

Part B Insider (Multispecialty) Coding Alert

Part B Coding Coach: Get a Grip on New Category III Code Options for 2018 Claims

Tip: Review the CPT® Integumentary section for scar procedure differentiation.

An emerging technology for treating hypertrophic scars that impair function may get some wind in its sails now that CPT® 2018 provides new codes for the procedure.

Problem: Burn and other traumatic scars may develop thick strictures that limit a patient's functional mobility, impairing acts as simple as opening a jar and more. The common surgical treatment has long met with mixed success and come with its own set of potential side effects, especially in children.

Now surgeons are starting to use a procedure called "ablative laser fenestration" using either full field or fractional lasers to "remodel" the scar by making numerous patterned openings in the tissue so it behaves more like normal skin.

Check Out New Codes

CPT® 2018 provides the following four new codes to describe these ablative laser procedures:

- 0479T (Fractional ablative laser fenestration of burn and traumatic scars for functional improvement; first 100 cm² or part thereof, or 1% of body surface area of infants and children)
- 0480T (... each additional 100 cm², or each additional 1% of body surface area of infants and children, or part thereof (List separately in addition to code for primary procedure))
- 0491T (Ablative laser treatment, non-contact, full field and fractional ablation, open wound, per day, total treatment surface area; first 20 sq cm or less)
- 0492T (... each additional 20 sq cm, or part thereof (List separately in addition to code for primary procedure)).

Notice that these are CPT® Category III codes. "The need for these codes [arose] due to the development of new technology," says **Carol Pohlig, BSN, RN, CPC, ACS**, senior coding and education specialist at the Hospital of the University of Pennsylvania.

Options: "In addition to these new codes, remember to continue to look to the CPT® Integumentary section for other scar revision procedures, such as complex wound repair or adjacent tissue transfer," says **Terri Brame Joy, MBA, CPC, COC, CGSC, CPC-I**, director of operations with Encounter Telehealth in Omaha, Nebraska.

There's more: The following other new Category III codes might also find their way into your general surgery practice:

- 0489T (Autologous adipose-derived regenerative cell therapy for scleroderma in the hands; adipose tissue harvesting, isolation and preparation of harvested cells including incubation with cell dissociation enzymes, removal of non-viable cells and debris, determination of concentration and dilution of regenerative cells)
- 0490T (... multiple injections in one or both hands)
- 0494T (Surgical preparation and cannulation of marginal (extended) cadaver donor lung(s) to ex vivo organ perfusion system, including decannulation, separation from the perfusion system, and cold preservation of the allograft prior to implantation, when performed).

Understand Category III

Category III codes (also known as "T-codes") are temporary codes for emerging services. Using the Category III code

allows for the collection of specific data about use, efficacy, and outcomes.

Rule: "If a Category III code is available, this code must be reported instead of a Category I unlisted code," CPT® guidelines in the Category III Codes section state.

From a billing standpoint, keep in mind that Category III codes often apply to services that payers consider investigational/experimental. "This means you may not get reimbursed for the procedure," says **Jim Pawloski, BS, MSA, CIRCC, R.T. (R)(CV)**, coder at William Beaumont Hospital in Royal Oak, Michigan, and Adreima in Phoenix, Arizona.

Check expiration: Remember that Category III codes have an expiration date. CPT® either converts them to a Category I code before that date, or deletes them. "If you use Category III codes, you need to check each year to ensure that they are still valid," Joy says.