

Dermatology Coding Alert

Reader Questions: Watch Closures With Fascia Excisions

Question: Our dermatologist re-excised a melanoma with an area that was 12 cm long and 3.5 cm wide. The dermatologist excised down to but not including the fascia. I think I should report 11604 and 12034 to describe this procedure, but the dermatologist is curious why I did not choose a code such as 24075. To me, a melanoma is a skin tumor, and the soft-tissue tumor codes do not apply. How should I have coded this?

Massachusetts Subscriber

Answer: Your assessment is correct. Melanomas, according to Stedman's Medical Dictionary, most commonly occur at the dermal-epidermal junction. Although they may become invasive, physicians consider them a skin tumor and not a soft-tissue tumor. And 24075 (Excision, tumor, soft tissue of upper arm or elbow area, subcutaneous; less than 3 cm) is not specific and does not include malignant tissue.

Codes 11604 (Excision, malignant lesion including margins, trunk, arms, or legs; excised diameter 3.1 to 4.0 cm) and 12034 (Repair, intermediate, wounds of scalp, axillae, trunk and/or extremities [excluding hands and feet]; 7.6 cm to 12.5 cm) accurately and correctly describe the procedure. You should also consider reporting a code for the intermediate repair or closure (12031-12057) because the operative note states the excision extended to the fascia. If the closure was not layered, you would not add the repair/closure code.