

Dermatology Coding Alert

READER QUESTIONS: Soak Up These Biopsy Coding Tips

Question: I submitted a claim for 11100 and 11101-59 and got denied. Why?

New Jersey Subscriber

Answer: You got denied simply because 11101 (Biopsy of skin, subcutaneous tissue and/or mucous membrane [including simple closure], unless otherwise listed; each separate/ additional lesion [List separately in addition to code for primary procedure]) is an add-on code, meaning you don't report it alone; they add on to the main code. In this case, 11101 is used for the second or subsequent biopsy(s). It is not appropriate to append a modifier to add-on codes.

Do this: Report 11100 and 11101 only when the physician obtains a specimen. For instance, your dermatologist removes a portion of a patient's skin lesion and sends the specimen to pathology. He doesn't perform any additional work, say shaving or removal of the remainder of the lesion. In that case, you would use 11100. You should assign 11101 in addition to 11100 when the physician takes a biopsy of another lesion.