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***Board Certified in Proctology***

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Group NPI 1215263850 Ind. NPI 1467537159

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Code** | **Diagnoses** |  | |  | |
| 078.10 | Viral warts, unspecified  **Modifiers**  -24 Unrelated E&M during post-op  -25 Separate E&M same day as proc.  -53 Discontinued procedure  -57 Decision for surgery- same day  -58 Staged procedure  -59 Distinct procedural service  -78 Unplanned return to O.R.  -79 Unrelated proc. during post-op |  | |  | |
| 078.11 | Condyloma acuminatum |  | |  | |
| 078.12 | Plantar warts |  | |  | |
| 078.19 | Viral warts, other specified |  | |  | |
| 701.9 | Skin tag, irritated (782.0) |  | |  | |
| 701.9 | Skin tag, cosmetic (Self pay) |  | |  | |
| 173\_\_\_ | Skin cancer site \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | |  | |
|  |  |  | |  | |
| 455.9 | Skin tags, anus or rectum |  | |  | |
| 455.0 | Hemorrhoids, internal w/o comp |  | |  | |
| 455.1 | Hemorrhoids, internal thrombose |  | |  | |
| 455.2 | Hemorrhoids, internal w/compl |  | |  | |
| 455.3 | Hemorrhoids, external w/o compl |  | |  | |
| 455.4 | Hemorrhoids, external thrombos |  | |  | |
| 455.5 | Hemorrhoids, external w/compli |  | |  | |
| 455.6 | Hemorrhoids, unspecified |  | |  | |
| 455.7 | Hemorrhoids, unspec. Thrombos |  | |  | |
| 455.8 | Hemorrhoids, unspec. w/compli |  | |  | |
| 698.0 | Pruritis ani |  | |  | |
| 578.9 | GI bleed |  | |  | |
| 569.3 | Rectal bleed |  | |  | |
| V76.51 | Screening, Colon CA |  | |  | |
| Code | Description | | FUD | | Price | |
|  | **ANUS** | |  | | **O / F** | |
| 46900 | Destruction of lesion(s); anus; simple/chemical | | 10 | | 845/390 | |
| 46910 | Electrodessication | | 10 | | 895/380 | |
| 46916 | Cryosurgery | | 10 | | 825/420 | |
| 46917 | Laser surgery | | 10 | | 1280/375 | |
| 46922 | Surgical excision | | 10 | | 935/380 | |
| 46924 | Destruction of lesions, anus; extensive | | 10 | | 1950/525 | |
| 46600 | Anoscopy, diagnostic | | 0 | | 225/115 | |
| 46606 | Anoscopy with biopsy | | 0 | | 815/215 | |
| 82270 | Blood, occult by KOH-screening | |  | |  | |
|  | **RECTUM** | |  | | **O / F** | |
| 46255 | Hemorrhoidectomy, single group | | 90 | | 1350/975 | |
| 46257 | With fissurectomy | | 90 | | 1150/1150 | |
| 46260 | Hemorrhoidectomy, 2 or more groups X \_\_\_\_\_\_\_groups | | 90 | | 1300/1300 | |
| 46261 | with fissurectomy  X \_\_\_\_\_\_\_groups | |  | | 1460/1460 | |
| 46221 | Hemorrhoid banding | | 10 | | 690/510 | |
|  |  | |  | |  | |
|  | **VAGINA** | |  | | **O / F** | |
| 57061 | Destruction of vaginal lesion(s) simple | | 10 | | 330/280 | |
| 57065 | extensive | | 10 | | 560/500 | |
| 57100 | Biopsy of vaginal mucosa; simple | | 0 | | 255/195 | |
| 57105 | Extensive (requiring sutures) | | 10 | | 400/365 | |
| 57500 | Biopsy of cervix; single or multiple or local excision of lesion; with/wo fulgr | | 0 | | 390/220 | |
|  |  | |  | |  | |
|  | **VULVA** | |  | | **O / F** | |
| 56501 | Destruction of lesion(s), vulva; simple | | 10 | | 390/220 | |
| 56515 | Extensive | | 10 | | 660/580 | |
| 56605 | Biopsy, vulva or perineum, 1 lesion | | 0 | | 245/175 | |
| 56606 | Each add’l lesion X \_\_\_\_\_\_\_lesions | | 0 | | 110/90 | |
|  |  | |  | |  | |
|  | **PENIS** | |  | | **O / F** | |
| 54050 | Destruction of lesion(s), simple chemical | | 10 | | 375/300 | |
| 54055 | Electrodessication | | 10 | | 350/270 | |
| 54056 | Cryosurgery | | 10 | | 400/315 | |
| 54057 | Laser surgery | | 10 | | 410/285 | |
| 54060 | Surgical excision | | 10 | | 555/400 | |
| 54065 | Destruction of lesions, extensive | | 10 | | 630/500 | |
| 54100 | Biopsy of penis lesion | | 0 | | 575/365 | |
|  |  | |  | |  | |

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| **Code** | | | | **Description** | | | | FUD | Price | | |
| **992\_\_\_ - Min** | | | | **New pt / Estab pt / Consult\***  **\*Staff to confirm consult before billing. If not confirmed, re-code to standard ofc visit** | | | |  | O /F O /F O /F | | |
| 01-10 | 11-5 | 41-15 | | Minimal – level 1 | | | |  | 80/50 | 38/18 | 100/65 |
| 02-20 | 12-10 | 42-30 | | Limited – level 2 | | | |  | 130/100 | 80/50 | 200/140 |
| 03-30 | 13-15 | 43-40 | | Intermediate – level 3 | | | |  | 200/150 | 135/100 | 250/200 |
| 04-45 | 14-35 | 44-60 | | Detailed – level 4 | | | |  | 300/250 | 200/150 | 370/310 |
| 05-60 | 15-40 | 45-80 | | Comprehensive – level 5 | | | |  | 380/320 | 265/210 | 450/400 |
| 99024 | | | | Surgical follow-up | | | |  | 0/0 | | |
|  | | | |  | | | |  |  | | |
|  | | | | **SKIN** | | | |  | **O / F** | | |
| 17000 | | | | Destruction pre-malignant lesion, 1st | | | | 10 | 215/155 | | |
| 17003 | | | | 2nd thru 14th lesion X\_\_\_\_\_\_\_lesions | | | | 10 | 20/13 | | |
| 17004 | | | | 15 or more lesions | | | | 10 | 485/385 | | |
| 17110 | | | | Destruction,benign lesion (other than skin tags) up to 14 lesions | | | | 10 | 300/185 | | |
| 17111 | | | | 15 or more lesions | | | | 10 | 360/240 | | |
|  | | | |  | | | |  |  | | |
| 11055 | | | | Paring of corn/callus; single lesion | | | | 0 | 130/60 | | |
| 11056 | | | | 2-4 lesions | | | | 0 | 155/90 | | |
| 11057 | | | | more than 4 lesions | | | | 0 | 1901/115 | | |
|  | | | |  | | | |  |  | | |
|  | | | | **SKIN BIOPSY** | | | |  | **O / F** | | |
| 11100 | | | | Biopsy ,skin/subq and/or muc mem  single lesion | | | | 0 | 285/145 | | |
| 11101 | | | | each add’l lesion X \_\_\_\_\_\_\_ lesions | | | | 0 | 90/75 | | |
|  | | | |  | | | |  |  | | |
|  | | | | **SKIN TAGS** | | | |  | **O / F** | | |
| 11200 | | | | Removal of skin tags up to 15 lesions | | | | 10 | 230/195 | | |
| 11201 | | | | Each add’l 10 lesions X\_\_\_\_\_\_\_lesions | | | | 0 | 50/48 | | |
|  | | | |  | | | |  |  | | |
| **SHAVE EXCISIONS- Trunk arm leg**  **O / F O / F O / F O / F** | | | | | | | |  |  | | |
| <=.5cm 185/90 | | | .6-1.0cm 255/150 | | | 1.1-2.0cm 305/180 | >2.0cm 360/220 | 0 |  | | |
| 11300 | | | 11301 | | | 11302 | 11303 |
| 11300 | | | 11301 | | | 11302 | 11303 |
| 11300 | | | 11301 | | | 11302 | 11303 |
| **SHAVE EXCISIONS- Scalp neck hand feet genitalia**  **O / F O / F O / F O / F** | | | | | | | |
| <=.5cm 185/100 | | | .6-1.0cm 260/155 | | | 1.1-2.0cm 310/185 | >2.0cm 345/225 |
| 11305 | | | 11306 | | | 11307 | 11308 |
| 11305 | | | 11306 | | | 11307 | 11308 |
| 11305 | | | 11306 | | | 11307 | 11308 |
| **SHAVE EXCISIONS- Face ears eyelids nose lips mucous membrane**  **O / F O / F O / F O / F** | | | | | | | |
| <=.5cm 185/90 | | | .6-1.0cm 255/150 | | | 1.1-2.0cm 305/180 | >2.0cm 360/220 |
| 11310 | | | 11311 | | | 11312 | 11313 |
| 11310 | | | 11311 | | | 11312 | 11313 |
| 11310 | | | 11311 | | | 11312 | 11313 |
| A4550 | | | | | Surgical tray | | | 0 | 140/0 | | |
|  | | | | |  | | |

**Physician signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date \_\_\_\_\_\_\_\_\_\_\_\_**

**Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DOB \_\_\_\_\_\_\_\_\_\_\_\_**

**POS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

NOTES:

