Internal Medicine Coding Alert

On the Cutting Edge: This FAQ Gives You Unna Boot Ins and Outs

Catch this: CPT code 29580 has 0 global days

To find out the precise guidelines for coding your Unna boot procedures, check out this quick Q&A on using 29580 (Strapping; Unna boot).

Question: What is an Unna boot's purpose?

Answer: "An Unna boot is a dressing used to treat varicose ulcers of the lower extremities, which are due to increased venous pressure, venous insufficiency, or capillary dysfunction," according to National Government Services LCD L6979 (http://www.empiremedicare.com/newypolicy/policy/l6979_final.htm). It consists of a bandage impregnated with a gelatin, zinc oxide, and glycerin paste that the provider layers on the leg ulcer until the bandage becomes rigid.

"The resulting pressure and bacteriostatic properties assist in healing," the LCD states.

A provider may also use an Unna boot to manage lymphatic edema, sprains, strains, minor fractures -- "and as a protective bandage for grafts on burn wounds." Unna boots are not effective for ulcers resulting from arterial disease or diabetes.

Note: National Government Services, formerly Empire Medicare Services, is a Medicare carrier in downstate New York.

Question: Can I code separately for boot supplies?

Answer: You should never code for any Unna boot supplies. Payers include the cost of all Unna boot supplies (bandages, straps and paste) in their payment for 29580.

But while a patient is wearing the Unna boot, she will likely need the dressings changed every few days. You can report these services with 29580, which has a global period of zero days.


Question: What diagnoses prove medical necessity for Unna boots?

Answer: It will depend on the insurer, but most payers will cover 29580 when the patient has ailments such as lower-extremity ulcers (707.12-707.15) or postphlebitic syndrome (459.10-459.13).

Check out the following indications for Unna boot necessity, from LCD L6979.

The carrier covers placing an Unna Boot to treat "leg ulcers due to venous insufficiency" or non-healing ulcers caused by acquired or congenital microthromboses.

"For all payable places of service," the carrier will pay 29580 when a physician or nonphysician practitioner personally performs or applies the boot and bills under his/her own NPI. National Government Services will pay 29850 when an NPP
provides the service in an office setting under the incident-to provision.