

# Dermatologists perform the majority of cutaneous reconstructions in the Medicare population: Numbers and trends from 2004 to 2009

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**Background:** Dermatologists are experts in skin cancer treatment. Their experience with cutaneous reconstruction may be underrecognized.

**Objective:** We sought to determine the percentage of skin reconstruction claims submitted to Medicare by dermatologists relative to other specialists.

**Methods:** The Medicare Physician Supplier Procedure Master File from 2004 to 2009 was accessed to determine the proportion of layered closures, grafts, and flaps by specialty.

**Results:** In 2009, dermatologic surgeons' (DS) claims accounted for 60.8% of intermediate closures, 75.1% of complex repairs, 55.5% of local tissue rearrangements, and 57.5% of full-thickness skin grafts in the Medicare population. DS billed for the majority of skin reconstructions except simple repairs, split-thickness skin grafts, and interpolation flaps. DS claims represented far more reconstructions of aesthetically important regions of the head and neck—including ears, eyes, nose, and lips—than other fields including plastic surgery and otolaryngology. Over the study period, DS increased the percentage of skin reconstructions in nearly every category relative to other specialists.

**Limitations:** This analysis is limited to the Medicare population and addresses claim volumes only. Cosmetic outcomes or appropriateness of closure selection or coding cannot be addressed.

**Conclusions:** DS perform the highest volumes of repairs in the Medicare population. DS play a primary role in routine and advanced cutaneous reconstructive surgery, especially of aesthetically important regions. (J Am Acad Dermatol 2013;68:803-8.)

**Key words:** cutaneous surgery; flaps; grafts; Medicare; reconstruction.

Dermatologists and dermatologic surgeons (DS) receive extensive training in cutaneous pathology, surgery, and oncology. As experts in cutaneous oncology, DS see and treat the majority of skin cancers. Data from the Medicare claims database from 1999 through 2004 established that DS perform more skin cancer procedures than any other specialty.<sup>1</sup> As skin cancer incidence increases, DS services will necessarily and proportionately increase.<sup>2-4</sup>

#### Abbreviations used:

|        |  |
|--------|--|
| CPT:   | Current Procedural Terminology         |
| DS:    | dermatologic surgeons                  |
| EENL:  | ears, eyelids, nose, and lips          |
| FNHFG: | face, neck, hands, feet, and genitalia |
| FTSG:  | full-thickness skin graft              |
| GS:    | general surgeons                       |
| OLN:   | otolaryngologists                      |
| PRS:   | plastic and reconstructive surgeons    |
| STSG:  | split-thickness skin graft             |

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Cutaneous reconstructions are commonly performed after benign and malignant excisions and Mohs micrographic surgery. As DS treat the epidemic of skin cancer, their experience with reconstruction has expanded. The expertise of DS in treating cutaneous malignancy is recognized by the public and primary care.<sup>5,6</sup> In his Medicare claims analysis, Roenigk<sup>1</sup> reported that DS do more complex repairs and flaps than other specialists. However, the experience of DS with routine and advanced reconstruction is likely underrecognized.<sup>7</sup> In this study, we evaluate the contribution of DS to reconstructive surgery in the Medicare population from 2004 through 2009.

## METHODS

The Medicare Physician Supplier Procedure Master File fee-for-service database was accessed for 2004, 2007 (when necessary), and 2009.<sup>8</sup> The Physician Supplier Procedure Master File is a 100% summary of procedure claims submitted from all US geographic regions of Medicare enrollees. This population consists of US seniors older than 65 years and eligible disabled persons younger than 65 years enrolled in Medicare Part B. Volumes by specialty were determined for skin reconstruction codes. Codes were defined by the *Current Procedural Terminology (CPT)*.<sup>9</sup>

**Table I.** Intermediate repairs (12031-12057) in Medicare Part B, 2009

| Specialty | Intermediate repairs                   |                                       |   |
|-----------|--|---------------------------------------|---|
|           | Total volume, 2009 (% of total claims) | Change in specialist volume from 2004 | Change in proportion of total from 2004 |
| DS        | 286,196 (60.8%)                        | 27.5%                                 | 5.8%                                    |
| PRS       | 42,904 (9.1%)                          | -3.9%                                 | -1.8%                                   |
| GS        | 43,800 (9.3%)                          | 5.8%                                  | -0.8%                                   |
| ER        | 26,621 (5.7%)                          | -17.4%                                | -2.2%                                   |
| OLN       | 15,485 (3.3%)                          | 9.2%                                  | -0.2%                                   |
| FM        | 15,460 (3.3%)                          | -6.1%                                 | -0.7%                                   |
| All       | 470,760                                | 15.4%                                 |   |

Only specialists contributing at least 3% of total are reported. DS, Dermatologists and dermatologic surgeons; ER, emergency department physicians; FM, family physicians; GS, general surgeons; OLN, otolaryngologists; PRS, plastic and reconstructive surgeons.

## CAPSULE SUMMARY

- The expertise of dermatologists in treating skin cancer is recognized.
- Dermatologists perform considerably more cutaneous reconstructions of nearly all sites and types, including aesthetically important regions, than other surgical specialties in Medicare patients.
- Better recognition of the experience and primary role of dermatologists in reconstruction may impact patient decision-making and peer referral preferences for skin surgery.

The following *CPT* codes were evaluated: simple (12001-12018), intermediate (12031-12057), and complex (13100-13153) repairs; full-thickness skin graft (FTSG) (15200-15261) and split-thickness skin graft (STSG) (15100-1, 15120-1); local tissue rearrangements (14000-14300), and interpolation flaps (15570-15576, 15731). *CPT* code 15740 was excluded

because of a recent change in definition and potential coding inaccuracies. Add-on codes were not used to determine total volumes but as a proxy for larger repairs in appropriate cases. All specialties were represented in the data set. However, only specialties making significant contributions, in most cases greater than 2% of total, are reported.

To explore facial reconstruction, codes encompassing the face, neck, hands, feet, and genitalia (FNHFG) as well as ears, eyelids, nose, and lips (EENL) were combined. This was possible for intermediate and complex layered closures, local and interpolation flaps, FTSG, and STSG. EENL-specific *CPT* codes were then separately investigated. Intermediate repairs and STSG were not included for EENL as they are uncommonly performed on these sites and lack a site-specific *CPT* code.

## RESULTS

### Layered closures

**Intermediate.** The total number of intermediate repairs in Medicare in 2009 by specialty is shown in

**Table II.** Complex repairs (13100-13153) in Medicare Part B, 2009

| Specialty | Complex repairs                        |                                       |   |
|-----------|--|---------------------------------------|---|
|           | Total volume, 2009 (% of total claims) | Change in specialist volume from 2004 | Change in proportion of total from 2004 |
| DS        | 357,130 (75.1%)                        | 67.3%                                 | 5.8%                                    |
| PRS       | 62,570 (13.2%)                         | 26.0%                                 | -2.9%                                   |
| GS        | 13,464 (2.8%)                          | 12.0%                                 | -1.1%                                   |
| OLN       | 11,583 (2.4%)                          | 22.2%                                 | -0.7%                                   |
| All       | 475,662                                | 54.4%                                 |   |

Only specialists contributing at least 2% of total are reported. DS, Dermatologists and dermatologic surgeons; GS, general surgeons; OLN, otolaryngologists; PRS, plastic and reconstructive surgeons.

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