

## ***JF MOHS MICROGRAPHIC SURGERY (MMS) POLICY CHECKLIST***

This checklist is intended to provide healthcare providers with a reference for use when responding to documentation requests for this service. It is not intended to replace the published guidelines or policy.

### **Policy Reference**

- [Mohs Micrographic Surgery LCD Policy \(L35704\)](#)
- [Policy Article \(A56515\)](#)

### **Medical Documentation**

Performed by an MD/DO specifically trained in the procedure, and highly skilled in MMS techniques and pathological identification

Do not report Mohs procedure codes and surgical pathology codes at the same time

To allow for payment of a biopsy from a different site than the site the Mohs Procedure was performed on the same day, the -59 modifier is appropriate. Must be separately reportable excision, biopsy, or repair service on the same claim for same date of service.

Documentation is for correct beneficiary and date of service

Medical record must contain documentation that fully supports medical necessity

Documentation contains a valid and legible signature from the performing provider

Documentation supports the selected ICD-10 codes

Documentation supports the options for care were discussed with patient

#### **Operative note includes the following:**

MMS technique

Location, number, and size of the lesion(s)

Number of stages performed

Number of specimens per stage

Measurement of the primary lesion necessitating MMS

Any measurements in support of repair or related procedures

If defect requires reconstruction, the technique utilized

#### **Documentation of pathology/histology includes the following:**

First stage: if tumor present, depth of invasion, pathological pattern of the tumor, cell morphology

Subsequent stages - if tumor characteristics are the same as first stage or if different from first stage a description of the differences