

## Outpatient Facility Coding Alert

### Reader Question: Make These Considerations When Choosing Vulvar Excision Code

**Question:** The doctor removed a 10 cm vulvar mass from a patient. The mass was external and pathology determined it was an abnormally large skin tag. A substantial amount of work was performed to remove this skin tag - much more than what is typically included in a skin tag excision code. Is there a different code I can use to report this?

Michigan Subscriber

**Answer:** A look at the operative report is necessary to definitively determine the correct code, but based on the size of the skin tag and the complexity of the procedure, it is not advised that you report the surgery using code 11200 (Removal of skin tags, multiple fibrocutaneous tags, any area; up to and including 15 lesions). Additionally, you should not consider a benign lesion excision code such as 11426 (Excision, benign lesion including margins, except skin tag (unless listed elsewhere), scalp, neck, hands, feet, genitalia; excised diameter over 4.0 cm).

Your first option is to consider reporting a code from the Female Genital System surgical section of the CPT® manual. More specifically, code range 56620 (Vulvectomy simple; partial) to 56640 (Vulvectomy, radical, complete, with inguinofemoral, iliac, and pelvic lymphadenectomy) applies specifically to vulvectomy procedures. Beginning at this code range, CPT® displays a set of four definitions to help guide the coder toward the correct code:

- "A **simple** procedure is the removal of skin and superficial subcutaneous tissues;
- "A **radical** procedure is the removal of skin and deep subcutaneous tissue;
- "A **partial** procedure is the removal of less than 80% of the vulvar area;
- "A **radical** procedure is the removal of greater than 80% of the vulvar area."

If the physician removes a portion of the vulva in addition to the underlying skin tag, you may consider the correct code under the Female Genital System ⇒ Excision category. Based on the procedure description, you should consider 56620 (Vulvectomy simple; partial) or 56630 (Vulvectomy, radical, partial). However, you'll want to make sure the procedure aligns with the code's procedural description as well.

If the surgeon does not perform a partial vulvectomy in addition to the removal of the 10 cm mass, then you should instead consider code 11426 (Excision, benign lesion including margins, except skin tag (unless listed elsewhere), scalp, neck, hands, feet, genitalia; excised diameter over 4.0 cm). CPT® defines excision as "full-thickness (through the dermis) removal of a lesion, including margins, and includes simple (non-layered) closure when performed." It is advised that you analyze the operative report and confer with the surgeon for the most appropriate coding option.