



Case Study:

# Inappropriate Multi-coding (Orthopaedic Surgery)

## Case Details

- A patient in the late 20s presented with a 6-month history of bilateral hallux valgus, with worsening pain, affecting activities of daily living.
- Surgeon operated on both feet at the same sitting, submitting a MediShield Life claim with 4 TOSP codes.

## Claim Adjudication

- Case notes and supporting documents were requested from the doctor and medical institution.
- An independent Specialist Panel appointed by the MediShield Life Council reviewed the treatment and claim.

## Panel Findings and Decision

The Panel found that components of the provided treatment claimed were deemed to be inappropriate.

1. **2 x SB801B:** These should not have been coded for the surgery performed as it was adequately described by **SB732F** [Table 3C - *Foot, Hallux valgus/hammer toe, Proximal osteotomy, with or without soft tissue reconstruction*].
2. **2 x SA718S:** These should not have been separately coded as SB732F would be inclusive of soft tissue release.

## Key Learning Points

- Doctors should not claim multiple codes for individual surgical steps which are already part of a surgery described by a single TOSP code.
- Additional documentation may be required as evidence for the Panel's deliberation on the appropriateness of the treatment and MediShield Life claim.

## Summary of TOSP Codes

TOSP Codes Submitted by Doctor				Decision by Panel
S/n	Code	Description	Table	
1	SB801B	Bone (Lower limb), Deformities, Corrective Surgery with Internal Fixation with or without Fluoroscopy	5C	❌ Should code 2x SB732F instead
2	SB801B		5C	
4	SA718S	Soft tissue (Lower limb), Various lesions, Major release	4B	❌ Inappropriate
5	SA718S		4B	

- The total charges from inappropriate items or codes amounted to approximately \$20,000.
- Enforcement action will be taken against the doctor.
- Egregious or repeated non-compliances will lead to suspension or revocation of the doctor's MediSave and MediShield Life accreditation.