

Internal Medicine Coding Alert

Reader Questions: Read Wart Removal Descriptors Carefully

Question: A new patient reports to the internist with common warts on her left hand. Encounter notes indicate that after a level-two E/M, the internist destroys three common warts. We reported 17000 and +17003x2 for the destruction and received a denial. What did we do wrong?

Rhode Island Subscriber

Answer: You chose the wrong wart removal codes. Check out CPT's guidance on the matter, which appears after the descriptors for 17000 (Destruction [e.g., laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement], premalignant lesions [e.g., actinic keratoses]; first lesion) and +17003 (... second through 14 lesions, each ...): "For destruction of common or plantar warts, see 17110, 17111."

So you should re-submit the claim with the following codes:

- 17110 (Destruction [e.g., laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement], of benign lesions other than skin tags of cutaneous vascular proliferative lesions; up to 14 lesions) for all three wart removals
- 99202 (Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: an expanded problem focused history; an expanded problem focused examination; straightforward medical decision making) for the E/M
- modifier 25 (Significant, separately identifiable evaluation and management service by the same physician on the same day of the procedure or other service) appended to 99202 to show that the E/M and removals were separate services
- 078.10 (Viral warts, unspecified) appended to 99202 and 17110 to represent the patient's condition.