CASTS, SPLINTS, AND STRAPPING

CPT CODES:

- 29000-29085 & 29305-29450: Casts
- 29105-29131 & 29505-29515: Splints
- 29200-29280 & 29520-29590: Strapping
- 29700-29799: Miscellaneous

INDICATIONS FOR USE:

- When a surgical procedure on the musculoskeletal system (20000-28899, 29800-29909) is performed and a cast, splint, or strapping is applied to the area of the procedure, there is no separate allowance for the initial application of the cast, splint, or strapping (29000-29550, 29590). However, there can be an additional allowance for cast supplies (Q4001-Q4051**).

- If cast application, splinting or strapping is provided as an initial procedure in which no surgical procedure is performed (e.g., casting of a sprained ankle or knee), use the appropriate level of E/M code and the code(s) for cast supplies (Q4001-Q4051**), if appropriate. Codes 29000-29550 and 29590 may not be used in this situation.

- Codes 29000-29550 and 29590 are payable when the cast, splint or strapping is a replacement which is medically necessary. Cast supplies may be billed separately if appropriate. A visit code on the day of reapplication could be separately billed and paid only if an unrelated problem was also addressed. In that situation, the –25 modifier should be added to the visit code and the diagnosis code should identify the unrelated condition(s).

The allowance for application of a cast, splint or strapping includes removal. Removal by the same physician or other physician in the same group should not be separately billed.

**Effective July 1st, 2002** the new temporary Q codes for cast and splint supplies (Q4001–Q4051) will be recognized by Medicaid.

COVERED DIAGNOSIS CODES:
Appropriate ICD-9CM code must accompany the claim to support the procedure being performed. (e.g. sprain, fracture, injury, or other appropriate code)

MC Carrier Manual
Coverage Issues Manual
MC Part B Podiatry Manual
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