

1 KEY PROCEDURES & CPT CODES

PROCEDURE	CPT CODE(S)
BIOPSIES	<ul style="list-style-type: none"> shave biopsy: 11102, 11103 punch biopsy: 11104, 11105 excisional biopsy: 11106, 11107
CRYOTHERAPY	<i>pre-malignant:</i> 17000 (1st lesion), 17003 (2-14 lesions), 17004 (15+ lesions) <i>benign lesions:</i> 17110 (1-14 lesions), 17111 (15+ lesions)
CURETTAGE & ELECTRODESSICATION (ED&C)	17260 – 17286 (based on location & size)
INCISION & DRAINAGE	simple: 10060 complicated: 10061
LESION REMOVAL	skin tags: 11200 (up to 15), 11201 (additional 10) benign excisions: 11400 - 11446 (based on location & size)
NAIL SURGERY	partial/complete avulsion: 11730, 11732 (each additional)

2 ESSENTIAL DOCUMENTATION TIPS

	MEDICAL NECESSITY	Clearly document the reason for the procedure.
	PATIENT HISTORY	Include relevant patient history and physical exam results.
	PROCEDURE DETAILS	Record specifics of the procedure, incl. any complications or special circumstances.

3 MODIFIERS & THEIR USES

MODIFIER	PURPOSE	EXAMPLE
MODIFIER 25	significant, separately identifiable E/M service	<i>Patient has an acne consultation and a cyst drained in one visit. Both are coded separately.</i>
MODIFIER 59/XS	distinct procedural service	<i>Multiple procedures performed on different sites, coded separately.</i>

4 COMMON BILLING CHALLENGES & QUICK FIXES



RECORDS ISSUES

Regularly review documentation practices to avoid denials. Ensure thorough recording of the medical necessity and procedural details.



CODING ERRORS

Regularly review CPT codes and documentation practices. Use coding tools to stay accurate and up-to-date.



GLOBAL PERIOD OVERLAPS

Familiarize yourself with global periods (0, 10, or 90 days) and use modifiers when billing for procedures during this period.