

Dermatology Coding Alert

Lesion Removals: 701.1 Is Your Best Bet for Porokeratotic Lesions

11055, 11420, or 17110? Your coding will depend on the method used.

There may be no specific ICD-9 code for porokeratotic lesions, and there may not be a standard treatment for it and dermatologists may not even be able to agree on what they're called but that doesn't mean that there are no coding solutions for these services.

This condition is a special type of callus with a deeply imbedded nucleated core that a dermatologist cannot easily dig out. It can also be quite painful for the patient.

Watch for: You may come across a variety of different terms to name the same condition. "Some may confuse them with warts or with what physicians call 'seed corns,' and other physicians will refer to them as 'IPKs' (intractable plantar keratosis), but they're not really the same thing," says **Arnold Beresh, DPM, CPC**, of Peninsula Foot and Ankle Specialists PLC in Hampton, Va.

Best bet: No specific ICD-9 exists for porokeratotic lesions, but you can safely report 701.1 (Keratoderma, acquired) for the condition.

Choose the Best Treatment Code

Physicians are looking into treatment options other than simply removing the callus (11055, Paring or cutting of benign hyperkeratotic lesion [e.g., corn or callus]; single lesion). In most cases, though, you'll probably be coding an excision or debridement but watch out for what your payer will accept.

Example: A dermatologist debrides the area and applies acid in hopes of destroying the lesion. The most proper code to use for destroying a skin lesion with acid is 17110 (Destruction [e.g., laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettage], of benign lesions other than skin tags or cutaneous vascular proliferative lesions; up to 14 lesions), says **Pamela Biffle, CPC, CPC-P, CPC-I, CCS-P, CHCC, CHCO**, owner of PB Healthcare Consulting and Education Inc. in Austin, Texas, but applying an acid is not necessarily a treatment per se. The question your payer is likely to ask is "Is it medically necessary and reasonable and within the standard of care?"

If your carrier considers the lesion removal routine care and a covered service, remember that some carriers may prefer to use the code series 11055-11057, Beresh adds.