| # R647 | - with secondary epithelization | 6 | 204.80 | 6 |
| # R648 | - with skin graft | 6 | 307.15 | 6 |

Temporomandibular ankylosis

| | | | | |
|--------|---|---|--------|----|
| # R649 | - excision bone or fibrous block..... | 6 | 461.30 | 7 |
| # R650 | - with insertion of prosthetic device or muscle flap..... | 6 | 511.90 | 13 |
| # R651 | - with construction of condyle and ascending ramus* | 6 | 666.00 | 15 |

Onlay bone grafts or alloplastic reconstruction to face when not part of standard osteotomy for reconstruction

Mandible

| | | | | |
|--------|--------------------|--|--------|--|
| # Z253 | - unilateral | | 394.80 | |
| # Z254 | - bilateral | | 507.45 | |

Maxilla

| | | | | |
|--------|--------------------|--|--------|--|
| # Z255 | - unilateral | | 394.80 | |
| # Z256 | - bilateral | | 507.45 | |

Zygoma

| | | | | |
|--------|--------------------|--|--------|--|
| # Z257 | - unilateral | | 337.85 | |
| # Z258 | - bilateral | | 450.50 | |

Temporal

| | | | | |
|--------|--------------------|--|--------|--|
| # Z259 | - unilateral | | 450.50 | |
| # Z260 | - bilateral | | 563.10 | |

Frontal

| | | | | |
|--------|--------------------|--|--------|--|
| # Z261 | - unilateral | | 450.50 | |
| # Z262 | - bilateral | | 563.10 | |

Note:

For Z253 to Z262, services described as harvesting and/or use of homogenous bone grafts may be claimed in addition. See page N3 for the appropriate listing(s).

[Commentary:

Alloplastic materials include high density polyethylene, titanium mesh, resorbable mesh plus composites, calcium phosphate bone cements and other materials.]

Application of dental arch bars, or splint, for facial osteotomy

| | | | | |
|--------|--|---|--------|---|
| # Z239 | - one arch bar..... | 6 | 133.00 | 6 |
| # Z240 | - two arch bars | 6 | 204.80 | 7 |
| # R354 | Interdental wiring for temporomandibular joint disorder..... | 6 | 154.00 | 7 |
| # R652 | - Removal intermaxillary fixation devices under general anaesthesia - as sole procedure..... | | 102.35 | 6 |

Note:

* Includes harvesting and grafting of bone or cartilage grafts.

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

SKULL AND MANDIBLE

| | | Asst | Surg | Anae |
|---|---|------|---------|------|
| ORBITO-CRANIAL SURGERY | | | | |
| Bilateral periorbital correction Treacher-Collins Syndrome | | | | |
| # R390 | - with or without bone grafts* (extra-cranial)..... | 10 | 1699.45 | 20 |
| # R653 | - with skull and muscle transpositions* (includes skull reconstruction) (intracranial)..... | 10 | 2196.35 | 25 |
| Pericranial flap to orbit or face | | | | |
| # R654 | - unilateral | | 307.15 | 6 |
| E973 | - when in conjunction with coronal approach for main operation | | 178.90 | |
| # R655 | - bilateral | | 409.55 | 7 |
| # E974 | - when in conjunction with coronal approach for main operation | | 297.55 | |
| # R378 | LeFort III total maxillary advancement* | 12 | 2037.35 | 25 |
| # R656 | LeFort III and subcranial hypertelorism correction* | 12 | 2590.35 | 25 |
| # R657 | LeFort III and LeFort I maxillary advancement* | 12 | 2334.85 | 25 |
| # R658 | LeFort II, subcranial hypertelorism correction Le Fort I maxillary advancement* | 12 | 2928.10 | 25 |
| Upper LeFort III advancement without occlusal change* | | | | |
| # R659 | - unilateral | 6 | 932.10 | 10 |
| # R675 | - bilateral | 12 | 1443.95 | 25 |
| Forehead advancement (bone grafts not included) | | | | |
| # R676 | - unilateral | 12 | 1187.50 | 25 |
| # R393 | - bilateral | 12 | 1443.95 | 25 |
| # R394 | Cranial vault reshaping* - anterior or posterior half | 10 | 1525.30 | 20 |
| # R677 | Total cranial vault reshaping* | 12 | 2078.35 | 25 |
| Medial transnasal canthopexy | | | | |
| # R398 | - unilateral | 6 | 414.30 | 6 |
| # E557 | - when done in conjunction with another procedure | | 154.00 | |

Note:

* Includes harvesting and grafting of bone or cartilage grafts.

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

SKULL AND MANDIBLE

Asst

Surg

Anae

ORBITO-CRANIAL SURGERY

Lateral canthoplasty

| | | | | |
|--------|---|---|--------|---|
| # R399 | unilateral | 6 | 204.80 | 6 |
| # E930 | - when done in conjunction with another procedure | | 102.35 | |

Hypertelorism correction

| | | | | |
|--------|--|----|---------|----|
| # R376 | - intracranial approach* | 12 | 2334.85 | 25 |
| # R377 | - subcranial U osteotomies* | 12 | 1950.15 | 25 |
| # R678 | - medial orbital wall osteotomies* | 10 | 1228.70 | 20 |
| # R679 | - medial and lateral orbital wall osteotomies* | 10 | 1612.30 | 20 |

Orbital dystopia*

| | | | | |
|--------|-------------------------------|----|---------|----|
| # R391 | - intracranial approach | 12 | 1950.15 | 25 |
| # R392 | - extracranial approach | 10 | 1485.10 | 20 |

Orbital cranial osteotomy*

| | | | | |
|--------|-------------------------------|----|---------|----|
| # R380 | - intracranial approach | 12 | 1495.50 | 25 |
|--------|-------------------------------|----|---------|----|

Note:

Claims for R380 with N153 rendered for the same patient should be submitted using the manual review indicator and accompanied by supporting documentation.

| | | | | |
|--------|-------------------------------|----|---------|----|
| # R381 | - extracranial approach | 10 | 1121.50 | 20 |
|--------|-------------------------------|----|---------|----|

Late correction traumatic enophthalmos

Tessier Technique - total periorbital stripping and bone grafts.

| | | | | |
|--------|----------------------|----|---------|----|
| # R680 | - intracranial | 12 | 1997.05 | 25 |
| # R681 | - extracranial | 10 | 1443.95 | 20 |

Harvesting of bone graft when not included

| | | | | |
|--------|------------------------|--|--------|--|
| # Z263 | Iliac bone graft | | 102.35 | |
|--------|------------------------|--|--------|--|

Rib graft

| | | | | |
|--------|-----------------------------|--|--------|--|
| # Z264 | - one rib | | 154.00 | |
| # E975 | - each subsequent rib | | 76.50 | |

Costochondral or chondral graft

| | | | | |
|--------|-----------------------------|--|--------|--|
| # Z265 | - one rib | | 230.65 | |
| # E976 | - each subsequent rib | | 154.00 | |
| # Z266 | - split cranial graft | | 204.80 | |

Note:

* Includes harvesting and grafting of bone or cartilage grafts.

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

SKULL AND MANDIBLE

Asst

Surg

Anae

SURGERY FOR CORRECTION OF DOWN'S SYNDROME FACIAL STIGMATA

Augmentation of zygoma (bilateral)

| | | |
|--------|---|--------|
| # Z267 | - with prosthetic implant | 184.60 |
| # Z268 | - with autogenous bone or cartilage*..... | 230.65 |

Augmentation of chin

| | | |
|--------|---|--------|
| # Z269 | - with prosthetic implant | 154.00 |
| # Z270 | - with autogenous bone or cartilage*..... | 189.45 |
| # Z271 | Horizontal resection, red lower lip..... | 184.60 |

Note:

* Includes harvesting and grafting of bone or cartilage grafts.

Bicoronal flaps

| | | |
|------|-----------------------|--------|
| R347 | Bicoronal flaps | 200.00 |
|------|-----------------------|--------|

Note:

R347 requires elevation of bicoronal flaps with exposure of the upper half facial skeleton and subsequent closure and re-suspension of soft tissues.

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

SKULL AND MANDIBLE

Asst

Surg

Anae

REDUCTION

Fractures

Orbit - open reduction rim/wall fracture

| | | | | |
|--------|--|---|--------|---|
| # E173 | Zygomatic fracture dislocation | 6 | 594.70 | 7 |
| # E933 | - with miniplate(s)**, per major fracture line | | 99.85 | |
| # E934 | - with primary bone graft (separate site) | | 204.80 | |

Orbit

| | | | | |
|--------|---|---|--------|---|
| # E174 | - blowout fracture of floor | 6 | 667.00 | 7 |
| # E934 | - with primary bone graft (separate site) | | 204.80 | |

Nasal bones - to include manipulation of nasal septum

| | | | | |
|--------|--|--|--------|----|
| # F136 | - closed reduction | | 102.35 | 6 |
| # F137 | - open reduction | | 316.35 | 10 |
| # E825 | - with miniplate(s)**, per major fracture line | | 63.95 | |

Orbit with maxilla

| | | | | |
|--------|--|---|--------|---|
| # F150 | - closed reduction and dental wiring | | 256.40 | 7 |
| # F142 | - with wiring and local fixation | 6 | 685.20 | 7 |
| # E830 | - with miniplate(s)**, per major fracture line | | 107.20 | |
| # E932 | - unilateral | | 205.00 | |
| # E935 | - bilateral | | 307.70 | |

Note:

E932, E934, and E935 are not to be billed with Z263, Z264, Z265, Z266, E975, or E976.

Midface fractures

Application of craniofacial suspension wires and external fixation devices (not to be billed in addition to maxillary repair).

| | | | | |
|--------|---|---|---------|----|
| # F143 | - middle ¼ facial | 6 | 577.65 | 8 |
| # E830 | - with mini-plate(s)**, per major fracture line | | 107.20 | |
| # F144 | - cranial-facial separation | 6 | 1594.90 | 10 |
| # E830 | - with mini-plate(s)**, per major fracture line | | 107.20 | |

Note:

** Where mini-plate(s) are used, one mini-plate fee per each major fracture line (e.g. infraorbital, malar-zygomatic, nasal-frontal, LeFort I, LeFort II and III) (per major fracture line per side) should be billed.

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

SKULL AND MANDIBLE

| | | Asst | Surg | Anae |
|--|--|------|-----------|------|
| Mandible | | | | |
| UVC | - no reduction | | visit fee | |
| # F138 | - closed reduction, includes maxillary-mandibular fixation | 6 | 350.00 | 7 |
| Note: Maxillary-mandibular fixation includes any external fixation technique. | | | | |
| # F139 | - open reduction, per fracture, to include intermaxillary fixation | 6 | 575.00 | 6 |
| # E828 | - rigid internal fixation, any method, to F139.....add | | 104.00 | |
| Note: Rigid internal fixation <i>may include</i> the use of a miniplate(s), or other internal fixation device(s). | | | | |
| Payment rules: | | | | |
| 1. E828 is limited to one service for each major fracture line (e.g. infraorbital, malar zygomatic, nasal-frontal, LeFort I, LeFort II and III) when a mini-plate is used. | | | | |
| 2. Z239, Z240, R652 or D062 are <i>not eligible for payment</i> in addition to F138 or F139. | | | | |
| # F140 | - removal of intermaxillary fixation device(s) | | 100.00 | |
| Payment rules: | | | | |
| 1. A maximum of one F140 is eligible for payment per patient per <i>day</i> . | | | | |
| 2. F140 is <i>not eligible for payment</i> in addition to F138 or F139. | | | | |
| [Commentary: For removal of intermaxillary fixation devices under <i>general anaesthesia</i> , see R652.] | | | | |
| # F146 | - complicated (see General Preamble GP8) | I.C | I.C | I.C |
| Dislocations | | | | |
| Temporomandibular joint | | | | |
| # D062 | - closed reduction | | 51.65 | 6 |
| # D063 | - open reduction | 6 | 256.40 | 7 |

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

PELVIS AND HIP

| | Asst | Surg | Anae |
|---|------|---------|------|
| AMPUTATION | | | |
| # R631 Hemipelvectomy - hindquarter | 10 | 796.20 | 15 |
| # R630 Hip disarticulation | 10 | 449.20 | 10 |
| ARTHRODESIS | | | |
| # R469 Sacro-iliac joint | 6 | 395.25 | 7 |
| # R514 Symphysis pubis..... | 6 | 387.00 | 7 |
| # R470 Hip | 6 | 703.45 | 8 |
| ARTHROPLASTY | | | |
| # R439 Unipolar | 6 | 490.95 | 10 |
| # R440 Total hip replacement - acetabulum and femur..... | 8 | 696.00 | 10 |
| # R553 Total hip replacement with take down of fusion | 8 | 972.90 | 15 |
| Revision total arthroplasty hip - one or both components | | | |
| # R241 - acetabular or femoral | 8 | 1304.80 | 15 |
| # E589 - bone graft to acetabulum | | 101.25 | |
| # E593 - acetabular reconstruction (extensive, including bone grafts)..... | | 194.00 | |
| # R481 Reattachment of greater trochanter (late)..... | 6 | 290.55 | 8 |
| Removal only | | | |
| # R443 - non-cemented | 6 | 447.30 | 8 |
| # R488 - cemented | 6 | 557.75 | 8 |
| # R491 Replacement acetabular liner and/or femoral head | 8 | 353.25 | 10 |
| ARTHROSCOPY | | | |
| # R686 Hip arthroscopy set up, includes when rendered debridement, synovectomy, removal of loose body(ies) and/or screw, drilling of defect, microfracture, abrasion arthroplasty, and/or synovial biopsy | 6 | 669.80 | 10 |
| # E487 Resection of labrum, to R686 | | 240.00 | |
| # E488 Repair of labrum, to R686..... | | 350.00 | |
| # E482 Soft tissue capsular release without bone procedure, to R686..... | | 251.55 | |
| # E490 Osteochondroplasty (extensive bone and arthrofibrotic tissue removal requiring a minimum of 2 hours to resect), to R686..... | | 500.00 | |

Payment rules:

1. E487 is *not eligible for payment* in addition to E488.
2. Only one of E482 or E490 is eligible for payment same patient same *day*.
3. Osteochondroplasty requiring less than 2 hours is included in R686.

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

PELVIS AND HIP

| | Asst | Surg | Anae |
|---|------|--------|------|
| ARTHROTOMY | | | |
| # R547 Sacro-iliac joint | 6 | 290.55 | 7 |
| # R415 Hip - with removal of loose body..... | 6 | 301.60 | 7 |
| ASPIRATION/INJECTION | | | |
| See Diagnostic and Therapeutic Procedures - Injections and Infusions. | | | |
| # Z290 Hip - infant or child, under general anaesthesia | 6 | 63.95 | 6 |
| BIOPSY | | | |
| Bone | | | |
| Z212 - punch needle | | 89.70 | |
| # Z217 - under general anaesthetic | | 72.35 | 7 |
| # Z214 - open | 6 | 144.80 | 6 |
| Joint | | | |
| # R415 - open | 6 | 301.60 | 7 |
| Soft tissue | | | |
| # Z228 - open | | 97.35 | 6 |
| Z219 Muscle needle biopsy, soft tissue, per site..... | | 31.20 | |
| DENERVATION/DECOMPRESSION | | | |
| Exploration, decompression, division, excision, biopsy, neurolysis and/or transposition | | | |
| # N188 - minor nerve - including digital, cutaneous or lateral femoral cutaneous nerve .. | 6 | 153.70 | 7 |
| # N285 - major nerve - excluding carpal tunnel or ulnar nerve at elbow | 6 | 256.15 | 7 |
| # N177 Sciatic nerve in buttock..... | 6 | 430.75 | 7 |
| R427 Denervation of hip..... | 6 | 387.00 | 6 |
| Note: | | | |
| N188 or N285 when performed through the same incision as flexor tendon repairs R585 or E581 is an insured service payable at nil. | | | |
| INCISION AND DRAINAGE | | | |
| # R269 Bone | 6 | 290.55 | 7 |
| # Z226 Bursae/soft tissue | | 97.35 | 7 |
| # R415 Joint | 6 | 301.60 | 7 |
| # R249 Sequestrectomy..... | 6 | 379.50 | 7 |
| # R250 Saucerization and bone graft..... | 6 | 627.30 | 6 |
| EXAMINATION/MANIPULATION | | | |
| Z252 Manipulation - under general anaesthetic..... | | 39.00 | 6 |
| Note: | | | |
| Without general anaesthetic, see Diagnostic and Therapeutic Procedures - Physical Medicine. | | | |

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

PELVIS AND HIP

Asst

Surg

Anae

EXCISION

Bone

| | | | | |
|--------|--------------------------------|---|---------|---|
| # R639 | Simple cyst, etc..... | 6 | 338.75 | 7 |
| # R330 | Major resection tumour | 6 | 629.65 | 7 |
| # R216 | Radical resection tumour | 8 | 1007.35 | 8 |
| # F115 | Coccyx | 6 | 208.80 | 6 |
| # R315 | Head and neck, femur | 6 | 452.90 | 6 |

Muscle

| | | | | |
|--------|------------------|---|--------|---|
| # R522 | - simple..... | 6 | 193.00 | 6 |
| # R523 | - complex..... | 6 | 484.35 | 7 |
| # R524 | - myositis | 6 | 289.50 | 7 |

Joint

| | | | | |
|--------|-------------------------------|---|--------|---|
| # R423 | Synovectomy/debridement | 6 | 470.50 | 7 |
|--------|-------------------------------|---|--------|---|

Bursae

| | | | | |
|--------|-------------------------------|---|--------|---|
| # R590 | GT trochanteric/ischial | 6 | 201.40 | 7 |
|--------|-------------------------------|---|--------|---|

RECONSTRUCTION

Pseudoarthrosis

| | | | | |
|--------|--------------|---|--------|----|
| # R364 | Pelvis | 8 | 580.90 | 10 |
| # R328 | Hip | 6 | 477.90 | 6 |

Osteotomy

Pelvis

| | | | | |
|--------|----------------|---|--------|---|
| # R265 | - infant | 8 | 399.00 | 8 |
| # R273 | - other | 8 | 580.90 | 8 |
| # R263 | Hip | 6 | 539.15 | 7 |

Muscle/tendon

| | | | | |
|--------|---------------------|---|--------|---|
| # R521 | Muscle release..... | 6 | 314.60 | 7 |
|--------|---------------------|---|--------|---|

Tenotomy

| | | | | |
|--------|-------------------------|---|--------|---|
| # Z232 | - closed adductors..... | | 49.20 | 6 |
| # Z233 | - open adductors | | 97.35 | 7 |
| # R545 | - iliopsoas | 6 | 266.35 | 6 |

Tendon transfer

| | | | | |
|--------|----------------|---|--------|---|
| # R570 | Iliopsoas..... | 6 | 520.60 | 7 |
| # R569 | Abductor | 6 | 339.65 | 6 |

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

PELVIS AND HIP

Asst

Surg

Anae

REDUCTION

Fractures

Coccyx

| | | | | |
|--|---|---|-----------|----|
| UVC | - no reduction | | visit.fee | |
| # F115 | - excision | 6 | 208.80 | 6 |
| Pelvic ring | | | | |
| UVC | - no reduction | | visit.fee | |
| # F134 | - closed reduction | 6 | 442.45 | 6 |
| # F135 | - open reduction | 6 | 680.30 | 8 |
| Sacrum | | | | |
| UVC | - no reduction | | visit.fee | |
| Femoral neck trochanteric, subtrochanteric | | | | |
| UVC | - no reduction | | visit.fee | |
| # F098 | - closed reduction/traction | 6 | 426.90 | 6 |
| # F099 | - open reduction - pin only | 6 | 408.30 | 8 |
| # F100 | - open reduction - pin and plate/screws (cannulated included) | 6 | 498.95 | 10 |
| # F101 | - open reduction - primary prosthesis, femur only (includes Moore, Thompson, Unipolar, Bipolar) | 6 | 490.95 | 10 |
| # R600 | - delayed/staged graft | 6 | 289.50 | 8 |
| Slipped epiphysis | | | | |
| # R607 | - closed reduction/traction | 6 | 387.00 | 8 |
| # R642 | - closed reduction/internal fixation | 6 | 387.00 | 8 |
| # R627 | - open reduction/fixation | 6 | 580.90 | 8 |

Dislocations

Acetabulum

| | | | | |
|--------|---------------------------------------|---|-----------|----|
| UVC | - no reduction | | visit.fee | |
| # D052 | - open reduction - lips | 7 | 612.45 | 8 |
| # D046 | - open reduction - one pillar | 6 | 967.90 | 10 |
| # D047 | - open reduction - two pillars | 8 | 1451.45 | 12 |
| Hip | | | | |
| # D042 | - closed reduction | | 268.25 | 6 |
| # D043 | - open reduction | 7 | 406.45 | 7 |
| # R628 | - late, after four weeks - open | 7 | 774.90 | 10 |

Note:

May not be claimed with D042 at the same time.

Sacro-iliac

| | | | | |
|--------|--------------------------------------|---|--------|---|
| # D059 | - closed, traction, spica, etc | | 428.50 | 6 |
| # D060 | - open reduction | 6 | 593.00 | 6 |

Sacro-coccygeal

| | | | | |
|--------|---------------------------------|---|-----------|---|
| UVC | - closed reduction | | visit.fee | |
| # D061 | - open, removal of coccyx | 6 | 193.00 | 6 |

Congenital hip

| | | | | |
|--------|---|---|--------|---|
| # R404 | - closed reduction (includes tenotomy and cast) | | 190.20 | 7 |
| # R405 | - repeat (includes cast) | | 131.80 | 6 |
| # R406 | - open reduction (includes tenotomy and arthrotomy) | 7 | 472.35 | 7 |
| Z291 | - Application Pavlik Harness or C.D.H. Splint | | 24.10 | |

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

FEMUR

| | Asst | Surg | Anae |
|---|------|---------|------|
| AMPUTATION | | | |
| # R625 Gritti-Stokes or Callander..... | 6 | 305.25 | 7 |
| # R626 Through femur | 6 | 306.30 | 7 |
| BIOPSY | | | |
| Bone | | | |
| # Z869 - core, punch | | 48.50 | 7 |
| # Z870 - x-ray control/general anaesthetic..... | | 120.70 | 6 |
| # Z242 - open..... | 6 | 193.00 | 7 |
| Soft tissue | | | |
| # Z228 - open..... | | 97.35 | 6 |
| Z219 Muscle needle biopsy, soft tissue, per site..... | | 31.20 | |
| # R256 Injection into bone cysts | | 117.00 | |
| INCISION AND DRAINAGE | | | |
| # R242 Bone | 6 | 325.75 | 7 |
| # R245 Sequestrectomy..... | 6 | 395.25 | 7 |
| # R243 Saucerization and graft..... | 6 | 619.90 | 6 |
| # Z226 Soft tissue | | 97.35 | 7 |
| EXCISION | | | |
| Bone | | | |
| # R314 Simple cyst/exostosis | 6 | 225.50 | 6 |
| Bone tumour | | | |
| # R330 - simple..... | 6 | 629.65 | 7 |
| # R216 - with reconstruction/graft..... | 8 | 1007.35 | 8 |
| Muscle | | | |
| # R522 - simple..... | 6 | 193.00 | 6 |
| # R523 - complex..... | 6 | 484.35 | 7 |
| RECONSTRUCTION | | | |
| Fascial | | | |
| # R632 - simple..... | 6 | 193.00 | 7 |
| # R633 - complex with or without synthetic graft or rotation flap | 6 | 402.75 | 7 |
| Pseudoarthrosis | | | |
| # E048 - intramedullary nail with distal and proximal locking screws - femuradd | | 108.75 | |
| # R328 Bone graft with or without external fixation | 6 | 477.90 | 6 |
| # R967 Circular external fixation | 6 | 291.40 | 6 |

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

FEMUR

Asst

Surg

Anae

RECONSTRUCTION

Deformity

| | | | | |
|--------|---|---|--------|---|
| # R262 | Osteotomy femoral shaft..... | 6 | 532.65 | 6 |
| # R215 | Osteotomy supracondylar..... | 6 | 387.00 | 6 |
| # R963 | Single level correction - circular external fixation..... | 6 | 638.40 | 7 |
| # R964 | Double level correction - circular external fixation | 6 | 798.10 | 6 |
| # R965 | Bone transport - circular external fixation (less than or equal to 6 cm)..... | 6 | 655.15 | 6 |
| # R966 | Bone transport - circular external fixation (greater than 6 cm)..... | 6 | 763.80 | 6 |

Leg length discrepancy

| | | | | |
|--------|--|---|--------|---|
| # R333 | Femoral shortening..... | 6 | 480.70 | 6 |
| # R332 | Femoral lengthening..... | 6 | 541.95 | 6 |
| # R968 | Lengthening with circular external fixation (less than or equal to 6 cm) | 6 | 546.55 | 6 |
| # R969 | Lengthening with circular external fixation (greater than 6 cm) | 6 | 763.80 | 6 |
| # R340 | Femoral epiphysiodesis | 6 | 301.60 | 7 |
| # R341 | Tibial and femoral epiphysiodesis..... | 6 | 426.90 | 7 |
| # R343 | Femoral stapling | 6 | 313.65 | 7 |
| # R344 | Tibial and femoral stapling | 6 | 387.00 | 6 |

Muscles/tendons

Quadriceps repair

| | | | | |
|--------|---|---|--------|---|
| # R589 | - simple..... | 6 | 227.40 | 7 |
| # R587 | - reconstructive..... | 6 | 387.00 | 7 |
| # R530 | Quadricepsplasty - all types..... | 6 | 381.40 | 7 |
| # R561 | Ilio-tibial band..... | 6 | 190.10 | 6 |
| # Z197 | Closed release of ilio-tibial band..... | | 49.20 | 6 |

Tenotomy of hamstrings

| | | | | |
|--------|-----------------|---|--------|---|
| # R543 | - single..... | 6 | 168.85 | 7 |
| # R562 | - multiple..... | 6 | 193.00 | 6 |

Lengthening of hamstrings

| | | | | |
|--------|---------------------------------|---|--------|-----|
| # R557 | - single..... | 6 | 223.65 | 7 |
| # E050 | - each additional | | 77.05 | add |
| # R571 | Tendon or muscle transfer | 6 | 307.15 | 7 |
| # E049 | - each additional | | 87.20 | add |
| # R524 | Excision of myositis | 6 | 289.50 | 7 |

Fractures

No reduction

| | | | | |
|-----|---------------------------|--|--|-----------|
| UVC | - cast and bed rest | | | visit.fee |
|-----|---------------------------|--|--|-----------|

Closed reduction

| | | | | |
|--------|---------------------------------------|---|--------|---|
| F094 | - traction - infant or child..... | 6 | 258.00 | 6 |
| # F095 | - traction - adult or adolescent..... | 6 | 407.35 | 6 |
| # F097 | - cast | 6 | 258.90 | 6 |
| # F096 | - open reduction | 6 | 493.80 | 8 |

Femoral shaft/supracondylar

| | | | | |
|--------|---|--|--------|-----|
| # E048 | - intramedullary nail with distal and proximal locking screws - femur | | 108.75 | add |
|--------|---|--|--------|-----|

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

KNEE

| | Asst | Surg | Anae |
|--|------|---------|------|
| AMPUTATION | | | |
| # R625 Through knee - disarticulation | 6 | 305.25 | 7 |
| ARTHRODESIS | | | |
| # R468 Knee | 6 | 402.75 | 6 |
| ARTHROPLASTY | | | |
| # E564 - revision of arthroplasty.....add 35% | | | |
| # R509 Patellar arthroplasty..... | 6 | 241.60 | 7 |
| Hemiarthroplasty | | | |
| # R482 - single component (e.g. MacIntosh)..... | 6 | 351.70 | 6 |
| # R483 - double component (e.g. Marmar)..... | 8 | 619.90 | 7 |
| # R441 Total replacement/both compartments..... | 8 | 619.90 | 8 |
| # R248 Total knee replacement with take down of fusion | 8 | 838.00 | 8 |
| # R244 Revision total arthroplasty knee..... | 8 | 1174.30 | 8 |
| # E598 - with associated patellar replacement or patelloplasty, to R482, R483, R441, R248 or R244 | | 94.60 | |
| # R442 Replacement Liner..... | 8 | 353.25 | 8 |
| Claims submission instructions: | | | |
| When a unicondylar knee arthroplasty is revised to a total knee replacement without use of stems and/or augments, submit claim using R441 total replacement/both compartments. | | | |
| # R496 Removal of hemiarthroplasty - without replacement..... | 6 | 242.25 | 7 |
| # R497 Removal of total arthroplasty - without replacement..... | 6 | 368.40 | 6 |

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

KNEE

Asst

Surg

Anae

ARTHROSCOPY

| | | | | |
|--------|--|---|-------|---|
| # R687 | Knee arthroscopy set-up, includes when rendered synovial biopsy and/or resection or trimming of plica..... | 6 | 97.35 | 7 |
|--------|--|---|-------|---|

Note:

1. A knee procedure listed in the Knee section of the *Schedule* performed arthroscopically is eligible for payment in addition to R687 if that procedure is not described as a component of R687 or described by an E-add-on code to R687.
2. Arthroscopic E-add-on codes listed below are *not eligible for payment* in addition to R687 when the service described by the E-code is a generally accepted component of a procedure described in Note #1.
3. R687 is an *uninsured service* for arthroscopic lavage of the knee alone (without debridement) for osteoarthritis.

[Commentary:

1. Arthroscopic lavage of the knee alone (without debridement) is not recommended for any stage of osteoarthritis.
2. The routine use of debridement for treatment of osteoarthritis of the knee is not recommended by the Ontario Health Technology Advisory Committee (OHTAC). See <http://www.hqontario.ca/evidence/publications-and-ohtac-recommendations/ohtas-reports-and-ohtac-recommendations/arthroscopic-lavage-and-debridement>.]

| | | | |
|--------|--|-----|--------|
| # E476 | Removal of symptomatic loose body(ies) and/or screw, to R687 | add | 192.00 |
|--------|--|-----|--------|

Note:

Removal of iatrogenic loose body(ies) is *not eligible for payment*.

| | | | |
|--------|--------------------------------|-----|--------|
| # E491 | Lateral release, to R687 | add | 161.45 |
|--------|--------------------------------|-----|--------|

| | | | |
|--------|---|-----|--------|
| # E492 | Synovectomy - for diseased synovium, anterior, posterior or complete, to R687 | add | 231.30 |
|--------|---|-----|--------|

| | | | |
|--------|--|-----|--------|
| # E493 | Drilling of defect (includes removal of loose body(ies), to R687 | add | 251.55 |
|--------|--|-----|--------|

| | | | |
|--------|--|-----|--------|
| # E478 | Pinning of osteochondral fragment, to R687 | add | 251.55 |
|--------|--|-----|--------|

Note:

F-prefix fracture procedures are *not eligible for payment* with E478 for the same fracture.

| | | | |
|--------|--|-----|--------|
| # E494 | Debridement - 1 or more compartments, must include substantial debridement of pathologic articular cartilage and includes when rendered synovectomy, meniscal trimming and/or chondroplasty, to R687 | add | 299.00 |
|--------|--|-----|--------|

Payment rules:

E492 is *not eligible for payment* in addition to E494.

| | | | |
|--------|---|-----|--------|
| # E489 | Microfracture and/or abrasion arthroplasty, for osteoarthritic cartilage deficiency (includes removal of loose body(ies), to R687 | add | 250.00 |
|--------|---|-----|--------|

| | | | |
|--------|---|-----|--------|
| # E495 | Menisectomy, partial or total, for symptomatic meniscal tear, to R687 | add | 240.45 |
|--------|---|-----|--------|

| | | | |
|--------|---|-----|--------|
| # E496 | Repair medial or lateral meniscus, includes when rendered debridement of attachment site, to R687 | add | 336.65 |
|--------|---|-----|--------|

Note:

1. E495 is *not eligible for payment* in addition to E496 for the same meniscus.
2. Trimming of a meniscus does not constitute E495 or E496.
3. E489 and/or E494 are *not eligible for payment* in addition to E496 for debridement of attachment site.

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

KNEE

Asst

Surg

Anae

ARTHROTOMY

| | | | | |
|--------|---|---|--------|---|
| # R412 | Knee - with or without removal of loose body | 6 | 207.90 | 7 |
| # R413 | Osteochondritis dissecans with drilling and/or internal fixation..... | 6 | 267.25 | 7 |

ASPIRATION

See Diagnostic and Therapeutic Procedures - Injections or Infusions.

BIOPSY

Bone/joint

| | | | | |
|--------|----------------|---|--------|---|
| Z870 | - needle | | 120.70 | 6 |
| # Z242 | - open | 6 | 193.00 | 7 |

Soft tissue

| | | | | |
|--------|--|--|-------|---|
| # Z228 | - open | | 97.35 | 6 |
| Z219 | Muscle needle biopsy, soft tissue, per site..... | | 31.20 | |

DENERVATION/DECOMPRESSION

| | | | | |
|--------|------------------------------------|---|--------|---|
| # R426 | Denervation of knee..... | 6 | 258.00 | 7 |
| # N285 | Denervation of gastrocnemius | 6 | 256.15 | 7 |

INCISION AND DRAINAGE

| | | | | |
|--------|-------------------|---|--------|---|
| # Z226 | Soft tissue | | 97.35 | 7 |
| # R444 | Joint | 6 | 193.00 | 7 |

EXAMINATION/MANIPULATION

| | | | | |
|------|---|--|-------|---|
| Z222 | Manipulation - under general anaesthetic (see Surgical Preamble SP4). | | 24.10 | 6 |
|------|---|--|-------|---|

Note:

Without general anaesthetic, see Diagnostic and Therapeutic Procedures - Physical Medicine.

Excision

Baker's cyst

| | | | | |
|--------|--|---|--------|---|
| # R431 | - simple..... | 6 | 148.50 | 6 |
| # R434 | - extensive..... | 6 | 264.50 | 7 |
| # R501 | Cysts of meniscus..... | 6 | 126.25 | 6 |
| # R429 | Meniscectomy..... | 6 | 241.30 | 6 |
| # R417 | Debridement of joint without synovectomy | 6 | 290.55 | 7 |
| # R424 | Synovectomy | 6 | 430.65 | 7 |
| # R506 | Prepatellar bursae | 6 | 149.45 | 6 |
| # R312 | Patella - to include fascial repair..... | 6 | 276.55 | 7 |
| # R318 | Excision exostosis/cyst patella | 6 | 126.25 | 6 |

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

KNEE

Asst

Surg

Anae

RECONSTRUCTION

Meniscus

R508 Suturing of medial or lateral meniscus..... 6 242.25 7

Muscles/Tendons

Tenoplasty

R584 - one 6 144.80 7
 # E050 - each additional.....add 77.05

Suture of patellar or quadriceps tendon

R589 - early 6 227.40 7
 # R587 - late 6 387.00 7

Transplant of tendon

R571 - single..... 6 307.15 7
 # E049 - each additional.....add 87.20

Tenotomy

- closed

Z237 - one 49.20 6
 # Z238 - multiple..... 72.35 7

- open

R564 - one 6 232.00 7
 # R566 - multiple..... 6 253.30 6
 # R516 Release patellar retinaculum 6 161.45 7

Ligaments

R599 - simple - one 6 361.95 6
 # R542 - extensive ligament reconstruction (including synthetics) includes when rendered preparation of intracondyral notch 6 517.85 7
 # E059 - revision/repair following previous reconstruction of knee ligaments, to R542add 30%
 # R539 - removal of synthetics 6 213.45 7

REDUCTION

Fractures

Patella

F085 - no reduction 67.75
 # F087 - open reduction or excision with or without repair 6 275.65 7
 # F021 Osteochondral fracture - open reduction 6 392.40 7

Dislocations

Knee

D038 - closed reduction..... 207.90 6
 # D039 - open reduction 6 309.00 7

Patella

- closed reduction

D040 - without anaesthetic 62.20
 # D031 - with anaesthetic 97.35 6

- open reduction

D041 - early 290.55 7
 # R255 - late 6 484.35 7
 # R403 - repair recurrent dislocation (includes inspection of joint) 6 393.40 7
 # R515 Congenital dislocation - knee (open) 6 484.35 7

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

FIBULA AND TIBIA

| | Asst | Surg | Anae |
|--|------|-----------|------|
| AMPUTATION | | | |
| # R624 Tibia/fibula | 6 | 306.30 | 7 |
| BIOPSY | | | |
| Bone | | | |
| # Z870 - simple - punch..... | | 120.70 | 6 |
| # Z242 - open | 6 | 193.00 | 7 |
| Soft tissue | | | |
| # Z228 - open | | 97.35 | 6 |
| Z219 Muscle needle biopsy, soft tissue, per site..... | | 31.20 | |
| # R256 Injection into bone cysts | | 117.00 | |
| DECOMPRESSION/DENERVATION | | | |
| # R495 Decompression of fascial compartments..... | 6 | 320.20 | 7 |
| # Z783 Secondary closure | | 97.35 | 7 |
| # Z251 Catheter insertion | | 49.20 | |
| UVC Monitoring of pressure monitoring device..... | | visit.fee | |
| # N184 Decompression of posterior tibial or common perineal nerve..... | 6 | 165.20 | 7 |
| INCISION AND DRAINAGE | | | |
| # R237 Bone | 6 | 308.10 | 7 |
| # R239 Sequestrectomy..... | 6 | 329.40 | 7 |
| # R238 Saucerization and bone grafting..... | 6 | 411.20 | 7 |
| # Z226 Soft tissue | | 97.35 | 7 |
| EXCISION | | | |
| # R311 Exostosis/cyst..... | 6 | 201.40 | 6 |
| # R210 Fibular head..... | 6 | 193.00 | 7 |
| Tumour | | | |
| # R295 - simple..... | 6 | 289.50 | 7 |
| # R253 - extensive with repair | 6 | 648.20 | 6 |
| # R246 Excision bony ridge to include interpositional materials | 6 | 385.15 | 7 |
| Muscle/soft tissue | | | |
| # R522 - simple..... | 6 | 193.00 | 6 |
| # R523 - complex..... | 6 | 484.35 | 7 |

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

FIBULA AND TIBIA

| | Asst | Surg | Anae |
|--|------|--------|------|
| RECONSTRUCTION | | | |
| Pseudoarthrosis | | | |
| # E041 - intramedullary nail with distal and proximal locking screws - tibia add | | 81.55 | |
| # R326 Tibia/fibula..... | 6 | 348.00 | 6 |
| # R327 By-pass fibular graft..... | 6 | 341.45 | 6 |
| # R372 Congenital pseudoarthrosis..... | 6 | 484.35 | 6 |
| # R970 Circumferential external fixation..... | 6 | 291.40 | 6 |
| Deformity | | | |
| # R289 Osteotomy tibia and fibula - adult or child..... | 6 | 376.80 | 6 |
| # R971 Single level correction - circular external fixation..... | 6 | 510.35 | 6 |
| # R972 Double level correction - circular external fixation..... | 6 | 638.40 | 6 |
| Bone transport | | | |
| # R973 - circular external fixation (less than or equal to 6 cm)..... | 6 | 634.70 | 6 |
| # R974 - circular external fixation (greater than 6 cm)..... | 6 | 763.80 | 6 |
| # R403 Osteotomy repair recurrent dislocation (includes inspection of the joint)..... | 6 | 393.40 | 7 |
| Leg length discrepancy | | | |
| # R331 Tibial lengthening..... | 6 | 470.50 | 6 |
| # R458 Tibial shortening..... | 6 | 387.00 | 6 |
| # R341 Tibial and femoral epiphysiodesis..... | 6 | 426.90 | 7 |
| # R339 Tibial epiphysiodesis..... | 6 | 322.05 | 7 |
| Tibial stapling | | | |
| # R342 - one side..... | 6 | 193.00 | 7 |
| # R460 - both sides..... | 6 | 242.25 | 6 |
| # R344 Tibial and femoral stapling..... | 6 | 387.00 | 6 |
| # R975 Lengthening with circular external fixation (less than or equal to 6 cm)..... | 6 | 438.00 | 6 |
| # R976 Lengthening with circular external fixation (greater than 6 cm)..... | 6 | 655.15 | 6 |
| REDUCTION | | | |
| Fractures | | | |
| Tibia with or without fibula | | | |
| # F078 - no reduction, rigid immobilization..... | | 115.95 | |
| # F079 - closed reduction..... | 6 | 180.05 | 6 |
| # F080 - open reduction - shaft..... | 6 | 356.40 | 6 |
| Intramedullary nail with distal and proximal locking screws | | | |
| # E041 - tibia..... add | | 81.55 | |
| # F081 - medial or lateral tibial plateau..... | 6 | 394.45 | 6 |
| # E532 - both tibial plateaus, same knee..... add 50% | | | |
| Fibula | | | |
| # F082 - no reduction, rigid immobilization..... | | 67.75 | |
| # F083 - closed reduction..... | | 101.25 | 6 |
| # F084 - open reduction..... | 6 | 230.20 | 7 |

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

FOOT AND ANKLE

| | Asst | Surg | Anae |
|---|------|---------|------|
| AMPUTATION | | | |
| # R620 Metatarsal/phalanx disarticulation..... | 6 | 155.90 | 6 |
| # E585 - each additional.....add | | 47.30 | |
| # R621 Ray (single)..... | 6 | 217.15 | 6 |
| # R623 Symes..... | 6 | 285.80 | 7 |
| # R622 Transmetatarsal/transtarsal | 6 | 235.75 | 7 |
| # R619 Terminal Symes | 6 | 144.80 | 6 |
| ARTHRODESIS | | | |
| # R466 Ankle..... | 6 | 400.00 | 6 |
| # R552 - revision of arthrodesis | 6 | 506.65 | 7 |
| # R471 Interphalangeal..... | 6 | 151.85 | 6 |
| # E575 - each additional.....add | | 41.70 | |
| # R477 Metatarsophalangeal | 6 | 247.25 | 7 |
| # R695 Subtalar | 6 | 450.00 | 6 |
| # E511 - additional midtarsal(s), to R695 | | 100.00 | |
| # R696 Midtarsal, single joint | 6 | 500.00 | 6 |
| # E512 - additional midtarsal(s), to R696 | | 100.00 | |
| # R697 Metatarsal-tarsal (fusion of one or more joints) | 6 | 300.00 | 6 |
| # R475 Pan-talar, one stage..... | 6 | 626.45 | 6 |
| Note: | | | |
| 1. R695, R696, and R697 include any neurovascular exploration and/or protection and tenolysis, when rendered. | | | |
| 2. R696 is not payable in addition to R695 same patient, same day. | | | |
| ARTHROPLASTY | | | |
| # E564 - revision of arthroplasty.....add 35% | | | |
| # R493 Ankle - total replacement | 8 | 1177.50 | 10 |
| # R694 Ankle - liner replacement..... | 8 | 353.25 | 10 |
| Note: | | | |
| E564 is <i>not eligible for payment</i> with R694. | | | |
| # R479 Removal of prosthesis without replacement..... | 6 | 193.00 | 6 |
| Metatarsophalangeal interposition | | | |
| # R456 - single..... | 6 | 144.80 | 6 |
| # E538 - each additional.....add | | 38.00 | |
| # R453 Metatarsophalangeal (Swansons, etc.)..... | 6 | 289.50 | 7 |
| # R454 - multiple..... | 6 | 387.00 | 7 |
| # R500 Removal - prosthesis without replacement..... | 6 | 144.80 | 6 |

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

FOOT AND ANKLE

Asst

Surg

Anae

ARTHROSCOPY

| | | | | |
|--------|--|---|--------|---|
| # R688 | Ankle arthroscopy setup, includes when rendered debridement, synovectomy, removal of loose body(ies) and/or screw, drilling of defect or microfracture and/or synovial biopsy..... | 6 | 400.00 | 7 |
|--------|--|---|--------|---|

Note:

1. An ankle procedure listed in the Foot and Ankle section of the *Schedule* performed arthroscopically is eligible for payment in addition to R688 if that procedure is not described as a component of R688 or described by an E-add-on code to R688.
2. Arthroscopic E-add-on codes listed below are *not eligible for payment* in addition to R688 when the service described by the E-code is a generally accepted component of a procedure described in Note #1.

| | | | | |
|--------|--|--|--------|--|
| # E477 | Arthroscopy of subtalar and/or intratarsal joint(s), through separate portals, to R688 | | 192.00 | |
| | add | | | |
| # E478 | Pinning of osteochondral fragment, to R688 | | 251.55 | |
| | add | | | |

Note:

F-prefix fracture procedures are *not eligible for payment* with E478 for the same fracture.

| | | | | |
|--------|---|---|--------|---|
| # E481 | Osteochondroplasty (extensive bone and arthrofibrotic tissue removal requiring a minimum of 2 hours to resect), to R688 | | 500.00 | |
| | add | | | |
| # E483 | Synovectomy for inflammatory arthritis requiring a minimum of 90 minutes to resect, to R688 | | 326.55 | |
| | add | | | |
| # R689 | Excision of Os Trigonum (sole procedure) | 6 | 230.00 | 7 |

Payment rules:

1. Only one of E481 or E483 is eligible for payment same patient same *day*.
2. R688 is *not eligible for payment* in addition to R689.

ARTHROTOMY

Ankle

| | | | | |
|--------|------------------------------------|---|--------|---|
| # R503 | - removal of loose body, etc. | 6 | 167.10 | 6 |
| # E539 | - with osteotomy of malleolus..... | | 117.85 | |
| | add | | | |
| # R504 | Midtarsals | 6 | 144.80 | 7 |
| # R505 | Metatarsal/phalangeal | 6 | 144.80 | 6 |

ASPIRATION

See Diagnostic and Therapeutic Procedure - Injections or Infusions.

BIOPSY

Bone

Needle

| | | | | |
|--------|-----------------------------------|---|--------|---|
| Z869 | - punch | | 48.50 | 7 |
| # Z870 | - under general anaesthetic | | 120.70 | 6 |
| # Z242 | - open | 6 | 193.00 | 7 |

Joint

| | | | | |
|--------|--------------|--|--------|---|
| # R409 | - open | | 168.00 | 6 |
|--------|--------------|--|--------|---|

Soft tissue

| | | | | |
|--------|--|--|-------|---|
| # Z228 | - open | | 97.35 | 6 |
| Z219 | Muscle needle biopsy, soft tissue, per site..... | | 31.20 | |

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

FOOT AND ANKLE

| | | Asst | Surg | Anae |
|---|--|------|--------|------|
| INCISION AND DRAINAGE | | | | |
| # R220 | Bone | 6 | 227.40 | 7 |
| # Z226 | Bursae | | 97.35 | 7 |
| # R503 | Joints | 6 | 167.10 | 6 |
| # Z228 | Soft tissue - open | | 97.35 | 6 |
| # R201 | Sequestrectomy | 6 | 193.00 | 7 |
| # R202 | Saucerization and bone graft | 6 | 387.00 | 7 |
| EXAMINATION/MANIPULATION | | | | |
| Z222 | Manipulation - under general anaesthetic (see Surgical Preamble SP4) | | 24.10 | 6 |
| Note: Without general anaesthetic, see Diagnostic and Therapeutic Procedures - Physical Medicine. | | | | |
| Club foot, etc. - manipulation and cast/strapping | | | | |
| Z235 | - without anaesthetic | | 19.45 | |
| E584 | - application of plaster cast outside hospital | | 11.15 | |
| # Z224 | - with anaesthetic | | 39.00 | 6 |
| EXCISION | | | | |
| Bone | | | | |
| # R299 | Phalanx | 6 | 127.15 | 6 |
| # R309 | Metatarsal head | 6 | 175.45 | 6 |
| # E587 | - each additional | | 41.70 | |
| # R305 | Accessory navicular (scaphoid) | 6 | 155.90 | 6 |
| # R302 | Bunion/bunionette | 6 | 150.30 | 6 |
| # R307 | Calcaneal spur | 6 | 139.25 | 6 |
| # R282 | Exostosis (dorsal, subungual) | 6 | 100.15 | 6 |
| # R308 | Os calcis, talus | 6 | 283.95 | 7 |
| # R301 | Sesamoid, one or both | 6 | 142.00 | 6 |
| # R306 | Tarsal bar | 6 | 230.20 | 7 |
| # R266 | Tumour (foot) | 6 | 241.30 | 6 |
| Joint | | | | |
| # R420 | Ankle synovectomy | 6 | 273.75 | 7 |
| Metatarsophalangeal synovectomy | | | | |
| # R425 | - one | 6 | 226.40 | 6 |
| # R414 | - two or more | 6 | 339.65 | 7 |
| Soft Tissue | | | | |
| # R506 | Bursa | 6 | 149.45 | 6 |
| # R549 | Ganglion - simple or complex | 6 | 177.80 | 6 |
| # R576 | Excision of fascia for Dupuytren's (planter fibromatosis), one or more rays | 6 | 322.15 | 6 |
| # E831 | - use of skin grafts, or revision surgery (<i>with or without</i> skin grafts), to R549 or R576 | | | |
| | add 30% | | | |
| Payment rules: | | | | |
| 1. R576 is not payable for treatment of Dupuytren's by aponeurotomy. | | | | |
| 2. A maximum of one R576 is eligible for payment per limb, per day. | | | | |
| Note: | | | | |
| 1. Services listed under "Skin Flaps and Grafts" are <i>not eligible for payment</i> with R549 or R576. | | | | |
| 2. R576 and E831 include the plantar and digital components of the Dupuytren's procedure, when rendered. | | | | |
| Muscle | | | | |
| # R522 | - simple | 6 | 193.00 | 6 |
| # R523 | - complex | 6 | 484.35 | 7 |

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

FOOT AND ANKLE

| | | Asst | Surg | Anae |
|--|--|------|--------|------|
| RECONSTRUCTION | | | | |
| Pseudoarthrosis | | | | |
| # R363 | Malleoli..... | 6 | 296.05 | 7 |
| # R321 | Tarsals/metatarsals/phalanx | 6 | 260.75 | 7 |
| Deformity | | | | |
| Osteotomy | | | | |
| # R259 | - os calcis | 6 | 297.85 | 7 |
| # R276 | - metatarsals and phalanx..... | 6 | 144.80 | 7 |
| # E596 | - each additional..... add | | 41.70 | |
| # R277 | - midtarsal/tarsal..... | 6 | 242.25 | 7 |
| Shortening metatarsal | | | | |
| # R337 | - one | 6 | 225.50 | 6 |
| # R338 | - two or more | 6 | 272.80 | 7 |
| # R977 | Circular external fixation without osteotomy*..... | 6 | 583.75 | 6 |
| # R978 | Circular external fixation with osteotomy*..... | 6 | 729.45 | 6 |
| # R979 | Circular external fixation with multiple osteotomies*..... | 6 | 911.30 | 6 |
| Note: | | | | |
| * This requires the application of tibial apparatus. | | | | |
| Forefoot | | | | |
| # R430 | Claw and hammer toe..... | 6 | 151.25 | 6 |
| # E594 | - each additional hammer toe | | 41.70 | |
| Hallux Valgus | | | | |
| # R304 | - e.g. Mayo, Keller | 6 | 217.15 | 7 |
| # R355 | - e.g. Joplin, McBride | 6 | 267.25 | 7 |
| # R360 | Major forefoot reconstruction, must include the first MP joint and a minimum of 2 other MP joints | 6 | 459.45 | 7 |
| # R446 | Overlapping 5th toe | 6 | 136.35 | 7 |
| Club Foot | | | | |
| # R408 | Posterior or medial release..... | 6 | 312.70 | 7 |
| # R448 | Posteromedial release, lateral shortening, tendon transfers and fusion..... | 6 | 371.20 | 7 |
| # R313 | Complex reconstruction or revision of previous club foot repair (not to include simple tendon releases)..... | 6 | 468.65 | 6 |
| # R546 | Plantar fascia release (Steindler)..... | 6 | 165.20 | 6 |
| Ligaments | | | | |
| Ankle | | | | |
| # R597 | - one | 6 | 301.60 | 7 |
| # R548 | - extensive/multiple | 6 | 511.45 | 7 |

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

FOOT AND ANKLE

| | Asst | Surg | Anae |
|--|------|--------|------|
| Tendons | | | |
| # R640 Exploration - tendon sheath..... | 6 | 126.25 | 7 |
| Tenolysis - extensive release | | | |
| # R556 - one..... | 6 | 202.25 | 6 |
| # E599 - each additional digit..... add | | 87.20 | |
| Tendon transfer foot and ankle | | | |
| # R565 - single..... | 6 | 253.30 | 7 |
| # E055 - each additional..... add | | 94.60 | |
| # R572 Tenodesis..... | 6 | 258.90 | 7 |
| # R560 Graft..... | 6 | 253.30 | 6 |
| # E053 - each additional..... add | | 94.60 | |
| Lengthening or shortening | | | |
| # R557 - one..... | 6 | 223.65 | 7 |
| # E050 - each additional..... add | | 77.05 | |
| Suture extensor tendon | | | |
| # R578 - one..... | 6 | 164.10 | 7 |
| # E580 - each additional..... add | | 70.95 | |
| Suture flexor tendon | | | |
| # R585 - one..... | 6 | 307.60 | 7 |
| # E581 - each additional..... add | | 128.95 | |
| Achilles tendon repair | | | |
| # R589 - early..... | 6 | 227.40 | 7 |
| # R587 - late..... | 6 | 387.00 | 7 |
| Tenotomy - open | | | |
| # R579 - one toe..... | | 87.20 | 6 |
| # R581 - more than one toe..... | | 193.00 | 7 |
| Tenotomy - closed | | | |
| # Z229 - one toe..... | | 49.20 | 7 |
| # Z243 - more than one toe..... | | 97.35 | 7 |
| Achilles or tibialis anterior/posterior tenotomy | | | |
| # R544 - open..... | 6 | 171.70 | 7 |
| # R555 - closed..... | | 132.70 | 6 |

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

FOOT AND ANKLE

Asst

Surg

Anae

REDUCTION

Fractures

Ankle

| | | | | |
|--------|---|---|--------|---|
| # F074 | - no reduction - rigid immobilization | | 67.75 | |
| # F075 | - closed reduction..... | 6 | 144.80 | 6 |
| | - open reduction | | | |
| # F076 | - one malleolus..... | 6 | 237.50 | 7 |
| # F077 | - multiple malleoli or ligaments..... | 6 | 400.00 | 7 |

Ankle fracture with tibial Plafond burst

| | | | | |
|--------|-------------------------|---|--------|---|
| # F104 | - closed reduction..... | 6 | 242.25 | 6 |
| # F108 | - open reduction | 6 | 362.95 | 6 |

Metatarsus

| | | | | |
|--------|--|---|--------|---|
| F061 | - one or more..... | | 49.20 | |
| F062 | - with rigid immobilization | | 67.75 | |
| | - closed reduction | | | |
| F063 | - one or more..... | 6 | 98.35 | 6 |
| E584 | - application of plaster cast outside hospital | | 11.15 | |
| | - open reduction | | | |
| # F064 | - one | 6 | 178.20 | 7 |
| # F065 | - two or more | 6 | 249.65 | 7 |

Os calcis

| | | | | |
|--------|--|---|--------|---|
| F070 | - no reduction - rigid immobilization | | 97.35 | |
| F071 | - closed reduction..... | | 161.45 | 7 |
| E584 | - application of plaster cast outside hospital | | 11.15 | |
| | - open reduction | | | |
| # F072 | - with repair of both the subtalar and calcaneocuboid joints | 6 | 500.00 | 6 |

Phalanx

| | | | | |
|--------|--|---|--------|---|
| F056 | - no reduction - rigid immobilization | | 49.20 | |
| E584 | - application of plaster cast outside hospital | | 11.15 | |
| E560 | - each additional | | 12.05 | |
| F058 | - closed reduction - one..... | | 72.35 | 6 |
| E584 | - application of plaster cast outside hospital | | 11.15 | |
| E561 | - each additional | | 14.90 | |
| # F060 | - open reduction | 6 | 172.30 | 7 |

Tarsus excluding os calcis

| | | | | |
|--------|--|---|--------|---|
| F066 | - no reduction - rigid immobilization | | 98.10 | |
| F067 | - closed reduction..... | 6 | 165.20 | 6 |
| E584 | - application of plaster cast outside hospital | | 11.15 | |
| # F068 | - open reduction | 6 | 237.50 | 7 |

Intra-articular fracture - I.P. Joint

| | | | | |
|--------|--|---|--------|---|
| F057 | - closed reduction..... | | 77.95 | |
| E584 | - application of plaster cast outside hospital | | 11.15 | |
| # F059 | - open reduction | 6 | 144.80 | 7 |

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

FOOT AND ANKLE

Asst

Surg

Anae

REDUCTION

Dislocations

Ankle

| | | | | |
|--------|--|---|--------|---|
| # D035 | - closed reduction..... | 6 | 111.35 | 6 |
| # D036 | - open reduction | 6 | 252.45 | 7 |
| # R402 | - recurrent dislocation and/or subluxation | 6 | 367.45 | 7 |

Interphalangeal

| | | | | |
|--------|--|---|--------|---|
| D027 | - closed reduction..... | | 57.50 | 6 |
| E584 | - application of plaster cast outside hospital | | 11.15 | |
| E578 | - each additional | | 10.25 | |
| # D029 | - open reduction | 6 | 151.25 | 6 |

Metatarsophalangeal

| | | | | |
|--------|--|---|--------|---|
| D030 | - closed reduction..... | | 57.50 | 6 |
| E584 | - application of plaster cast outside hospital | | 11.15 | |
| E579 | - each additional | | 10.25 | |
| # D032 | - open reduction | 6 | 163.35 | 7 |

Tarsus

| | | | | |
|--------|--|---|--------|---|
| D033 | - closed reduction..... | | 147.60 | 6 |
| E584 | - application of plaster cast outside hospital | | 11.15 | |
| # D034 | - open reduction | 6 | 252.45 | 7 |

Tarso-metatarsal

| | | | | |
|------|--|---|--------|---|
| D026 | - closed reduction, one or more joints | | 147.60 | 6 |
| D028 | - open reduction, one joint..... | 6 | 300.00 | 6 |
| E508 | - each additional joint, to D028 | | 85.00 | |

[Commentary:

The applicable fracture service (i.e. F063, F065) may be eligible for payment when rendered in addition to D026 or D028.]

MUSCULOSKELETAL SYSTEM SURGICAL PROCEDURES

NOT ALLOCATED