

Dermatology Coding Alert

Reader Question: Sequence Procedures According to Complexity

Question: How should I code the following: the physician performed a wide excision of recurrent melanoma on the patient\'s back, sentinel lymph node biopsy of groin and axilla. The physician also completed split-thickness skin grafting of the wide excision site on the patient\'s back. I know that I should choose from 11606, 15000, 38500-59, 38525-59, or 15100, but which codes should I report and in what order? Also, do I need any modifiers?

New Jersey Subscriber

Answer: Assuming certain area sizes that were not specified in the operative note, your codes and sequence should look like this: 38525 (Biopsy or excision of lymph node[s]; open, deep axillary node[s]), 15100 (Split graft, trunk, arms, legs; first 100 sq cm or less, or one percent of body area of infants and children [except 15050]), 11606 (Excision, malignant lesion including margins, trunk, arms, or legs; excised diameter over 4.0 cm) with modifier -59 (Distinct procedural service), and 38500 (Biopsy or excision of lymph node[s]; open, superficial) again with modifier -59.

You should not report 15000 (Surgical preparation or creation of recipient site by excision of open wounds, burn eschar, or scar [including subcutaneous tissues]; first 100 sq cm or one percent of body area of infants and children), because this code includes preparation of the recipient site by virtue of the excision.

You would report 15000 if the physician completed additional preparation. You\'ve added the appropriate modifiers. You should report the sequence of codes based on the complexity of the procedures, from most complicated procedure to least complicated procedure.

This is a useful habit to adopt because some payers discount the second and subsequent procedures, so you want to report the procedure with the highest reimbursement first.

-- Answers to You Be the Coder and Reader Questions were reviewed by **Linda Martien, CPC, CPC-H,** National Healthcare Review in Woodland Hills, Calif.; and **William J. Conner, MD,** physician at Meridian Medical Group, a multispecialty practice in Charlotte, N.C.