

Be Aware of the Newest CPT Code Changes to Ensure Proper Billing

New destruction codes and Mohs codes will change the way you bill many dermatologic procedures.

By Leon Kircik, MD

With the start of 2007, dermatologists unfortunately did not have much to celebrate in terms of reimbursement. Several changes initiated by CMS apply to all insurers. Despite a common perception among dermatologists that we can view private insurance as distinct from Medicare, all coding changes appear in the AMA CPT coding book and are standards we must follow. Ironically, not all private insurers follow Medicare guidelines.

Destruction Codes

The major changes in CPT coding for 2007 are for Mohs micrographic surgery and destruction codes. Until now we were using the same destruction codes (17000, 17003, 17004) for all premalignant (actinic keratosis) and benign lesions. As of January 1, the series 17000, 17003, 17004 is for destruction of precancerous lesions only (Table 1). In the past, we used codes 17110 and 17111 (Table 2) for the destruction of only molluscum and flat warts. Now, 17110 and 17111 will be used for all benign lesions, including irritated seborrheic keratosis, molluscum, all kinds of warts, except those with site specific codes, and any other benign lesions. The exception is cutaneous vascular proliferative lesions. The destruction codes for these lesions (17106, 17107, 17108; Table 3) will not change.

There are several reasons CMS changed these codes. The main reason

is over-utilization of the 17000 series for benign lesions. This does not mean inappropriate use, simply over-use. The change in CMS policy likely reflects efforts to save money and cut costs. In addition to the code changes, there was also a change in relative values. 17003 was subject to a modest decrease and 17004 to a significant decrease. 17110 will see a modest decrease, and 17111 will see a modest increase.

It is important to understand that there is no change in Medicare's policy of treating benign lesions. It still is not allowed to treat benign lesions, such as non-infected, non-inflamed SK (ICD-9 code 702.19). However, if you treat an inflamed SK by destruction, the correct code is now 17110, not 17000. If you treat more than 15 symptomatic SKs, use 17111. Remember to document clearly in the chart that lesions were symptomatic.

Also note that there is no change in coding for site-specific destruction (Tables 4,5,6). For example, if you treat genital condyloma on the penis, use existing site-specific destruction codes for the genital area. Consider the following:

Suppose you treat two AKs and 17 inflamed and irritated SKs. You would code:

CPT	Modifier	ICD-9 Code
17000	—*	702.0 (AK)
17003 x 1 unit	—*	702.0
17111	59	702.11 (Irritated SK)

If you freeze a condyloma on the penis and then freeze one AK on the face:

54056	—*	078.19 (Condyloma)
17000	—*	702.0

If you freeze 13 warts on a child, code:

17110	—	078.10
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All destruction code 17000 series includes all methods of destruction, cryosurgery, electrocautery, or laser. It is important to differentiate cryosurgery from cryotherapy (17340). Cryotherapy (17340; Table 7) is usually used to treat acne, either with liquid nitrogen or CO2 slush ice. It is not a destruction term and should not be used for destruction of AKs with liquid nitrogen (17000, 17003, 17004).

Suppose you treat a superficial basal cell carcinoma (lesion diameter 0f 1.2cm) on the back with cryosurgery. You would code:

17262	—	173.5 (BCC on back)
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Although you used cryosurgery, you should not use the 17000 codes. Code 17262 is for destruction of a malignant lesion by any method. Regardless of the destruction method, use the 172.. series depending on the size and location of the lesion.

Mohs Codes

All previous Mohs codes were deleted as of December 31, 2006. New codes are site-specific to identify treated

* Dr. Kircik uses modifier -59 for these billings.

[Coding Checklist]

areas. The biggest indication for Mohs micrographic surgery to treat skin cancers is in the head and neck location. Third-party payors will find it easier to match new site-specific CPT codes with site-specific ICD-9 coding.

New code 17311 is for Mohs micrographic surgery, first stage, for skin cancers on the head and neck, hands and feet, genitalia, or any location that directly involves a major muscle, cartilage, bone, tendon, major nerves or vessels. Like previous codes, it includes up to five specimens. 17312 applies to the same location for each additional stage, again to five specimens. 17313 is for first stage, up to five specimens, on the trunk, arms, and legs. 17314 is for each additional stage for these locations. 17315 is for each additional specimen after the first five specimens, for any stage and any location.

Table 1.

17000	Destruction of AK (premalignant lesion) by any method.
17003	Destruction of AK (premalignant lesion) by any method, 2nd thru 14 lesions.
17004	Destruction of AK (premalignant lesion) by any method, 15 or more lesions.

Table 2.

17110	Destruction of all benign lesions except cutaneous vascular proliferative lesions by any method up to 14 lesions.
17111	Destruction of all benign lesions except cutaneous vascular proliferative lesions by any method, 15 or more lesions.

Table 3.

17106	Destruction (e.g. laser) of cutaneous vascular proliferative lesion less than 10 sq. cm.
17107	Destruction (e.g. laser) of cutaneous vascular proliferative lesion less than 10-50 sq. cm.
17108	Destruction (e.g. laser) of cutaneous vascular proliferative lesion over 50 sq. cm.

Table 4.

56501	Destruction of lesions of vulva by any method (laser, cryosurgery, electrocautery, surgery).
56515	Extensive destruction.

It replaces code 17310. See Table 9. 17311 will have a modest reimbursement increase, and 17312 will have a significant reimbursement increase. 17313 will be subjected to a modest reimbursement decrease, and 17314 will have a significant reimbursement decrease.

Suppose you treat a BCC on the face with Mohs in two stages and then treat a recurrent BCC on the back with one stage. You would code:

CPT Coding	Modifier	ICD-9 Coding
17311	—	173.3 (BCC, face)
17312	—	173.3
17313	—	173.5 (BCC, the back)

If you treat a SCC on the nose with three stages, use:

17311	—	173.3 (SCC, the nose)
17312 x 2 units	—	173.3

If you treat an SCC on the ear and then a BCC on the right cheek, each in one stage:

17311	—	173.2 (SCC, the ear)
17311	59	173.3 (BCC, right cheek)

While in the past all Mohs surgery codes were modifier 51 exempt—they were not subject to multiple reduction rules—as of the writing of this article it is unclear whether that will remain the case in 2007. Most likely, third party payors will refuse to pay for locations other than the head and neck, genitalia, hands and feet by automatically denying CPT codes 17313 and 17314.

The problem with site-specific coding is that there is no CPT code or ICD-9 code reflecting that a lesion is recurrent or larger than 2.5cm in size or has ill-defined margins. Yet these are all indications for Mohs micrographic surgery. Therefore, we may have to provide records each time we perform Mohs micrographic surgery for those indications. ❏

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Section Editor

Table 5.

40820	Destruction of lesion or scar of vestibule of mouth by physical methods.
46900	Destruction of lesions, anus (condyloma, molluscum) chemically.
46910	Destruction of lesions, anus (condyloma, molluscum) electrodesiccation.
46916	Destruction of lesions, anus (condyloma, molluscum) cryosurgery.
46917	Destruction of lesions, anus (condyloma, molluscum) laser.
46924	Destruction of lesions, anus (condyloma, molluscum) by any method (laser, cryosurgery, chemically, electrodesiccation).

Table 6.

54050	Destruction of lesions, penis (condyloma, molluscum) simple, chemical.
54055	Destruction of lesions, penis (condyloma, molluscum) electrodesiccation.
54056	Destruction of lesions, penis (condyloma, molluscum) cryosurgery.
54057	Destruction of lesions, penis (condyloma, molluscum) laser.
54065	Destruction of lesions, penis (condyloma, molluscum) extensive by any method (laser, cryosurgery, chemically, electrodesiccation).

Table 7.

17340	Cryotherapy (CO ₂ slush, LN ₂) for acne.
17360	Chemical exfoliation for acne (eg, acne paste, acid)

Table 8.

17250	Chemical cauterization of granulation tissue.
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Table 9.

17311	Mohs micrographic surgery 1st stage up to 5 specimens for location of head and neck, hands and feet, genitalia or any location with surgery directly involving muscle, cartilage, bone, tendon, major nerves, or vessels.
17312	Mohs micrographic surgery each additional stage after 1st up to 5 specimens for location of head and neck, hands and feet, genitalia or any location with surgery directly involving muscle, cartilage, bone, tendon, major nerves, or vessels.
17313	Mohs micrographic surgery 1st stage up to 5 specimens for location of trunk, arms, and legs.
17314	Mohs micrographic surgery each additional stage after 1st up to 5 specimens for location of trunk, arms, and legs.
17315	Mohs micrographic surgery, any stage for additional specimens after first 5 specimens.