

Dermatology Coding Alert

Reader Question: Carcinoma Excision With Tissue Transfer Closure

Question: My surgeon excised a carcinoma of the face. He closed the excision using adjacent tissue transfer. Can I report 14040 and 11643?

Georgia Subscriber

Answer: No. You should report 14040 (Adjacent tissue transfer or rearrangement, forehead, cheeks, chin, mouth, neck, axillae, genitalia, hands, and/or feet; defect 10 sq cm or less) for the closure using existing tissue transfer.

In this case, you should report 14040 only. The lesion excision (11643, Excision, malignant lesion including margins, face, ears, eyelids, nose, lips; excised diameter 2.1 to 3.0 cm) is included in the tissue transfer.

Exception: There is one exception to this coding scenario. If your surgeon performed the excision on a separate (earlier) day from the tissue transfer, you may report the procedures separately. This may have occurred, for example, if the doctor wanted to wait for the pathology report to be sure the margins are clear before closing the operative wound.

Sticking point: However, if the tissue transfer occurred during the excision's 10-day global period, you must append modifier 58 (Staged or related procedure or service by the same physician during the postoperative period) to the tissue transfer code (14040).