

Part B Insider (Multispecialty) Coding Alert

GYN SURGERY : 3 Steps Help You Collect for Vaginal Cuff Repairs

Know when to use unlisted code for this service.

If you're stuck trying to figure out what code to use for a vaginal cuff repair, follow these three expert steps for speedy reimbursement.

Step 1: Determine Why the Repair Is Necessary: Examine the operative report to determine why the patient required the repair, says **Cindy Foley**, billing manager for three separate gynecology practices in Syracuse, N.Y. "Your code might depend on whether the patient had an injury versus a wound in that area," Foley explains.

Step 2: Sutures Loose? Don't Forget This Modifier: You read your op notes and discovered the vaginal cuff repair dealt with loose sutures. Here's what you should do.

Suppose the patient, who underwent a total hysterectomy (58150), needs to return to the operating room for a vaginal cuff repair because the original sutures became loose and a simple re-closure is documented.

In this case, you should report 58999 (Unlisted procedure, female genital system [nonobstetrical]). You would also need to submit your op report along with a cover letter that explains in simple, straightforward language exactly what your ob-gyn did, says **Melanie Witt, RN, COBGC, MA**, an ob-gyn coding expert based in Guadalupita, N.M. Remember to explicitly reference the nearest equivalent listed procedure in your explanatory note.

For example, you might consider comparing the work to 12020 (Treatment of superficial wound dehiscence; simple closure), which has 4.74 RVUs.

Alternatively, if your physician has documented the repair's size, use 12011-12018 (Simple repair of superficial wounds of face, ears, eyelids, nose, lips and/or mucous membranes ...), which range in RVUs from 2.70 to 8.41, as a comparison.

Be sure to append modifier 78 (Unplanned return to the operating/ procedure room by the same physician following initial procedure for a related procedure during the postoperative period) if the surgeon performs the repair during the previous surgery's global period.

Your diagnosis code for this repair will be 998.32 (Disruption of external operation [surgical] wound), Witt says.

Step 3: Injuries Mean Colporrhaphy Code: If the surgeon performs the repair because of an injury, you would use 57200 (Colporrhaphy, suture of injury of vagina [nonobstetrical]).

Example: A patient slips and catches herself in the shower a week after a total abdominal hysterectomy (58150) and ruptures the sutures at the vaginal cuff and part of the vaginal wall. The ob-gyn returns her to the operating room to repair the cuff and vaginal wall laceration.

You'll report 57200-78, linked to 878.6 (Open wound of vagina, without mention of complication).