



# Writers' Guild-Industry Health Fund

Willard L. Woods, Jr., Interim Administrator

July 23, 2013

Robert Kotler, M.D.  
436 N. Bedford Drive, Suite 201  
Beverly Hills, CA 90210

Participant:

Patient:

ID:

DOS: 12/13/12

Dear Dr. Kotler,

Your appeal has been referred to my attention for review and response. Your appeal is in regards to the denial of the procedure 30999 as it was considered incidental to the primary procedure.

When we received your appeal we sent all documents related to this case to an Independent Medical Consultant who is a practicing board certified ENT Surgeon who has not previously reviewed this case.

The Consultant made the specific comments about this case:

“Case Summary:

The patient is a 22 year old female who presented with bilateral nasal blockage unresponsive to medical management. The operative note dated 12/13/2012 indicates that the patient underwent septoplasty, turbinate reduction and insertion of intranasal prosthesis.

On review of the operative report and the appeal the ‘prosthesis’ is an ‘FDA approved airway safety device’ and not a nasal splint. The provider has submitted documentation regarding the device placed.

Issue: Advise if claim **30999** Undefined nasal code should be allowed in addition to **30520** septoplasty and **30130-50-51** bilateral inferior turbinate reduction. Yes.

The placement of the nasal airway device does not have a current CPT code. **30999** was used and was documented as a distinctly identifiable procedure.

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The operative note does clearly distinguish that the nasal airway device was placed using an FDA approved device for the indication of nasal airway patency post operatively. The device is not a standard splint or packing technique performed with septoplasty and turbinate reduction.”

**Therefore, the Fund will be allowing CPT 30999 due to the Medical Consultants review.**

We also reviewed the other procedures in regards to the reasonable and customary allowances (R&C) that were previously allowed. The Fund has found that the services for 30520 and 30130-50 are over R&C; however it appears that the correct allowances were not applied. We will be issuing an additional payment for these procedures also.

This claim has been sent back to the Claims Department to allow CPT 30999 and to allow additional payment on the other procedures.