Dermatology Coding Alert

READER QUESTIONS: Extensive Cleaning May Mean a Higher-Level Code

Question: A patient presents with a 1.5-cm laceration of the eyebrow, and the dermatologist performs an intermediate repair. The patient also has a 3.6-cm forehead laceration that requires a simple repair. How should I report these procedures?

Connecticut Subscriber

Answer: In this case, you should report the intermediate wound separately from the simple closure. Therefore, claim 12051 (Layer closure of wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 2.5 cm or less) for the eyebrow repair and 12013 (Simple repair of superficial wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 2.6 cm to 5.0 cm) for the forehead repair.

Remember: You should report these two repairs separately because they are not the same type of repair - one (12013) is simple, and the other (12051) is intermediate. If the dermatologist performed two simple (or intermediate) repairs and he completed the procedures at the same anatomic area, you would add their lengths together and report one repair code.

Bonus: If the dermatologist uses single-layer closure to repair a heavily contaminated wound(s) that requires \"extended cleaning and/or removal of substantial amounts of devitalized/contaminated tissue,\" you may be justified in reporting intermediate repairs (12031-12057), according to CPT guidelines. This caveat allows you to report intermediate codes for well-documented single-layer repairs that are heavily contaminated - but your documentation must include descriptive details about the procedure such as \"prior to closure, the wound required the dermatologist to perform extensive cleaning of the site.\"

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 **Jeffrey Weinberg, MD**, director of the Clinical Research Center, department of dermatology at St. Luke\'s-Roosevelt Hospital Center in New York City.