

Internal Medicine Coding Alert

READER QUESTIONS: Modifier 59 Helps You Report 2 Excision Codes

Question: The internist excised two sebaceous cysts off of the patient's back. One cyst was 4.7 cm, and the other was 3.3 cm. How should I code this?

Rhode Island Subscriber

Answer: For the 4.7-cm cyst excision, you should assign 11406 (Excision, benign lesion including margins, except skin tag [unless listed elsewhere], trunk, arms or legs; excised diameter over 4.0 cm). You should report 11404-59 (... excised diameter 3.1. to 4.0 cm; distinct procedural service) for your surgeon's removal of the 3.3-cm cyst.

Reporting 11406 and 11404 is correct for three reasons:

1. the lesions were benign
2. they were located on the patient's "trunk"
3. the cysts' measurements match the specified lesion diameters in the codes' descriptors. You need to attach modifier 59 (Distinct procedural service) to 11404 to show the insurer that the second excision was separate and distinct from the first procedure.

Answers for You Be the Coder and Reader Questions were provided by **Kathy Pride, CPC, CCS-P**, a coding consultant for QuadraMed in Port St. Lucie, Fla.; **Bruce Rappoport, MD, CPC**, a board-certified internist who works with physicians on compliance, documentation, coding and quality issues for Rachlin, Cohen & Holtz LLP, a Fort Lauderdale, Fla.-based accounting firm with healthcare expertise; and **Tara Conklin, CPC**, an independent coding consultant in Wesley Chapel, Fla.