

Outpatient Facility Coding Alert

Reader Question: Cosmetic Blepharoplasty Or Not? Find Out

Question: What ICD-10 codes will show that the patient's blepharoplasty wasn't cosmetic?

Ohio Subscriber

Answer: This answer depends upon your payer's guidelines. However, in general, most payers want to see documentation of a medical problem that makes the procedure necessary. Since Medicare doesn't cover any cosmetic procedures, the documentation and ICD-10 codes show the payer the patient's procedure was for medical reasons. There are dozens of possible ICD-10 codes that payers cite as possible diagnosis codes. They are as follows:

- C44.112 (Basal cell carcinoma of skin of right eyelid, including canthus)
- D04.12 (Carcinoma in situ of skin of left eyelid, including canthus)
- G51.0 (Bell's palsy)
- H01.004 (Unspecified blepharitis left upper eyelid)
- H02.031 (Senile entropion of right upper eyelid)
- H02.231 (Paralytic lagophthalmos right upper eyelid).

There are also some conditions payers may consider cosmetic but may also consider medically necessary depending upon the medical documentation. These ICD-10 codes include L91.8 (Other hypertrophic disorders of the skin) and L98.5 (Mucinosis of the skin), among others. The fact that Medicare payers can go either way with these diagnoses underscores how important it is for the rest of your documentation to clearly show the nature of the medical necessity driving the blepharoplasty.