

Mohs Micrographic Surgery Policy, Professional

IMPORTANT NOTE ABOUT THIS REIMBURSEMENT POLICY

This policy is applicable to UnitedHealthcare Medicare Advantage Plans offered by UnitedHealthcare and its affiliates.

You are responsible for submission of accurate claims. This reimbursement policy is intended to ensure that you are reimbursed based on the code or codes that correctly describe the health care services provided. UnitedHealthcare Medicare Advantage reimbursement policies use Current Procedural Terminology (CPT®*), Centers for Medicare and Medicaid Services (CMS), or other coding guidelines. References to CPT or other sources are for definitional purposes only and do not imply any right to reimbursement.

This reimbursement policy applies to all health care services billed on CMS 1500 forms. Coding methodology, industry-standard reimbursement logic, regulatory requirements, benefits design and other factors are considered in developing reimbursement policy.

This information is intended to serve only as a general resource regarding UnitedHealthcare's Medicare Advantage reimbursement policy for the services described and is not intended to address every aspect of a reimbursement situation. Accordingly, UnitedHealthcare Medicare Advantage may use reasonable discretion in interpreting and applying this policy to health care services provided in a particular case. Further, the policy does not address all issues related to reimbursement for health care services provided to UnitedHealthcare Medicare Advantage enrollees. Other factors affecting reimbursement may supplement, modify or, in some cases, supersede this policy. These factors may include, but are not limited to: legislative mandates, the physician or other provider contracts, and/or the enrollee's benefit coverage documents**. Finally, this policy may not be implemented exactly the same way on the different electronic claims processing systems used by UnitedHealthcare Medicare Advantage due to programming or other constraints; however, UnitedHealthcare Medicare Advantage strives to minimize these variations.

UnitedHealthcare Medicare Advantage may modify this reimbursement policy at any time to comply with changes in CMS policy and other national standard coding guidelines by publishing a new version of the reimbursement policy on this website. However, the information presented in this reimbursement policy is accurate and current as of the date of publication. UnitedHealthcare Medicare Advantage encourages physicians and other health care professionals to keep current with any CMS policy changes and/or billing requirements by referring to the CMS or your local carrier website regularly. Physicians and other health care professionals can sign up for regular distributions for policy or regulatory changes directly from CMS and/or your local carrier. UnitedHealthcare's Medicare Advantage reimbursement policies do not include notations regarding prior authorization requirements.

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*** For more information on a specific enrollee's benefit coverage, please call the customer service number on the back of the member ID card.*

Application

This reimbursement policy applies to services reported using the 1500 Health Insurance Claim Form (a/k/a CMS 1500) or its electronic equivalent or its successor form. This policy applies to all products and all network and non-network physicians and other qualified health care professionals, including, but not limited to, non-network authorized and percent of charge contract physicians and other qualified health care professionals.

Policy

Overview

This policy describes reimbursement guidelines for reporting Mohs Micrographic Surgery which includes both the excision and pathology services.

All services described in this policy may be subject to additional UnitedHealthcare reimbursement policies including, but not limited to, the Rebundling and NCCI Edits and the Laboratory Services Policy.

Reimbursement Guidelines

The policy enforces the reimbursement requirements for reporting Mohs Micrographic surgery, also referred to as Mohs or MMS.

Mohs is a precise, tissue-sparing, microscopically controlled surgical technique used to treat selected skin cancers. It is an approach that aims to achieve the highest possible cure rates, and minimize wound size and consequent distortions at critical sites such as the eyes, ears, nose, and lips.

Mohs is a two-step process:

- The tumor is removed in stages, followed by immediate histologic evaluation of the margins of the specimen(s).
- Additional excision and evaluation is performed until all margins are clear.

Per the American Medical Association (AMA), Mohs requires the integration of an individual functioning in two separate and distinct capacities: surgeon and pathologist. If either of these responsibilities is delegated to another physician or other qualified health care professional who reports the services separately, the Mohs CPT codes (17311-17315) should not be reported. Therefore, Mohs codes (17311–17315) will be denied if any another physician or other qualified health care professional reports their services separately. The surgeon may submit a claim with the correct excision or biopsy code (Ex: 11641) for the service performed.

The AMA also indicates that pathology examination of the specimen is an inclusive component of Mohs and should not be separately reported by the Mohs surgeon. If a separate pathology code is submitted for the same date of service as Mohs by the same provider and records do not indicate the pathology was related to a biopsy or excision performed distinctly separate from the Mohs tumor site, the pathology code will be denied as included in the Mohs surgery.

The Centers for Medicare and Medicaid Services (CMS) indicates that only physicians (MD/DO) may perform Mohs services. A physician performing Mohs should be specifically trained and highly skilled in Mohs techniques and pathologic identification. The operative note and pathology documentation in the patient's medical record must clearly show the Mohs service was performed using accepted Mohs technique, with the physician performing both the surgical and pathology services.

Definitions

Histopathology

The branch of histology that includes the microscopic examination and study of diseased tissue.

Mohs Micrographic Surgery

A technique for the removal of complex or ill-defined skin cancer with histologic examination of 100% of the surgical margins.

Questions and Answers

1	<p>Q: A dermatologist excised a malignant lesion and had the tissue examined by a separate pathologist in the same office complex to ensure clear margins. The pathologist billed separately for their services. May the dermatologist report CPT code 17311 for the surgical service?</p> <p>A: No, Mohs requires that a single physician act as both surgeon (excision tissue) and pathologist (immediately examining excised tissue to determine clear margins). Per CPT, if either of these responsibilities is delegated to another physician or qualified health care professional who reports the services separately, the surgeon should report the appropriate excision or biopsy code such as CPT codes 11600–11646 or 11102–11107.</p>
2	<p>Q: A dermatologist performed Mohs surgery on the patient’s cheek and also performed the pathology services. May the dermatologist bill for both services performed, the Mohs surgery and the pathology?</p> <p>A: No, the pathology examination of the specimen is an inclusive component of the Mohs surgery and should not be reported separately.</p>

Codes

CPT code section

17311	+17312	17313	+17314	+17315
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Resources

American Medical Association, Current Procedural Terminology (CPT®) and associated publications and services

Centers for Medicare and Medicaid Services, CMS Manual System, National Correct Coding Initiative (NCCI) publications and other CMS publications and services

History

05/01/2020	Annual Anniversary Date and Version Change Codes: Removed Description and created table of codes
11/18/2019	Policy Update – Header Version Added
11/01/2019	Policy Implemented by M&R Reimbursement
04/03/2019	Policy Presented and approved to M&R Stakeholder meeting.