

## Dermatology Coding Alert

### READER QUESTIONS: Avoid Modifiers With 17003

**Question:** Our dermatologist removed three lesions from a patient's left arm. Should we code the removal with 17000 and [CPT 17003](#) with a modifier, or should we report 17000 and then 17003 twice? Also, when reporting 17003 to a carrier, should we append modifier 51 because 17003 is a subsequent code?

West Virginia Subscriber

**Answer:** You should not append any modifiers to +17003 (Destruction [e.g., laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement], all benign or premalignant lesions other than skin tags or cutaneous vascular proliferative lesions; second through 14th lesions, each [list separately in addition to code for first lesion]). Code 17003 is an add-on code you use in conjunction with 17000 (Destruction [e.g., laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement], all benign or premalignant lesions other than skin tags or cutaneous vascular proliferative lesions; first lesion).

Never report add-on codes as stand-alone codes, and remember that they may not be reported with modifier 51 (Multiple procedures).

**Example:** The dermatologist removes four lesions from a patient's left foot. You would code the procedure with 17000 and 17003 x three units.