

Dermatology Coding Alert

CPT 2005 Brings New Level of Specificity and Pay to Wound Care Codes

Do away with 97601 for active wound care

Starting Jan. 1, you'll have two new codes to better describe the work and wound size for devitalized tissue procedures:

1. 97597 - Removal of devitalized tissue from wound(s), selective debridement, without anesthesia (e.g., high-pressure waterjet with/without suction, sharp selective debridement with scissors, scalpel and forceps), with or without topical application(s), wound assessment, and instruction(s) for ongoing care, may include use of a whirlpool, per session; total wound(s) surface area less than or equal to 20 square centimeters
2. 97598 - ... total wound(s) surface area greater than 20 square centimeters.

Typically, physicians perform this kind of debridement on diabetic wounds and pressure ulcers, says **Bruce Rappoport, MD, CPC**, a physician who works on compliance, documentation, coding and quality issues for Rachlin, Cohen & Holtz LLP, a Fort Lauderdale, Fla.-based accounting firm with healthcare expertise.

Extra: CMS created these codes primarily for use by the physical therapy community in cases dealing with wound debridement, says **Lisa Center, CPC**, quality coordinator with Freeman Health System in Joplin, Mo.

Despite the addition of these new codes, Center says, physicians should still use the appropriate debridement codes 11040-11044 when debriding ulcerations.

So Long, 97601

Codes 97597 and 97598 replace active wound-care code 97601 (Removal of devitalized tissue from wound[s]; selective debridement, without anesthesia [e.g., high-pressure waterjet, sharp selective debridement with scissors, scalpel and tweezers], including topical application[s], wound assessment, and instruction[s] for ongoing care, per session), which CPT deletes for 2005.

Watch for: CPT designed 97601 for nonphysician practitioner use, Rappoport says. CPT has not yet specified whether 97597 and 97598 are limited to physician use or whether other medical staff may also report the codes.

Codes Reflect Extra Physician Work

Because the new codes specify the wound's size, you can easily report smaller debridements (97597) separately from larger ones (97598), says **Marvel Hammer, RN, CPC, CHCO**, owner of MJH Consulting, a healthcare consulting firm in Denver.

Now, you have to assign 97601 for small and large debridements. To ensure payment for the extra work the large wound requires, you must attach modifier -22 (Unusual procedural services) to 97601 and submit supporting documentation, Hammer says.

The bottom line: Codes 97597 and 97598 allow physicians better compensation for their work. That's because Medicare assigns codes RVUs according to the amount of work the procedure requires, Hammer says. Therefore, if 97598 describes a large-wound debridement, you can expect more RVUs than Medicare assigns to 97601, which doesn't specify size.

Stop Worrying About Topical Applications

CPT has helped coders tremendously by including "with or without" topical applications in the descriptors, Hammer says.

Old problem: Your physician doesn't provide topical applications as part of the debridement. Established code 97601's definition states, "including topical application(s), wound assessment, and instruction(s)." Many coders didn't know this descriptor meant they couldn't report the code without topical application, or if they should attach modifier -52 (Reduced services).

New solution: The new codes now state "with or without topical application(s)," so you don't have to consider this method when choosing a code.

Know the Size Before You Know the Code

Before using 97597-97598, make sure your physician documents the wound's size. This critical information determines the codes you choose.

Remember that CPT specifies 97597 as representing wounds "less than or equal to 20 square centimeters," while 97598 describes wounds "greater than 20 square centimeters." Therefore, documentation that states the physician treated a "large wound" is too vague for you to correctly code the procedure.

Solution: Make sure the physician documents the exact dimensions of the wound in centimeters.