Coding, Compliance, and Documentation of Ulcer Debridement

Jeffrey D Lehrman, DPM, FASPS, MAPWCA, CPC

Board of Directors, APWCA
Board of Directors, ASPS
Diplomate, ABFAS
Advisor, APMA Coding Committee
Advisor, APMA MACRA Task Force
Expert Panelist, Codingline
Fellow, AAPPM
Former Medical Director, Crozer Wound Healing Center
Twitter: @DrLehrman

Insert academic affiliation, practice or hospital logo(s) of preference here. Product and/or sponsor logos not permitted, per CME guidelines.
Disclosures

**Speaker’s Bureau:**
- Organogenesis
- AmerX
- Smith & Nephew Advanced Wound Management
- BSN Medical Advanced Wound Care Division

**Stockholder:**
- Talar Medical

**Medical/Scientific Boards:**
- Bako Diagnostics

**Principal:**
- Lehrman Consulting, LLC

**Consultant:**
- American Podiatric Medical Association
- Musculoskeletal Transplant Foundation
- Smith & Nephew Advanced Wound Management
- Molnlycke
- Endo Pharmaceuticals
- Wounds A.I.
- Bako Diagnostics
- Orpyx Medical Technologies
- AmerX
- Modulated Imaging
CPT 11040/11041

- Deleted from CPT
- Do not use them....EVER

- Replaced by 97597 / 97598
- January 1, 2011
CPT code based on deepest depth to which you debride

- Dermis
- SubQ
- Muscle/Fascia
- Bone
• Debridement of open wound to level of epidermis/dermis total wound surface area less than or equal to 20 square centimeters

• Debridement defined as:
  • High pressure waterjet with or without suction
  • Sharp selective debridement with scissors, scalpel, and forceps

• Debridement should involve removal of:
  • Fibrin, devitalized epidermis and/or dermis, exudate, debris, biofilm
• Remember TOTAL Wound Surface Area

• One ulcer 4cm x 4cm of dermis removed
  • CPT 97597 one unit

• Two ulcers: first 2cm x 2cm, second 4cm x 4cm of dermis removed
  • CPT 97597 one unit

• Three ulcers: 2cm x 2cm, 3cm x 2cm, 2cm x 2cm of dermis removed
  • CPT 97597 one unit
• Add-on code to CPT 97597
• To be used if over 20 sq. cm of dermis is removed
• Debridement of open wound to level of epidermis / dermis each additional 20 square centimeters
• Used WITH CPT 97957
• No 51 modifier on CPT 97598 with CPT 97597
• Never to be used alone
Examples

• One ulcer 5 X 5 sq. cm.
  • CPT 97597 one unit
  • CPT 97598 one unit

• Two ulcers: first 4 X 4, second 4 x 3 sq. cm.
  • CPT 97597 one unit
  • CPT 97598 one unit
Examples (Cont.)

- Two ulcers: first 5 x 5, second 5 x 4
  - CPT 97597 one unit
  - CPT 97598 two units

- One ulcer 75 sq. cm.
  - CPT 97597 one unit
  - CPT 97598 three units
• Fall under Medicare consolidated billing

• Will not get paid if patient is in a facility on a Medicare Part A stay

• Can try to contract with facility....good luck!
CPT 11042/11045

- CPT 11042: Debridement to subcutaneous tissue first 20sq. cm or less total
- CPT 11045: Add-on code: Debridement to subQ each additional 20 sq. cm.
- Includes epidermis and dermis with it
CPT 11043/11046

• CPT 11043: Debridement to muscle/fascia first 20sq. cm or less total 1042: Debridement to subcutaneous tissue first 20sq. cm or less total

• CPT 11046: Add-on code: Debridement to muscle/fascia each additional 20sq. cm.

• Includes epidermis and dermis and subQ with it

• Big jump in reimbursement from 11042

• Submit Pathology?
CPT 11044/11047

- CPT 11044: Debridement to bone first 20sq. cm or less total
- CPT 11047: Add-on code: Debridement to bone each additional 20sq. cm.
- Includes epidermis and dermis and subQ and muscle/fascia with it
- Submit Pathology?
<table>
<thead>
<tr>
<th>Procedure Code</th>
<th>Description</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>CPT 97597</td>
<td>up to 20 sq. cm</td>
<td>Epidermis/Dermis</td>
</tr>
<tr>
<td>CPT 97598</td>
<td>each addl. 20 sq. cm.</td>
<td></td>
</tr>
<tr>
<td>CPT 11042</td>
<td>up to 20 sq. cm</td>
<td>SubQ</td>
</tr>
<tr>
<td>CPT 11045</td>
<td>each addl. 20 sq. cm.</td>
<td></td>
</tr>
<tr>
<td>CPT 11043</td>
<td>up to 20 sq. cm</td>
<td>Muscle/Fascia</td>
</tr>
<tr>
<td>CPT 11046</td>
<td>each addl. 20 sq. cm.</td>
<td></td>
</tr>
<tr>
<td>CPT 11044</td>
<td>up to 20 sq. cm</td>
<td>Bone</td>
</tr>
<tr>
<td>CPT 11047</td>
<td>each addl. 20 sq. cm.</td>
<td></td>
</tr>
</tbody>
</table>
Choose Correct Code

- Code based on depth of tissue actually debrided, not the depth of the wound
- Sq. cm. used is amount of tissue debrided, not the size of the ulcer
Examples

- Ulcer is 6cm x 5cm to depth of dermis and you debride 4cm x 4cm of tissue to dermis:
  - CPT 97597

- Ulcer is 6cm x 6cm to depth of bone and you debride 4cm x 3cm of it to subQ
  - CPT 11042
Two Ulcers

- If at same depth, one code for total sq. cm. debrided at that depth
- If debrided at different depths then can use two codes
• One ulcer debride 2cm. x 2cm. to dermis and another debride 6cm. x 6cm. to muscle.

CPT 97597 – 59 mod
CPT 11043
CPT 11046
Included in Debridement

- Dressing change
- Local care training
- Topicals applied
Check Your LCD

- CPT 11043 / 11044: Need to send pathology?
- CPT 11043 / 11044: Place of service?
Different plans and different LCD’s may have different requirements

You are responsible to know
- Document medical necessity of debridement AKA why you are doing it....
  - Decrease risk of infection
  - Promote healing
  - Limb salvage

- Medical diagnosis

- Anesthesia, if used
• Wound size(s) in sq. cm.
• Depth of wound
• Square cm. of tissue debrided
• Depth of tissue debrided
• Drainage
• Color
• Absence / presence of necrotic tissue
- Vascularity
- Op Report
- Patient specific goals
- Ulcer better or worse?
- Texture
- Temperature
- Condition of surrounding tissue
- Presence or absence of infection
- Location of ulcer
- Presence or absence of undermining/tunneling
• Instrument used
• Dressings used
• Immediate post-debridement care
• Instructions
• Methods of offloading
• Complicating factors/Comorbidities
• HgA1c
• Nutrition
• BMI
• Tobacco Use
• Ability to be NWB
• Consultants
• Neuropathy
• Adherence
Thank You!!
Coding, Compliance, and Documentation of Ulcer Debridement

Jeffrey D Lehrman, DPM, FASPS, MAPWCA, CPC

Board of Directors, APWCA
Board of Directors, ASPS
Diplomate, ABFAS
Advisor, APMA Coding Committee
Advisor, APMA MACRA Task Force
Expert Panelist, Codingline
Fellow, AAPPM
Former Medical Director, Crozer Wound Healing Center
Twitter: @DrLehrman

Insert academic affiliation, practice or hospital logo(s) of preference here. Product and/or sponsor logos not permitted, per CME guidelines.


• Kesselman, P., DPM. (September, 2013). Wound care billing update, Podiatry Management pg 53-59


• Noridian Medicare, Wound care and debridement – Provided by physician, NPP or as incident-to services, https://www.noridianmedicare.com/cgi-bin/coranto/viewnews.cgi?id=EFFZFZyyEpAJGDJcK&tmpl=part_a_viewnews&style=part_ab_viewnews
Coding, Compliance, and Documentation of Ulcer Debridement

Jeffrey D Lehrman, DPM, FASPS, MAPWCA, CPC

Board of Directors, APWCA
Board of Directors, ASPS
Diplomate, ABFAS
Advisor, APMA Coding Committee
Advisor, APMA MACRA Task Force
Expert Panelist, Codingline
Fellow, AAPPM
Former Medical Director, Crozer Wound Healing Center
Twitter: @DrLehrman