

Outpatient Facility Coding Alert

Reader Questions: Depend on Number and Nature of the Nails to Choose Between 11719, 11721, 11720

Question: What CPT® code is best for cutting and filing ten toenails?

Indiana Subscriber

Answer: The answer depends on the nature of the nail cutting and the nature of the nails involved.

If the nails are non-dystrophic and the physician is simply using clippers or other similar instrument to cut each nail straight across so that it is in line with the edge of the end of the toe, then you should report 11719 (Trimming of nondystrophic nails, any number). Note that because this code covers "any number" of nails, you would only report it once, even though all ten toenails were cut and filed.

If the nails were hypertrophic dystrophic or mycotic and the cutting and filing involved use of instruments such as a nail splitter, nail elevator (a small, narrow spoon-shaped instrument), and/or electrical burr or sander, then you should consider using code 11721 (Debridement of nail[s] by any method[s]; 6 or more), because the physician worked on all ten of the patient's nails. If he treated fewer than six nails, you would submit 11720 (... 1 to 5) instead.

Remember: The patient must have an underlying condition, such as diabetes or polyneuropathy, before insurance companies typically will pay for nail trimming and filing. If you know insurance won't pay for the service, you might ask the patient to sign an advance beneficiary notice (ABN) or similar form accepting responsibility for payment before undergoing care.