

Part B Insider (Multispecialty) Coding Alert

READER QUESTION: Removing Stitches? Check These Rules Before You Bill

Medicare lays down the law on this issue, ensuring that you differentiate between simple post-op removal and more complex procedures

Question: Our physician saw a patient for the sole purpose of removing the patient's stitches. Which code should we report for the suture removal?

Answer: You may be able to report suture removal separately, but only in relatively rare circumstances.

If the same physician who placed the sutures removes them during the original procedure's global period, you cannot report the removal separately.

For example: A patient returns to the office for suture removal during the global period of the surgery that warranted the stitches.

In this case, you cannot report the removal separately because carriers consider it to be part of the standard follow-up care.

Tip: Payers associate a zero charge with 99024 (Postoperative follow-up visit, normally included in the surgical package, to indicate that an evaluation and management service was performed during a postoperative period for a reason[s] related to the original procedure), but you can use it to keep track of visits for risk management purposes to show that the patient did present for a follow-up visit within the surgical period.

If you must place a patient under general anesthesia for suture re-moval, you may be able to report the service separately using 15850 (Removal of sutures under anesthesia [other than local], same surgeon) or 15851 (Removal of sutures under anesthesia [other than local], other surgeon)--but cases that call for coding of this kind are unusual.

Example: A patient received sutures for a serious wound, and skin has grown over the sutures, requiring a complex suture removal. The same surgeon who placed the sutures returns the patient to the OR and places her under general anesthesia to remove the sutures. In this case, you may report 15850.

Avoid this mistake: You should not append 15850 or 15851 with modifier 52 (Reduced services) to get paid for suture removal without anesthesia.