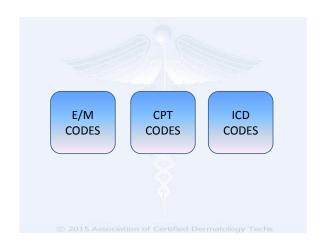


Coding is...

A standardized method of communicating with a patient's insurance company, using numeric codes, to indicate which billable services were performed during a patient's office visit.

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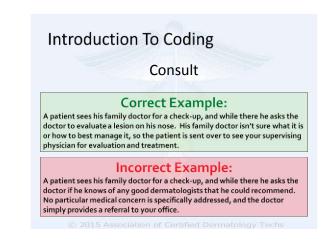




Introduction To Coding E/M Codes • E/M stands for "Evaluation and Management". • Used to bill the office visit (not procedures or labs!). • Represent the charges for diagnosing the problem(s) and counseling the patient. E/M Codes Established Patient Visits Consults



Introduction To Coding Traditional New Patients & Consults What Is A "Consult"? • A "consult" occurs when a physician specifically seeks input or assistance in the management of a patient's condition by referring that patient to another provider who has more expertise in that area of medicine.

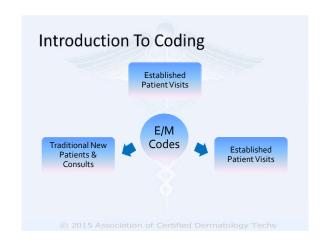


Introduction To Coding

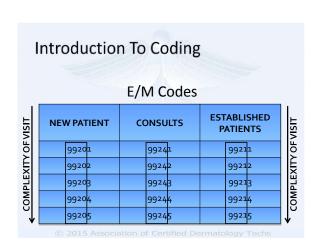
Important "Caveat" About Consults:

Some insurances, including Medicare, are no longer providing coverage for Consults. Instead, when billing to these insurances, you must instead use "traditional" new patient visit codes.

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"Established Patient" Definition: A patient who has been formally seen, treated, or provided medical advice within the past 3 years. It does not matter if the patient's paper charts are in storage. Less than 3 years = Established.



In General....

• The overwhelming majority of visit codes used are:

New Patients 99202 - 99203

<u>Consults</u> 99242 – 99243

Established Patients 99212-99214

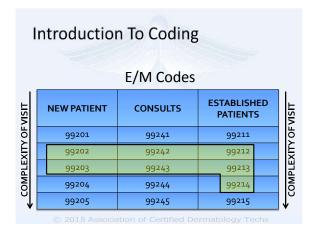
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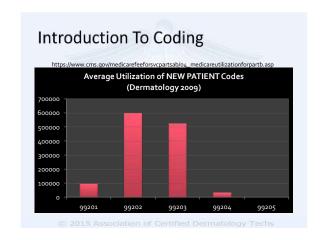
Introduction To Coding

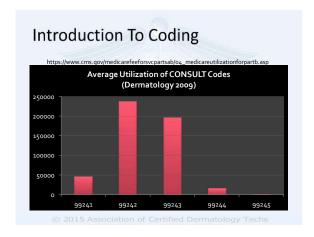
In General....

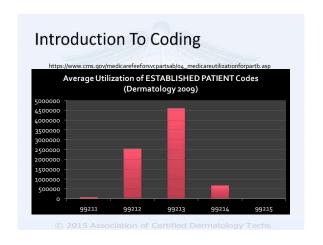
- The lowest level new patient codes 99201 and 99241 are rarely used by most dermatologists.
- The new patient codes (99204 99205 and 99244 99245) are also rarely used by most dermatologists.
- Amongst the established patient codes, 99214 is occasionally used for a very complex visit, but it's quite rare to charge a level 99215.
- The "level one" established patient code 99211 can be used for nurse-only visits.

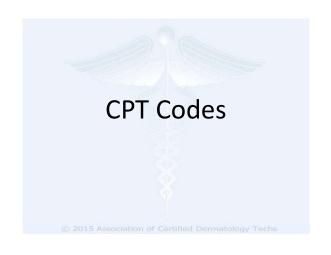
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CPT Codes

- CPT stands for Current Procedural Terminology.
- E/M Codes are actually a type of CPT Code, though in practice, the term "CPT Code" is generally used to reference "procedure codes".
- Dermatology-specific CPT procedure codes range from 10040 to 19499.

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Introduction To Coding

Most Common CPT Codes:

- · Destruction of AKs
- Destruction of ISKs/Warts/Molluscum
- Biopsies
- Skin Tags

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Introduction To Coding

Destruction of AKs

IF 1-14 LESIONS ARE TREATED

 $17000 \ \text{for the first AK}.$ PLUS $17003 \ \text{for each additional AK up to 14}.$

OR IF 15 OR MORE TREATED

17004 by itself regardless of how many over 15.

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Destruction of AKs

For Example:

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Introduction To Coding

Destruction of ISKs/Warts/Molluscum

IF 1-14 LESIONS ARE TREATED

17110 by itself regardless of how many up to 14.

OR IF 15 OR MORE TREATED

17111 by itself regardless of how many over 15.

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Destruction of ISKs/Warts/Molluscum

For Example:

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Biopsies

FIRST BIOPSY 11100

EACH ADDITIONAL BIOPSY

11101 (x however many units)

LOCATION SPECIFIC BIOPSIES

40490 - Lip

69100 – Biopsy of Ear

67810 - Eyelid

123

Introduction To Coding

Skin Tags

IF 1-15 TAG ARE TREATED

11200 by itself regardless of how many up to 15.

EACH "ADDITIONAL" 10 TAGS BEYOND 15

11201

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Skin Tags

For Example:

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ICD Codes

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ICD Codes

- Stands for International Classification of Diseases.
- They are numeric values which represent the various diagnoses.
- Currently "ICD-9" is in use.
 - "ICD-10" was due for implementation by late 2013, but the deadline for its use now pushed back.
- Easiest of coding fundamentals to understand.

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ICD Codes

Examples

Acne - 706.1 Psoriasis - 696.1 Actinic Keratosis - 702.0

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"Location-Specific" ICD Codes

- xxx.0 LIP
- xxx.1 EYELID
- xxx.2 EAR — xxx.3 – FACE
- xxx.4 SCALP/NECK
- xxx.5 TRUNK
- xxx.6 UPPER EXTREMITY
- xxx.7 LOWER EXTREMITY
- xxx.8 OTHER SPECIFIED SITExxx.9 SITE UNSPECIFIED

That concludes Part I of Introduction To Coding. Please proceed to...

Introduction To Coding PART II