

11055

Paring or cutting of benign hyperkeratotic lesion (eg, corn or callus); single lesion

Explanation

A benign skin lesion is removed by paring or cutting. Examples include corns and calluses. Code 11055 when one lesion is removed.

RELATIVE VALUE UNITS					Local Fee:	
Work	MP	PE-nf	PE-f	Total-nf	Total-f	
0.43	0.05	0.63	0.16	1.15	0.62	\$43.56 \$23.38

MODIFIERS					INDICATORS		
50	51	62	66	80, 82	Suprv	Status	Global
0	2	0	0	1	09	R	000

11100

Biopsy of skin, subcutaneous tissue and/or mucous membrane (including simple closure), unless otherwise listed; single lesion

Explanation

The physician removes of skin, subcutaneous tissue and/or mucous membrane for histological study, and often involves removal of non-damaged skin for comparison. The site may be closed or left to granulate without closure. Code 11100 for the biopsy of one lesion.

RELATIVE VALUE UNITS					Local Fee:	
Work	MP	PE-nf	PE-f	Total-nf	Total-f	
0.81	0.03	1.41	0.38	2.36	1.19	\$89.51 \$45.28

MODIFIERS					INDICATORS		
50	51	62	66	80, 82	Suprv	Status	Global
0	2	0	0	1	09	A	000

11400

Excision, benign lesion including margins, except skin tag (unless listed elsewhere), trunk, arms or legs; excised diameter 0.5 cm or less

Explanation

A benign lesion is removed (including margins) from the trunk, arms, or legs. The physician applies local anesthesia to the excision site. The scalpel is held parallel to the skin surface and the lesion is removed at its base. Electrocautery or chemical cautery may be used to control bleeding. Code 11400 for an excised diameter of 0.5 cm or less.

RELATIVE VALUE UNITS					Local Fee:	
Work	MP	PE-nf	PE-f	Total-nf	Total-f	
0.87	0.06	1.96	0.9	3.06	1.86	\$115.96 \$70.45

MODIFIERS					INDICATORS		
50	51	62	66	80, 82	Suprv	Status	Global
0	2	0	0	1	09	A	010

12001

Simple repair of superficial wounds of scalp, neck, axillae, external genitalia, trunk and/or extremities (including hands and feet); 2.5 cm or less

Explanation

Under local anesthesia, the site is cleaned and the physician performs a single-layer repair of the subcutaneous tissue, dermis, or epidermis. Electrocautery or chemical closure are also included. This repair occurs on the scalp, neck, axillae, external genitalia, trunk or extremities (including hands and feet). Code 12001 for repairs 2.5 cm or less; 12002 for repairs 2.6 cm to 7.5 cm; 12004 for repairs measuring 7.6 cm to 12.5 cm; 12005 for repairs 12.6 cm to 20.0 cm; 12006 for repairs 20.1 cm to 30.0 cm; and 12007 for repairs over 30.0 cm.

RELATIVE VALUE UNITS					Local Fee:	
Work	MP	PE-nf	PE-f	Total-nf	Total-f	
1.72	0.15	1.92	0.76	3.87	2.55	\$146.58 \$96.77

MODIFIERS					INDICATORS		
50	51	62	66	80, 82	Suprv	Status	Global
0	2	0	0	1	09	A	010

17000

Destruction (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), premalignant lesions (eg, actinic keratoses); first lesion ▲

Explanation

The physician destroys a premalignant lesion using methods such as laser surgery, electrosurgery, cryosurgery, chemosurgery, or surgical curettement. Local anesthesia is included. Use code 17000 for the first lesion.

RELATIVE VALUE UNITS					Local Fee:	
Work	MP	PE-nf	PE-f	Total-nf	Total-f	
0.62	0.03	1.08	0.59	1.82	1.26	\$68.81 \$47.77

MODIFIERS					INDICATORS		
50	51	62	66	80, 82	Suprv	Status	Global
0	2	0	0	1	09	A	010

20552

Injection(s); single or multiple trigger point(s), one or two muscle(s)

Explanation

Trigger points are tiny contraction knots that develop in a muscle when it is injured or overworked. The physician injects an anesthetic or a therapeutic solution into a trigger point. Code 20552 for an injection of a therapeutic agent into one or two muscles, for either single or multiple trigger points.

RELATIVE VALUE GUIDE					
Base Unit	Time	GPCI Conversion Factor			
3		16.35			
RELATIVE VALUE UNITS					
Work	MP	PE-nf	PE-f	Total-nf	Total-f
0.66	0.05	0.69	0.21	1.42	0.88

MODIFIERS					INDICATORS		
50	51	62	66	80, 82	Suprv	Status	Global
0	2	0	0	1	09	A	000

20610 ▲

Arthrocentesis, aspiration and/or injection; major joint or bursa (eg, shoulder, hip, knee joint, subacromial bursa)

Explanation

The physician administers local anesthesia and inserts a needle into a joint or bursa. Fluid is aspirated and/or injected. Code 20610 for arthrocentesis of a major joint or bursa (e.g., knee, shoulder, hip). Report any imaging guidance separately.

RELATIVE VALUE GUIDE					
Base Unit	Time	GPCI Conversion Factor			
3		16.35			
RELATIVE VALUE UNITS		Local Fee:		\$72.72	\$48.67
Work	MP	PE-nf	PE-f	Total-nf	Total-f
0.79	0.11	0.98	0.42	1.92	1.28

MODIFIERS					INDICATORS		
50	51	62	66	80, 82	Suprv	Status	Global
1	2	0	0	1	09	A	000

90472 ▲ +

Immunization administration (includes percutaneous, intradermal, subcutaneous, or intramuscular injections); each additional vaccine (single or combination vaccine/toxoid) (List separately in addition to code for primary procedure)

Explanation

Administration of injectable immunization, either a single vaccine or a combination vaccine/toxoid in a single administration. Add 90472 for each additional vaccine injection.

RELATIVE VALUE UNITS					
Work	MP	PE-nf	PE-f	Total-nf	Total-f
0.15	0.01	0.13	0.11	0.29	0.26

MODIFIERS					INDICATORS		
50	51	62	66	80, 82	Suprv	Status	Global
0	0	0	0	0	09	A	ZZZ

90772 ▲

Therapeutic, prophylactic or diagnostic injection (specify substance or drug); subcutaneous or intramuscular

Explanation

A drug or other medicinal substance is injected below the skin or into the muscle.

RELATIVE VALUE UNITS					
Work	MP	PE-nf	PE-f	Total-nf	Total-f
0.17	0.01	0.35	0.35	0.56	0.56

MODIFIERS					INDICATORS		
50	51	62	66	80, 82	Suprv	Status	Global
0	0	0	0	0	09	A	XXX

99214 ▲

Office or other outpatient visit for the evaluation and management of an established patient, which requires at least two of these three key components: a detailed history; a detailed examination; medical decision making of moderate complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Physicians typically spend 25 minutes face-to-face with the patient and/or family.

RELATIVE VALUE GUIDE					
Base Unit	Time	GPCI Conversion Factor			
3		16.35			
RELATIVE VALUE UNITS		Local Fee:		\$95.80	\$68.75
Work	MP	PE-nf	PE-f	Total-nf	Total-f
1.42	0.05	1.05	0.42	2.53	1.81

MODIFIERS					INDICATORS		
50	51	62	66	80, 82	Suprv	Status	Global
0	0	0	0	0	09	A	XXX

99396 ▲

Periodic comprehensive preventive medicine reevaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of appropriate immunization(s), laboratory/diagnostic procedures, established patient; 40-64 years

RELATIVE VALUE UNITS					
Work	MP	PE-nf	PE-f	Total-nf	Total-f
1.53	0.06	1.18	0.53	2.78	2.05

MODIFIERS					INDICATORS		
50	51	62	66	80, 82	Suprv	Status	Global
9	9	9	9	9	09	N	XXX