

Internal Medicine Coding Alert

What Is the 'Rule of Nines'?

Learn how CPT's burn rule can get you paid

Don't let lackluster ICD9 Coding extinguish payment for your burn claims. Instead, make sure you and your internist use CPT's "Rule of Nines" to help you use the most accurate condition code and prevent denials.

The Rule of Nines is important because the rule helps physicians and coders figure out the burn's size, says **Ron L. Nelson, PA-C**, president and CEO of Health Services Associates Inc. and HAS Consulting Group Inc., in Freemont, Mich. Therefore, internists can select the correct ICD-9 code based on the burn severity.

Medicare bases 948.x (Burns classified according to extent of body surface involved) on the Rule of Nines to estimate the amount of body surface burned.

If, for instance, a patient presents with 10 to 19 percent of his body burned, your physician would select 948.1x. And you would link this code to the proper CPT code, such as 16020 (Dressings and/or debridement, initial or subsequent; without anesthesia, office or hospital, small).

CPT breaks down the Rule of Nines like this:

The head and neck, the right arm, and the left arm each equal 9 percent.

The back trunk, front trunk, left leg, and right leg each equal 18 percent (the front and back trunk and each leg can be divided into upper and lower segments, each equaling 9 percent).

The genitalia equal 1 percent.

Both Medicare and private payers accept the Rule of Nines, which is the best method for managing and treating burns in any setting, Nelson says.

(Editor's note: You can find the Rule of Nines section on page 61 of your 2004 CPT manual.)