

Dermatology Coding Alert

You Be the Coder: Apligraf Applications

Question: If a dermatologist were to apply an Apligraf in his office, how would we code and bill this? I know that for the Apligraf itself I should report J7340 (I assume per square centimeter). However, would there be an application charge? Also, would Medicare (Tennessee) even pay for it done in an office setting?

Answer: Yes, you can bill Medicare for a bilaminate skin substitute (Apligraf) application in an office setting. For the application, report 15340 (Tissue cultured allogeneic skin substitute; first 25 sq cm or less) and +15341 (... each additional 25 sq cm) if needed.

Then, don't forget to report the Apligraf itself with the HCPCS code Q4101 (Apligraf, per sq cm).

The final step: Be sure to check with your carrier for specific qualifications. As for Tennessee's local coverage determination (Cigna Medicare), patients must have noninfected partial- and full-thickness ulcers due to venous insufficiency. These ulcers must have been present for at least two months and must not have responded to conventional ulcer therapy.