

Dermatology Coding Alert

Corrections

In "Don't Let Misuse of 99241-99275 Reduce Your Reimbursement" in the March 2004 issue of Dermatology Coding Alert, the sentence "If your dermatologist requests a consultation from an appropriate source" should have stated, "If your dermatologist received a consultation request from another appropriate source." Also, the example should have stated "The documentation you might see in your records would read, 'I have seen Jane Doe in consultation today at the request of Dr. Smith to evaluate the unresolved rash.'"

In the reader question "How should I code a dysplastic nevus on the body (trunk)?" in the April 2004 Dermatology Coding Alert, the answer to this reader questions states, "Although evidence suggests that melanoma can arise directly from AMs, dermatologists consider melanoma a benign neoplasm, and you should code it as such. Code to the specific site in ICD-9-CM Category 216."

However, given the uncertain behavior of lesions such as dysplastic nevi, reporting ICD-9-CM code 216 might not accurately reflect the nature of this type of lesion. Understanding that a dermatologist cannot determine a melanoma as benign or malignant until he sees the pathology report, you can report 239 (Neoplasms of unspecified nature) for an unspecified melanoma. If the melanoma is malignant, you should report 172 (Malignant melanoma of skin).