Article - Billing and Coding: Botulinum Toxin Types A and B Policy (A57185)

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Contractor Information

CONTRACTOR NAME	CONTRACT TYPE	CONTRACT NUMBER	JURISDICTION	STATES
Noridian Healthcare Solutions, LLC	A and B MAC	01111 - MAC A	J - E	California - Entire State
Noridian Healthcare Solutions, LLC	A and B MAC	01112 - MAC B	J - E	California - Northern
Noridian Healthcare Solutions, LLC	A and B MAC	01182 - MAC B	J - E	California - Southern
Noridian Healthcare Solutions, LLC	A and B MAC	01211 - MAC A	J - E	American Samoa Guam Hawaii Northern Mariana Islands
Noridian Healthcare Solutions, LLC	A and B MAC	01212 - MAC B	J - E	American Samoa Guam Hawaii Northern Mariana Islands
Noridian Healthcare Solutions, LLC	A and B MAC	01311 - MAC A	J - E	Nevada
Noridian Healthcare Solutions, LLC	A and B MAC	01312 - MAC B	J - E	Nevada
Noridian Healthcare Solutions, LLC	A and B MAC	01911 - MAC A	J - E	American Samoa California - Entire State Guam Hawaii Nevada Northern Mariana Islands

Article Information

General Information

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CMS National Coverage Policy

Title XVIII of the Social Security Act, §1862(a)(1)(A). Allows coverage and payment for only those services that are considered to be medically reasonable and necessary.

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Title XVIII of the Social Security Act, §1833(e). Prohibits Medicare payment for any claim, which lacks the necessary information to process the claim.

CMS Manual System, Publication 100-02, *Medicare Benefit Policy Manual*, Chapter 16, §120. General Exclusions from Coverage (Cosmetic Surgery).

Article Guidance

Article Text

The following coding and billing guidance is to be used with its associated Local coverage determination.

Documentation must support the medical necessity of this service as outlined in the Indication and Limitations of Coverage and/or Medical Necessity section of the LCD Botulinum Toxin Types A and B.

Additional Documentation Requirement:

The patient's medical record should include the following elements to support the medical necessity of the botulinum toxin injection:

- Type of botulinum toxin used: Botox (onabotulinumtoxinA), Dysport (abotulinumtoxinA), Xeomin (incobotulinumtoxinA) or Myobloc (rimabotulinumtoxinB)
- Strength of toxin used
- A covered diagnosis (However, when a form of botulinum toxin is used for an indication that is not a listed indication in the AHFS, a physician statement in the medical record stating the reason(s) why the unapproved form was used is also required).
- A statement that traditional methods of treatments have been tried and proven unsuccessful (except for focal dystonia, hemifacial spasm, orofacial dyskinesia, blepharospasm, severe writer's cramp, laryngeal spasm, or dysphonia).
- Dosage used in the injections.
- Support for the medical necessity of electromyography procedures if performed.
- Support of the clinical effectiveness of the injections.
- A complete anatomic description of the site(s) injected.

When the documentation does not meet the criteria for the service rendered or the documentation does not establish the medical necessity for the services, such services will be denied as not reasonable and necessary.

Due to the short life of botulinum toxin, Medicare will reimburse the unused portion of these drugs. (R3538CP-1) Therefore, scheduling of more than one patient, where possible, is allowed to prevent wastage of botulinum toxin.

In all cases, the documentation must show the exact dosage of the drug given to the patient, the reason for unavoidable wastage, and the amount of the discarded portion of the drug.

If a single dose vial is split between multiple patients, Medicare will allow payment only for the portion used for the beneficiary plus a pro rata amount for wastage. Note that if non-Medicare patients are treated with a portion of the same vial, it would be expected that those non-Medicare patients be billed for their pro rata share of wastage.

Bill Medicare patients for wastage using the -JW modifier on a separate line and the appropriate number of units, rounded to the nearest unit such that the total billed does not exceed the contents of the vial.

For split vials, for example, if patient 1 received 30 units and patient 2 received 60 units from a 100 unit vial, wastage billed with -JW would be:

- patient 1: 3 units [(30 units used for the patient/90 total units used) * 10 units of wastage = 3.33 rounded to 3]
- patient 2: 7 units [(60 units used for the patient/90 total units used) * 10 units of wastage = 6.66 rounded to 7]

If additional vials are needed to address the needs of a set of patients, pro rata wastage should be calculated over the total vial volume for that session. Furthermore it is expected that a provider will use the most economical combination of vials that will meet the needs of a set of patients should multiple sizes be available.

If the HCPCS code for the administered drug represents other than 1 unit of drug (e.g., 100 units of the drug could be 1 HCPCS "unit") rounding should be in relation to the nearest full HCPCS unit for the administered drug (rounded

Coding Information

CPT/HCPCS Codes

Group 1 Paragraph:

The following HCPCS codes are to be reported for the supply of these drugs:

Group 1 Codes: (4 Codes)

CODE	DESCRIPTION
J0585	INJECTION, ONABOTULINUMTOXINA, 1 UNIT
J0586	INJECTION, ABOBOTULINUMTOXINA, 5 UNITS
J0587	INJECTION, RIMABOTULINUMTOXINB, 100 UNITS
J0588	INJECTION, INCOBOTULINUMTOXIN A, 1 UNIT

Group 2 Paragraph:

J0588 - Labeled indications for Xeomin are limited to G24.5 Blepharospasm and G24.3 spasmodic torticollis; payment may be made under off-label use circumstances outlined in Indications and Limitations of the LCD Botulinum Toxin Type A and B Policy (L35170).

The following CPT codes are to be reported for the procedures performed noting that CPT 64640 is to be used for treatment of laryngeal and/or oromandibular dystonia.

CODE	DESCRIPTION
31513	LARYNGOSCOPY, INDIRECT; WITH VOCAL CORD INJECTION
31570	LARYNGOSCOPY, DIRECT, WITH INJECTION INTO VOCAL CORD(S), THERAPEUTIC;
43201	ESOPHAGOSCOPY, FLEXIBLE, TRANSORAL; WITH DIRECTED SUBMUCOSAL INJECTION(S), ANY SUBSTANCE
43236	ESOPHAGOGASTRODUODENOSCOPY, FLEXIBLE, TRANSORAL; WITH DIRECTED SUBMUCOSAL INJECTION(S), ANY SUBSTANCE
43499	UNLISTED PROCEDURE, ESOPHAGUS
46505	CHEMODENERVATION OF INTERNAL ANAL SPHINCTER
52287	CYSTOURETHROSCOPY, WITH INJECTION(S) FOR CHEMODENERVATION OF THE BLADDER
64611	CHEMODENERVATION OF PAROTID AND SUBMANDIBULAR SALIVARY GLANDS,

Group 2 Codes: (25 Codes)

CODE	DESCRIPTION
	BILATERAL
64612	CHEMODENERVATION OF MUSCLE(S); MUSCLE(S) INNERVATED BY FACIAL NERVE, UNILATERAL (EG, FOR BLEPHAROSPASM, HEMIFACIAL SPASM)
64615	CHEMODENERVATION OF MUSCLE(S); MUSCLE(S) INNERVATED BY FACIAL, TRIGEMINAL, CERVICAL SPINAL AND ACCESSORY NERVES, BILATERAL (EG, FOR CHRONIC MIGRAINE)
64616	CHEMODENERVATION OF MUSCLE(S); NECK MUSCLE(S), EXCLUDING MUSCLES OF THE LARYNX, UNILATERAL (EG, FOR CERVICAL DYSTONIA, SPASMODIC TORTICOLLIS)
64617	CHEMODENERVATION OF MUSCLE(S); LARYNX, UNILATERAL, PERCUTANEOUS (EG, FOR SPASMODIC DYSPHONIA), INCLUDES GUIDANCE BY NEEDLE ELECTROMYOGRAPHY, WHEN PERFORMED
64640	DESTRUCTION BY NEUROLYTIC AGENT; OTHER PERIPHERAL NERVE OR BRANCH
64642	CHEMODENERVATION OF ONE EXTREMITY; 1-4 MUSCLE(S)
64643	CHEMODENERVATION OF ONE EXTREMITY; EACH ADDITIONAL EXTREMITY, 1-4 MUSCLE(S) (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
64644	CHEMODENERVATION OF ONE EXTREMITY; 5 OR MORE MUSCLES
64645	CHEMODENERVATION OF ONE EXTREMITY; EACH ADDITIONAL EXTREMITY, 5 OR MORE MUSCLES (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
64646	CHEMODENERVATION OF TRUNK MUSCLE(S); 1-5 MUSCLE(S)
64647	CHEMODENERVATION OF TRUNK MUSCLE(S); 6 OR MORE MUSCLES
64650	CHEMODENERVATION OF ECCRINE GLANDS; BOTH AXILLAE
64653	CHEMODENERVATION OF ECCRINE GLANDS; OTHER AREA(S) (EG, SCALP, FACE, NECK), PER DAY
64999	UNLISTED PROCEDURE, NERVOUS SYSTEM
67345	CHEMODENERVATION OF EXTRAOCULAR MUSCLE
95873	ELECTRICAL STIMULATION FOR GUIDANCE IN CONJUNCTION WITH CHEMODENERVATION (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
95874	NEEDLE ELECTROMYOGRAPHY FOR GUIDANCE IN CONJUNCTION WITH CHEMODENERVATION (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)

CPT/HCPCS Modifiers

Group 1 Paragraph:

N	/Δ
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Group 1 Codes:

N/A

ICD-10-CM Codes that Support Medical Necessity

Group 1 Paragraph:

Note: Diagnosis codes are based on the current ICD-10-CM codes that are effective at the time of LCD publication. Any updates to ICD-10-CM codes will be reviewed by Noridian; and coverage should not be presumed until the results of such review have been published/posted.

These are the **only** ICD-10-CM Codes that Support Medical Necessity for CPT/HCPCS codes J0585, J0586, J0587, J0588, 46505, 52287, 64611, 64612, 64615, 64616, 64617, 64642, 64643, 64644, 64645, 64646, 64647, 64650, 64653, 67345, 95873, 95874.

Note: The following CPT codes are not restricted by the ICD-10-CM codes listed in this policy: 31513, 31570, 43201, 43236 43499, 53899, 64640 and 64999.

Note: For all forms of botulinum toxin please refer to the current AHFS or FDA approved product insert for each drug's accepted indications.

Note: Although J0585 may be used for other indications, it was FDA approved for prophylaxis of headaches in adult patients with chronic migraine.

Note: Treatment of skin wrinkles ICD-10 CM code L11.8, L57.2, L57.4, L66.4, L87.1, L90.3, L90.4, L92.2, L94.8, L98.5, L98.6 using botulinum toxin is cosmetic and **is not covered by Medicare.**

The following ICD-10-CM codes may be used <u>alone:</u>

Group 1 Codes: (198 Codes)

CODE	DESCRIPTION
G11.4	Hereditary spastic paraplegia
G24.1	Genetic torsion dystonia
G24.2	Idiopathic nonfamilial dystonia
G24.3	Spasmodic torticollis
G24.4	Idiopathic orofacial dystonia
G24.5	Blepharospasm
G24.8	Other dystonia
G24.9	Dystonia, unspecified
G25.3	Myoclonus

CODE	DESCRIPTION
G25.89	Other specified extrapyramidal and movement disorders
G36.1	Acute and subacute hemorrhagic leukoencephalitis [Hurst]
G36.8	Other specified acute disseminated demyelination
G37.0	Diffuse sclerosis of central nervous system
G37.1	Central demyelination of corpus callosum
G37.2	Central pontine myelinolysis
G37.4	Subacute necrotizing myelitis of central nervous system
G37.5	Concentric sclerosis [Balo] of central nervous system
G37.81	Myelin oligodendrocyte glycoprotein antibody disease
G37.89	Other specified demyelinating diseases of central nervous system
G37.9	Demyelinating disease of central nervous system, unspecified
G43.011	Migraine without aura, intractable, with status migrainosus
G43.019	Migraine without aura, intractable, without status migrainosus
G43.109	Migraine with aura, not intractable, without status migrainosus
G43.111	Migraine with aura, intractable, with status migrainosus
G43.119	Migraine with aura, intractable, without status migrainosus
G43.701	Chronic migraine without aura, not intractable, with status migrainosus
G43.709	Chronic migraine without aura, not intractable, without status migrainosus
G43.711	Chronic migraine without aura, intractable, with status migrainosus
G43.719	Chronic migraine without aura, intractable, without status migrainosus
G43.E01	Chronic migraine with aura, not intractable, with status migrainosus
G43.E09	Chronic migraine with aura, not intractable, without status migrainosus
G43.E11	Chronic migraine with aura, intractable, with status migrainosus
G43.E19	Chronic migraine with aura, intractable, without status migrainosus
G44.221	Chronic tension-type headache, intractable
G44.229	Chronic tension-type headache, not intractable
G50.8	Other disorders of trigeminal nerve
G51.2	Melkersson's syndrome
G51.31	Clonic hemifacial spasm, right
G51.32	Clonic hemifacial spasm, left
G51.33	Clonic hemifacial spasm, bilateral
G51.4	Facial myokymia

CODE	DESCRIPTION
G51.8	Other disorders of facial nerve
G80.0	Spastic quadriplegic cerebral palsy
G80.1	Spastic diplegic cerebral palsy
G80.2	Spastic hemiplegic cerebral palsy
G80.4	Ataxic cerebral palsy
G80.8	Other cerebral palsy
G82.53	Quadriplegia, C5-C7 complete
G83.0*	Diplegia of upper limbs
G83.11*	Monoplegia of lower limb affecting right dominant side
G83.12*	Monoplegia of lower limb affecting left dominant side
G83.13*	Monoplegia of lower limb affecting right nondominant side
G83.14*	Monoplegia of lower limb affecting left nondominant side
G83.21	Monoplegia of upper limb affecting right dominant side
G83.22	Monoplegia of upper limb affecting left dominant side
G83.23	Monoplegia of upper limb affecting right nondominant side
G83.24	Monoplegia of upper limb affecting left nondominant side
G83.4	Cauda equina syndrome
H02.041	Spastic entropion of right upper eyelid
H02.042	Spastic entropion of right lower eyelid
H02.044	Spastic entropion of left upper eyelid
H02.045	Spastic entropion of left lower eyelid
H02.141	Spastic ectropion of right upper eyelid
H02.142	Spastic ectropion of right lower eyelid
H02.144	Spastic ectropion of left upper eyelid
H02.145	Spastic ectropion of left lower eyelid
H04.213	Epiphora due to excess lacrimation, bilateral lacrimal glands
H49.01	Third [oculomotor] nerve palsy, right eye
H49.02	Third [oculomotor] nerve palsy, left eye
H49.03	Third [oculomotor] nerve palsy, bilateral
H49.11	Fourth [trochlear] nerve palsy, right eye
H49.12	Fourth [trochlear] nerve palsy, left eye
H49.13	Fourth [trochlear] nerve palsy, bilateral

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CODE	DESCRIPTION
H49.21	Sixth [abducent] nerve palsy, right eye
H49.22	Sixth [abducent] nerve palsy, left eye
H49.23	Sixth [abducent] nerve palsy, bilateral
H49.31	Total (external) ophthalmoplegia, right eye
H49.32	Total (external) ophthalmoplegia, left eye
H49.33	Total (external) ophthalmoplegia, bilateral
H49.41	Progressive external ophthalmoplegia, right eye
H49.42	Progressive external ophthalmoplegia, left eye
H49.43	Progressive external ophthalmoplegia, bilateral
H49.881	Other paralytic strabismus, right eye
H49.882	Other paralytic strabismus, left eye
H49.883	Other paralytic strabismus, bilateral
H49.9	Unspecified paralytic strabismus
H50.00	Unspecified esotropia
H50.011	Monocular esotropia, right eye
H50.012	Monocular esotropia, left eye
H50.021	Monocular esotropia with A pattern, right eye
H50.022	Monocular esotropia with A pattern, left eye
H50.031	Monocular esotropia with V pattern, right eye
H50.032	Monocular esotropia with V pattern, left eye
H50.041	Monocular esotropia with other noncomitancies, right eye
H50.042	Monocular esotropia with other noncomitancies, left eye
H50.05	Alternating esotropia
Н50.06	Alternating esotropia with A pattern
H50.07	Alternating esotropia with V pattern
H50.08	Alternating esotropia with other noncomitancies
H50.10	Unspecified exotropia
H50.111	Monocular exotropia, right eye
CODE	DESCRIPTION
H50.112	Monocular exotropia, left eye
H50.121	Monocular exotropia with A pattern, right eye
H50.122	Monocular exotropia with A pattern, left eye

CODE	DESCRIPTION	
H50.131	Monocular exotropia with V pattern, right eye	
H50.132	Monocular exotropia with V pattern, left eye	
H50.141	Monocular exotropia with other noncomitancies, right eye	
H50.142	Monocular exotropia with other noncomitancies, left eye	
H50.15	Alternating exotropia	
H50.16	Alternating exotropia with A pattern	
H50.17	Alternating exotropia with V pattern	
H50.18	Alternating exotropia with other noncomitancies	
H50.21	Vertical strabismus, right eye	
H50.22	Vertical strabismus, left eye	
H50.311	Intermittent monocular esotropia, right eye	
H50.312	Intermittent monocular esotropia, left eye	
H50.32	Intermittent alternating esotropia	
H50.331	Intermittent monocular exotropia, right eye	
H50.332	Intermittent monocular exotropia, left eye	
H50.34	Intermittent alternating exotropia	
H50.411	Cyclotropia, right eye	
H50.412	Cyclotropia, left eye	
H50.42	Monofixation syndrome	
H50.43	Accommodative component in esotropia	
H50.51	Esophoria	
H50.52	Exophoria	
H50.53	Vertical heterophoria	
H50.54	Cyclophoria	
H50.55	Alternating heterophoria	
H50.611	Brown's sheath syndrome, right eye	
H50.612	Brown's sheath syndrome, left eye	
H50.621	Inferior oblique muscle entrapment, right eye	
H50.622	Inferior oblique muscle entrapment, left eye	
H50.629	Inferior oblique muscle entrapment, unspecified eye	
H50.631	Inferior rectus muscle entrapment, right eye	
H50.632	Inferior rectus muscle entrapment, left eye	

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CODE	DESCRIPTION
Н50.639	Inferior rectus muscle entrapment, unspecified eye
H50.641	Lateral rectus muscle entrapment, right eye
H50.642	Lateral rectus muscle entrapment, left eye
H50.649	Lateral rectus muscle entrapment, unspecified eye
H50.651	Medial rectus muscle entrapment, right eye
H50.652	Medial rectus muscle entrapment, left eye
H50.659	Medial rectus muscle entrapment, unspecified eye
H50.661	Superior oblique muscle entrapment, right eye
H50.662	Superior oblique muscle entrapment, left eye
H50.669	Superior oblique muscle entrapment, unspecified eye
H50.671	Superior rectus muscle entrapment, right eye
H50.672	Superior rectus muscle entrapment, left eye
H50.679	Superior rectus muscle entrapment, unspecified eye
H50.681	Extraocular muscle entrapment, unspecified, right eye
H50.682	Extraocular muscle entrapment, unspecified, left eye
H50.689	Extraocular muscle entrapment, unspecified, unspecified eye
H50.69	Other mechanical strabismus
H50.811*	Duane's syndrome, right eye
H50.812*	Duane's syndrome, left eye
H50.89	Other specified strabismus
H51.0	Palsy (spasm) of conjugate gaze
H51.11	Convergence insufficiency
H51.12	Convergence excess
H51.21	Internuclear ophthalmoplegia, right eye
H51.22	Internuclear ophthalmoplegia, left eye
H51.23	Internuclear ophthalmoplegia, bilateral
H51.8	Other specified disorders of binocular movement
169.364	Other paralytic syndrome following cerebral infarction affecting left non-dominant side
I69.365	Other paralytic syndrome following cerebral infarction, bilateral
I69.831	Monoplegia of upper limb following other cerebrovascular disease affecting right dominant side

CODE	DESCRIPTION
169.832	Monoplegia of upper limb following other cerebrovascular disease affecting left dominant side
I69.931	Monoplegia of upper limb following unspecified cerebrovascular disease affecting right dominant side
169.932	Monoplegia of upper limb following unspecified cerebrovascular disease affecting left dominant side
169.933	Monoplegia of upper limb following unspecified cerebrovascular disease affecting right non-dominant side
I69.934	Monoplegia of upper limb following unspecified cerebrovascular disease affecting left non-dominant side
I69.941	Monoplegia of lower limb following unspecified cerebrovascular disease affecting right dominant side
I69.951	Hemiplegia and hemiparesis following unspecified cerebrovascular disease affecting right dominant side
I69.952	Hemiplegia and hemiparesis following unspecified cerebrovascular disease affecting left dominant side
I69.953	Hemiplegia and hemiparesis following unspecified cerebrovascular disease affecting right non-dominant side
I69.954	Hemiplegia and hemiparesis following unspecified cerebrovascular disease affecting left non-dominant side
J38.3	Other diseases of vocal cords
J38.5	Laryngeal spasm
J39.2	Other diseases of pharynx
K11.7	Disturbances of salivary secretion
K22.0	Achalasia of cardia
K60.0	Acute anal fissure
K60.1	Chronic anal fissure
L74.510	Primary focal hyperhidrosis, axilla
L74.511	Primary focal hyperhidrosis, face
L74.512	Primary focal hyperhidrosis, palms
L74.513	Primary focal hyperhidrosis, soles
L74.52	Secondary focal hyperhidrosis
N31.0*	Uninhibited neuropathic bladder, not elsewhere classified
N31.1*	Reflex neuropathic bladder, not elsewhere classified
N31.8	Other neuromuscular dysfunction of bladder

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CODE	DESCRIPTION
N31.9*	Neuromuscular dysfunction of bladder, unspecified
N32.81	Overactive bladder
N36.44	Muscular disorders of urethra
N39.41	Urge incontinence
N39.46	Mixed incontinence
N39.498	Other specified urinary incontinence
R49.8	Other voice and resonance disorders

Group 1 Medical Necessity ICD-10-CM Codes Asterisk Explanation:

H50.811*, H50.812,* Use for medial rectus weakness only G83.0*;G83.11*; G83.12*; G83.13*; G83.14*;N31.0*;N31.1*;N31.9* require a second code from Group 2 in order to be payable.

Group 2 Paragraph:

The following ICD-10-CM codes must be used in pairs, i.e., one primary diagnosis and one secondary diagnosis.

Primary diagnosis:

Group 2 Codes: (30 Codes)

CODE	DESCRIPTION
G36.1*	Acute and subacute hemorrhagic leukoencephalitis [Hurst]
G51.31*	Clonic hemifacial spasm, right
G51.32*	Clonic hemifacial spasm, left
G51.33*	Clonic hemifacial spasm, bilateral
G80.3*	Athetoid cerebral palsy
G82.50*	Quadriplegia, unspecified
G82.51*	Quadriplegia, C1-C4 complete
G82.52*	Quadriplegia, C1-C4 incomplete
G82.53*	Quadriplegia, C5-C7 complete
G82.54*	Quadriplegia, C5-C7 incomplete
G83.82*	Anterior cord syndrome
G83.89*	Other specified paralytic syndromes
M62.411*	Contracture of muscle, right shoulder
M62.412*	Contracture of muscle, left shoulder

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CODE	DESCRIPTION
M62.421*	Contracture of muscle, right upper arm
M62.422*	Contracture of muscle, left upper arm
M62.431*	Contracture of muscle, right forearm
M62.432*	Contracture of muscle, left forearm
M62.441*	Contracture of muscle, right hand
M62.442*	Contracture of muscle, left hand
M62.451*	Contracture of muscle, right thigh
M62.452*	Contracture of muscle, left thigh
M62.461*	Contracture of muscle, right lower leg
M62.462*	Contracture of muscle, left lower leg
M62.471*	Contracture of muscle, right ankle and foot
M62.472*	Contracture of muscle, left ankle and foot
M62.48*	Contracture of muscle, other site
M62.49*	Contracture of muscle, multiple sites
M62.831*	Muscle spasm of calf
M62.838*	Other muscle spasm

Group 2 Medical Necessity ICD-10-CM Codes Asterisk Explanation:

* The diagnosis codes above require a second code from Group 3 in order to be payable and are used only when there is spasticity of central nervous system origin.

Group 3 Paragraph:

Secondary diagnoses:

Group 3 Codes: (364 Codes)

DESCRIPTION
Tropical spastic paraplegia
Multiple sclerosis
Spastic hemiplegia affecting right dominant side
Spastic hemiplegia affecting left dominant side
Spastic hemiplegia affecting right nondominant side
Spastic hemiplegia affecting left nondominant side
Paraplegia, complete
Paraplegia, incomplete

CODE	DESCRIPTION
G93.40*	Encephalopathy, unspecified
G93.42*	Megaloencephalic leukoencephalopathy with subcortical cysts
G93.43*	Leukoencephalopathy with calcifications and cysts
G93.44*	Adult-onset leukodystrophy with axonal spheroids
G95.89*	Other specified diseases of spinal cord
G97.2*	Intracranial hypotension following ventricular shunting
G97.31*	Intraoperative hemorrhage and hematoma of a nervous system organ or structure complicating a nervous system procedure
G97.32*	Intraoperative hemorrhage and hematoma of a nervous system organ or structure complicating other procedure
G97.81*	Other intraoperative complications of nervous system
G97.82*	Other postprocedural complications and disorders of nervous system
I60.01*	Nontraumatic subarachnoid hemorrhage from right carotid siphon and bifurcation
I60.02*	Nontraumatic subarachnoid hemorrhage from left carotid siphon and bifurcation
I60.11*	Nontraumatic subarachnoid hemorrhage from right middle cerebral artery
I60.12*	Nontraumatic subarachnoid hemorrhage from left middle cerebral artery
I60.2*	Nontraumatic subarachnoid hemorrhage from anterior communicating artery
I60.31*	Nontraumatic subarachnoid hemorrhage from right posterior communicating artery
160.32*	Nontraumatic subarachnoid hemorrhage from left posterior communicating artery
I60.4*	Nontraumatic subarachnoid hemorrhage from basilar artery
I60.51*	Nontraumatic subarachnoid hemorrhage from right vertebral artery
I60.52*	Nontraumatic subarachnoid hemorrhage from left vertebral artery
I60.6*	Nontraumatic subarachnoid hemorrhage from other intracranial arteries
I60.8*	Other nontraumatic subarachnoid hemorrhage
I61.0*	Nontraumatic intracerebral hemorrhage in hemisphere, subcortical
I61.1*	Nontraumatic intracerebral hemorrhage in hemisphere, cortical
I61.3*	Nontraumatic intracerebral hemorrhage in brain stem
I61.4*	Nontraumatic intracerebral hemorrhage in cerebellum
I61.5*	Nontraumatic intracerebral hemorrhage, intraventricular
I61.6*	Nontraumatic intracerebral hemorrhage, multiple localized
I61.8*	Other nontraumatic intracerebral hemorrhage
I62.01*	Nontraumatic acute subdural hemorrhage

CODE	DESCRIPTION
I62.02*	Nontraumatic subacute subdural hemorrhage
I62.03*	Nontraumatic chronic subdural hemorrhage
I62.1*	Nontraumatic extradural hemorrhage
I63.011*	Cerebral infarction due to thrombosis of right vertebral artery
I63.012*	Cerebral infarction due to thrombosis of left vertebral artery
I63.013*	Cerebral infarction due to thrombosis of bilateral vertebral arteries
I63.02*	Cerebral infarction due to thrombosis of basilar artery
I63.031*	Cerebral infarction due to thrombosis of right carotid artery
I63.032*	Cerebral infarction due to thrombosis of left carotid artery
I63.033*	Cerebral infarction due to thrombosis of bilateral carotid arteries
I63.09*	Cerebral infarction due to thrombosis of other precerebral artery
I63.111*	Cerebral infarction due to embolism of right vertebral artery
I63.112*	Cerebral infarction due to embolism of left vertebral artery
I63.113*	Cerebral infarction due to embolism of bilateral vertebral arteries
I63.12*	Cerebral infarction due to embolism of basilar artery
I63.133*	Cerebral infarction due to embolism of bilateral carotid arteries
I63.19*	Cerebral infarction due to embolism of other precerebral artery
I63.211*	Cerebral infarction due to unspecified occlusion or stenosis of right vertebral artery
I63.212*	Cerebral infarction due to unspecified occlusion or stenosis of left vertebral artery
I63.213*	Cerebral infarction due to unspecified occlusion or stenosis of bilateral vertebral arteries
I63.233*	Cerebral infarction due to unspecified occlusion or stenosis of bilateral carotid arteries
I63.311*	Cerebral infarction due to thrombosis of right middle cerebral artery
I63.312*	Cerebral infarction due to thrombosis of left middle cerebral artery
I63.313*	Cerebral infarction due to thrombosis of bilateral middle cerebral arteries
I63.321*	Cerebral infarction due to thrombosis of right anterior cerebral artery
I63.322*	Cerebral infarction due to thrombosis of left anterior cerebral artery
I63.323*	Cerebral infarction due to thrombosis of bilateral anterior cerebral arteries
I63.331*	Cerebral infarction due to thrombosis of right posterior cerebral artery
I63.332*	Cerebral infarction due to thrombosis of left posterior cerebral artery
I63.333*	Cerebral infarction due to thrombosis of bilateral posterior cerebral arteries

CODE	DESCRIPTION
I63.341*	Cerebral infarction due to thrombosis of right cerebellar artery
I63.342*	Cerebral infarction due to thrombosis of left cerebellar artery
I63.343*	Cerebral infarction due to thrombosis of bilateral cerebellar arteries
I63.39*	Cerebral infarction due to thrombosis of other cerebral artery
I63.411*	Cerebral infarction due to embolism of right middle cerebral artery
I63.412*	Cerebral infarction due to embolism of left middle cerebral artery
I63.421*	Cerebral infarction due to embolism of right anterior cerebral artery
I63.422*	Cerebral infarction due to embolism of left anterior cerebral artery
I63.431*	Cerebral infarction due to embolism of right posterior cerebral artery
I63.432*	Cerebral infarction due to embolism of left posterior cerebral artery
I63.441*	Cerebral infarction due to embolism of right cerebellar artery
I63.442*	Cerebral infarction due to embolism of left cerebellar artery
I63.49*	Cerebral infarction due to embolism of other cerebral artery
I63.513*	Cerebral infarction due to unspecified occlusion or stenosis of bilateral middle cerebral arteries
I63.523*	Cerebral infarction due to unspecified occlusion or stenosis of bilateral anterior cerebral arteries
I63.533*	Cerebral infarction due to unspecified occlusion or stenosis of bilateral posterior cerebral arteries
I63.6*	Cerebral infarction due to cerebral venous thrombosis, nonpyogenic
I63.81*	Other cerebral infarction due to occlusion or stenosis of small artery
I63.89*	Other cerebral infarction
I69.031*	Monoplegia of upper limb following nontraumatic subarachnoid hemorrhage affecting right dominant side
169.032*	Monoplegia of upper limb following nontraumatic subarachnoid hemorrhage affecting left dominant side
169.033*	Monoplegia of upper limb following nontraumatic subarachnoid hemorrhage affecting right non-dominant side
I69.034*	Monoplegia of upper limb following nontraumatic subarachnoid hemorrhage affecting left non-dominant side
I69.041*	Monoplegia of lower limb following nontraumatic subarachnoid hemorrhage affecting right dominant side
I69.042*	Monoplegia of lower limb following nontraumatic subarachnoid hemorrhage affecting left dominant side

CODE	DESCRIPTION
I69.043*	Monoplegia of lower limb following nontraumatic subarachnoid hemorrhage affecting right non-dominant side
I69.044*	Monoplegia of lower limb following nontraumatic subarachnoid hemorrhage affecting left non-dominant side
I69.051*	Hemiplegia and hemiparesis following nontraumatic subarachnoid hemorrhage affecting right dominant side
I69.052*	Hemiplegia and hemiparesis following nontraumatic subarachnoid hemorrhage affecting left dominant side
I69.053*	Hemiplegia and hemiparesis following nontraumatic subarachnoid hemorrhage affecting right non-dominant side
I69.054*	Hemiplegia and hemiparesis following nontraumatic subarachnoid hemorrhage affecting left non-dominant side
I69.061*	Other paralytic syndrome following nontraumatic subarachnoid hemorrhage affecting right dominant side
I69.062*	Other paralytic syndrome following nontraumatic subarachnoid hemorrhage affecting left dominant side
CODE	DESCRIPTION
I69.063*	Other paralytic syndrome following nontraumatic subarachnoid hemorrhage affecting right non-dominant side
I69.064*	Other paralytic syndrome following nontraumatic subarachnoid hemorrhage affecting left non-dominant side
I69.065*	Other paralytic syndrome following nontraumatic subarachnoid hemorrhage, bilateral
I69.131*	Monoplegia of upper limb following nontraumatic intracerebral hemorrhage affecting right dominant side
I69.132*	Monoplegia of upper limb following nontraumatic intracerebral hemorrhage affecting left dominant side
I69.133*	Monoplegia of upper limb following nontraumatic intracerebral hemorrhage affecting right non-dominant side
I69.134*	Monoplegia of upper limb following nontraumatic intracerebral hemorrhage affecting left non-dominant side
I69.141*	Monoplegia of lower limb following nontraumatic intracerebral hemorrhage affecting right dominant side
I69.142*	Monoplegia of lower limb following nontraumatic intracerebral hemorrhage affecting left dominant side
I69.143*	Monoplegia of lower limb following nontraumatic intracerebral hemorrhage affecting right non-dominant side

CODE	DESCRIPTION
I69.144*	Monoplegia of lower limb following nontraumatic intracerebral hemorrhage affecting left non-dominant side
I69.151*	Hemiplegia and hemiparesis following nontraumatic intracerebral hemorrhage affecting right dominant side
I69.152*	Hemiplegia and hemiparesis following nontraumatic intracerebral hemorrhage affecting left dominant side
I69.153*	Hemiplegia and hemiparesis following nontraumatic intracerebral hemorrhage affecting right non-dominant side
I69.154*	Hemiplegia and hemiparesis following nontraumatic intracerebral hemorrhage affecting left non-dominant side
I69.161*	Other paralytic syndrome following nontraumatic intracerebral hemorrhage affecting right dominant side
I69.162*	Other paralytic syndrome following nontraumatic intracerebral hemorrhage affecting left dominant side
I69.163*	Other paralytic syndrome following nontraumatic intracerebral hemorrhage affecting right non-dominant side
I69.164*	Other paralytic syndrome following nontraumatic intracerebral hemorrhage affecting left non-dominant side
I69.165*	Other paralytic syndrome following nontraumatic intracerebral hemorrhage, bilateral
I69.231*	Monoplegia of upper limb following other nontraumatic intracranial hemorrhage affecting right dominant side
I69.232*	Monoplegia of upper limb following other nontraumatic intracranial hemorrhage affecting left dominant side
I69.233*	Monoplegia of upper limb following other nontraumatic intracranial hemorrhage affecting right non-dominant side
I69.234*	Monoplegia of upper limb following other nontraumatic intracranial hemorrhage affecting left non-dominant side
I69.241*	Monoplegia of lower limb following other nontraumatic intracranial hemorrhage affecting right dominant side
I69.242*	Monoplegia of lower limb following other nontraumatic intracranial hemorrhage affecting left dominant side
I69.243*	Monoplegia of lower limb following other nontraumatic intracranial hemorrhage affecting right non-dominant side
I69.244*	Monoplegia of lower limb following other nontraumatic intracranial hemorrhage affecting left non-dominant side
I69.251*	Hemiplegia and hemiparesis following other nontraumatic intracranial hemorrhage affecting right dominant side

CODE	DESCRIPTION
I69.252*	Hemiplegia and hemiparesis following other nontraumatic intracranial hemorrhage affecting left dominant side
I69.253*	Hemiplegia and hemiparesis following other nontraumatic intracranial hemorrhage affecting right non-dominant side
I69.254*	Hemiplegia and hemiparesis following other nontraumatic intracranial hemorrhage affecting left non-dominant side
I69.261*	Other paralytic syndrome following other nontraumatic intracranial hemorrhage affecting right dominant side
I69.262*	Other paralytic syndrome following other nontraumatic intracranial hemorrhage affecting left dominant side
169.263*	Other paralytic syndrome following other nontraumatic intracranial hemorrhage affecting right non-dominant side
I69.264*	Other paralytic syndrome following other nontraumatic intracranial hemorrhage affecting left non-dominant side
I69.265*	Other paralytic syndrome following other nontraumatic intracranial hemorrhage, bilateral
I69.331*	Monoplegia of upper limb following cerebral infarction affecting right dominant side
I69.332*	Monoplegia of upper limb following cerebral infarction affecting left dominant side
I69.333*	Monoplegia of upper limb following cerebral infarction affecting right non-dominant side
I69.334*	Monoplegia of upper limb following cerebral infarction affecting left non-dominant side
I69.341*	Monoplegia of lower limb following cerebral infarction affecting right dominant side
169.342*	Monoplegia of lower limb following cerebral infarction affecting left dominant side
I69.343*	Monoplegia of lower limb following cerebral infarction affecting right non-dominant side
I69.344*	Monoplegia of lower limb following cerebral infarction affecting left non-dominant side
I69.351*	Hemiplegia and hemiparesis following cerebral infarction affecting right dominant side
I69.352*	Hemiplegia and hemiparesis following cerebral infarction affecting left dominant side
I69.353*	Hemiplegia and hemiparesis following cerebral infarction affecting right non- dominant side
I69.354*	Hemiplegia and hemiparesis following cerebral infarction affecting left non-dominant side
I69.361*	Other paralytic syndrome following cerebral infarction affecting right dominant side

CODE	DESCRIPTION
169.362*	Other paralytic syndrome following cerebral infarction affecting left dominant side
I69.363*	Other paralytic syndrome following cerebral infarction affecting right non-dominant side
I69.364*	Other paralytic syndrome following cerebral infarction affecting left non-dominant side
I69.365*	Other paralytic syndrome following cerebral infarction, bilateral
I69.831*	Monoplegia of upper limb following other cerebrovascular disease affecting right dominant side
I69.832*	Monoplegia of upper limb following other cerebrovascular disease affecting left dominant side
I69.833*	Monoplegia of upper limb following other cerebrovascular disease affecting right non-dominant side
I69.834*	Monoplegia of upper limb following other cerebrovascular disease affecting left non- dominant side
I69.841*	Monoplegia of lower limb following other cerebrovascular disease affecting right dominant side
I69.842*	Monoplegia of lower limb following other cerebrovascular disease affecting left dominant side
I69.843*	Monoplegia of lower limb following other cerebrovascular disease affecting right non-dominant side
I69.844*	Monoplegia of lower limb following other cerebrovascular disease affecting left non- dominant side
I69.851*	Hemiplegia and hemiparesis following other cerebrovascular disease affecting right dominant side
I69.852*	Hemiplegia and hemiparesis following other cerebrovascular disease affecting left dominant side
I69.853*	Hemiplegia and hemiparesis following other cerebrovascular disease affecting right non-dominant side
I69.854*	Hemiplegia and hemiparesis following other cerebrovascular disease affecting left non-dominant side
I69.861*	Other paralytic syndrome following other cerebrovascular disease affecting right dominant side
I69.862*	Other paralytic syndrome following other cerebrovascular disease affecting left dominant side
I69.863*	Other paralytic syndrome following other cerebrovascular disease affecting right non-dominant side
I69.864*	Other paralytic syndrome following other cerebrovascular disease affecting left non-

CODE	DESCRIPTION	
	dominant side	
I69.865*	Other paralytic syndrome following other cerebrovascular disease, bilateral	
I69.932*	Monoplegia of upper limb following unspecified cerebrovascular disease affecting left dominant side	
169.933	Monoplegia of upper limb following unspecified cerebrovascular disease affecting right non-dominant side	
169.934	Monoplegia of upper limb following unspecified cerebrovascular disease affecting left non-dominant side	
I69.941	Monoplegia of lower limb following unspecified cerebrovascular disease affecting right dominant side	
I69.942*	Monoplegia of lower limb following unspecified cerebrovascular disease affecting left dominant side	
I69.943*	Monoplegia of lower limb following unspecified cerebrovascular disease affecting right non-dominant side	
I69.944*	Monoplegia of lower limb following unspecified cerebrovascular disease affecting left non-dominant side	
I69.961*	Other paralytic syndrome following unspecified cerebrovascular disease affecting right dominant side	
I69.963*	Other paralytic syndrome following unspecified cerebrovascular disease affecting right non-dominant side	
I69.964*	Other paralytic syndrome following unspecified cerebrovascular disease affecting left non-dominant side	
I69.965*	Other paralytic syndrome following unspecified cerebrovascular disease, bilateral	
197.810*	Intraoperative cerebrovascular infarction during cardiac surgery	
I97.811*	Intraoperative cerebrovascular infarction during other surgery	
197.820*	Postprocedural cerebrovascular infarction following cardiac surgery	
197.821*	Postprocedural cerebrovascular infarction following other surgery	
S14.0XXA*	Concussion and edema of cervical spinal cord, initial encounter	
S14.0XXD*	Concussion and edema of cervical spinal cord, subsequent encounter	
S14.0XXS*	Concussion and edema of cervical spinal cord, sequela	
S14.101A*	Unspecified injury at C1 level of cervical spinal cord, initial encounter	
S14.101D*	Unspecified injury at C1 level of cervical spinal cord, subsequent encounter	
S14.101S*	Unspecified injury at C1 level of cervical spinal cord, sequela	
S14.111A*	Complete lesion at C1 level of cervical spinal cord, initial encounter	
S14.111D*	Complete lesion at C1 level of cervical spinal cord, subsequent encounter	

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CODE	DESCRIPTION	
S14.111S*	Complete lesion at C1 level of cervical spinal cord, sequela	
S14.112A*	Complete lesion at C2 level of cervical spinal cord, initial encounter	
S14.112D*	Complete lesion at C2 level of cervical spinal cord, subsequent encounter	
S14.112S*	Complete lesion at C2 level of cervical spinal cord, sequela	
S14.113A*	Complete lesion at C3 level of cervical spinal cord, initial encounter	
S14.113D*	Complete lesion at C3 level of cervical spinal cord, subsequent encounter	
CODE	DESCRIPTION	
S14.113S*	Complete lesion at C3 level of cervical spinal cord, sequela	
S14.114A*	Complete lesion at C4 level of cervical spinal cord, initial encounter	
S14.114D*	Complete lesion at C4 level of cervical spinal cord, subsequent encounter	
S14.114S*	Complete lesion at C4 level of cervical spinal cord, sequela	
S14.115A*	Complete lesion at C5 level of cervical spinal cord, initial encounter	
S14.115D*	Complete lesion at C5 level of cervical spinal cord, subsequent encounter	
S14.115S*	Complete lesion at C5 level of cervical spinal cord, sequela	
S14.116A*	Complete lesion at C6 level of cervical spinal cord, initial encounter	
S14.116D*	Complete lesion at C6 level of cervical spinal cord, subsequent encounter	
S14.116S*	Complete lesion at C6 level of cervical spinal cord, sequela	
S14.117A*	Complete lesion at C7 level of cervical spinal cord, initial encounter	
S14.117D*	Complete lesion at C7 level of cervical spinal cord, subsequent encounter	
S14.117S*	Complete lesion at C7 level of cervical spinal cord, sequela	
S14.118A*	18A* Complete lesion at C8 level of cervical spinal cord, initial encounter	
S14.118D*	Complete lesion at C8 level of cervical spinal cord, subsequent encounter	
S14.118S*	Complete lesion at C8 level of cervical spinal cord, sequela	
S14.121A*	Central cord syndrome at C1 level of cervical spinal cord, initial encounter	
S14.121D*	Central cord syndrome at C1 level of cervical spinal cord, subsequent encounter	
S14.121S*	Central cord syndrome at C1 level of cervical spinal cord, sequela	
S14.122A*	Central cord syndrome at C2 level of cervical spinal cord, initial encounter	
S14.122D*	Central cord syndrome at C2 level of cervical spinal cord, subsequent encounter	
S14.122S*	Central cord syndrome at C2 level of cervical spinal cord, sequela	
S14.123A*	Central cord syndrome at C3 level of cervical spinal cord, initial encounter	
S14.123D*	Central cord syndrome at C3 level of cervical spinal cord, subsequent encounter	
S14.123S*	Central cord syndrome at C3 level of cervical spinal cord, sequela	

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CODE	DESCRIPTION
S14.124A*	Central cord syndrome at C4 level of cervical spinal cord, initial encounter
S14.124D*	Central cord syndrome at C4 level of cervical spinal cord, subsequent encounter
S14.124S*	Central cord syndrome at C4 level of cervical spinal cord, sequela
S14.125A*	Central cord syndrome at C5 level of cervical spinal cord, initial encounter
S14.125D*	Central cord syndrome at C5 level of cervical spinal cord, subsequent encounter
S14.125S*	Central cord syndrome at C5 level of cervical spinal cord, sequela
S14.126A*	Central cord syndrome at C6 level of cervical spinal cord, initial encounter
S14.126D*	Central cord syndrome at C6 level of cervical spinal cord, subsequent encounter
S14.126S*	Central cord syndrome at C6 level of cervical spinal cord, sequela
S14.127A*	Central cord syndrome at C7 level of cervical spinal cord, initial encounter
S14.127D*	Central cord syndrome at C7 level of cervical spinal cord, subsequent encounter
S14.127S*	Central cord syndrome at C7 level of cervical spinal cord, sequela
S14.128A*	Central cord syndrome at C8 level of cervical spinal cord, initial encounter
S14.128D*	Central cord syndrome at C8 level of cervical spinal cord, subsequent encounter
S14.128S*	Central cord syndrome at C8 level of cervical spinal cord, sequela
S14.131A*	Anterior cord syndrome at C1 level of cervical spinal cord, initial encounter
S14.131D*	Anterior cord syndrome at C1 level of cervical spinal cord, subsequent encounter
S14.131S*	Anterior cord syndrome at C1 level of cervical spinal cord, sequela
S14.132A*	Anterior cord syndrome at C2 level of cervical spinal cord, initial encounter
S14.132D*	Anterior cord syndrome at C2 level of cervical spinal cord, subsequent encounter
S14.132S*	Anterior cord syndrome at C2 level of cervical spinal cord, sequela
S14.133A*	Anterior cord syndrome at C3 level of cervical spinal cord, initial encounter
S14.133D*	Anterior cord syndrome at C3 level of cervical spinal cord, subsequent encounter
S14.133S*	Anterior cord syndrome at C3 level of cervical spinal cord, sequela
S14.134A*	Anterior cord syndrome at C4 level of cervical spinal cord, initial encounter
S14.134D*	Anterior cord syndrome at C4 level of cervical spinal cord, subsequent encounter
S14.134S*	Anterior cord syndrome at C4 level of cervical spinal cord, sequela
S14.135A*	Anterior cord syndrome at C5 level of cervical spinal cord, initial encounter
S14.135D*	Anterior cord syndrome at C5 level of cervical spinal cord, subsequent encounter
S14.135S*	Anterior cord syndrome at C5 level of cervical spinal cord, sequela
S14.136A*	Anterior cord syndrome at C6 level of cervical spinal cord, initial encounter
S14.136D*	Anterior cord syndrome at C6 level of cervical spinal cord, subsequent encounter

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CODE	DESCRIPTION	
S14.136S*	Anterior cord syndrome at C6 level of cervical spinal cord, sequela	
S14.137A*	Anterior cord syndrome at C7 level of cervical spinal cord, initial encounter	
S14.137D*	Anterior cord syndrome at C7 level of cervical spinal cord, subsequent encounter	
S14.137S*	Anterior cord syndrome at C7 level of cervical spinal cord, sequela	
S14.138A*	Anterior cord syndrome at C8 level of cervical spinal cord, initial encounter	
S14.138D*	Anterior cord syndrome at C8 level of cervical spinal cord, subsequent encounter	
S14.138S*	Anterior cord syndrome at C8 level of cervical spinal cord, sequela	
S14.141A*	Brown-Sequard syndrome at C1 level of cervical spinal cord, initial encounter	
S14.141D*	Brown-Sequard syndrome at C1 level of cervical spinal cord, subsequent encounter	
S14.141S*	Brown-Sequard syndrome at C1 level of cervical spinal cord, sequela	
S14.142A*	Brown-Sequard syndrome at C2 level of cervical spinal cord, initial encounter	
S14.142D*	Brown-Sequard syndrome at C2 level of cervical spinal cord, subsequent encounter	
S14.142S*	Brown-Sequard syndrome at C2 level of cervical spinal cord, sequela	
S14.143A*	Brown-Sequard syndrome at C3 level of cervical spinal cord, initial encounter	
S14.143D*	Brown-Sequard syndrome at C3 level of cervical spinal cord, subsequent encounter	
S14.143S*	Brown-Sequard syndrome at C3 level of cervical spinal cord, sequela	
S14.144A*	Brown-Sequard syndrome at C4 level of cervical spinal cord, initial encounter	
S14.144D*	Brown-Sequard syndrome at C4 level of cervical spinal cord, subsequent encounter	
S14.144S*	Brown-Sequard syndrome at C4 level of cervical spinal cord, sequela	
S14.145A*	Brown-Sequard syndrome at C5 level of cervical spinal cord, initial encounter	
S14.145D*	Brown-Sequard syndrome at C5 level of cervical spinal cord, subsequent encounter	
S14.145S*	Brown-Sequard syndrome at C5 level of cervical spinal cord, sequela	
S14.146A*	Brown-Sequard syndrome at C6 level of cervical spinal cord, initial encounter	
S14.146D*	Brown-Sequard syndrome at C6 level of cervical spinal cord, subsequent encounter	
S14.146S*	Brown-Sequard syndrome at C6 level of cervical spinal cord, sequela	
S14.147A*	Brown-Sequard syndrome at C7 level of cervical spinal cord, initial encounter	
S14.147D*	Brown-Sequard syndrome at C7 level of cervical spinal cord, subsequent encounter	
S14.147S*	Brown-Sequard syndrome at C7 level of cervical spinal cord, sequela	
S14.148A*	Brown-Sequard syndrome at C8 level of cervical spinal cord, initial encounter	
S14.148D*	Brown-Sequard syndrome at C8 level of cervical spinal cord, subsequent encounter	
S14.148S*	Brown-Sequard syndrome at C8 level of cervical spinal cord, sequela	
S14.151A*	Other incomplete lesion at C1 level of cervical spinal cord, initial encounter	

CODE	DESCRIPTION		
S14.151D*	Other incomplete lesion at C1 level of cervical spinal cord, subsequent encounter		
S14.151S*	Other incomplete lesion at C1 level of cervical spinal cord, sequela		
S14.152A*	Other incomplete lesion at C2 level of cervical spinal cord, initial encounter		
S14.152D*	Other incomplete lesion at C2 level of cervical spinal cord, subsequent encounter		
S14.152S*	Other incomplete lesion at C2 level of cervical spinal cord, sequela		
S14.153A*	Other incomplete lesion at C3 level of cervical spinal cord, initial encounter		
S14.153D*	Other incomplete lesion at C3 level of cervical spinal cord, subsequent encounter		
S14.153S*	Other incomplete lesion at C3 level of cervical spinal cord, sequela		
S14.154A*	Other incomplete lesion at C4 level of cervical spinal cord, initial encounter		
S14.154D*	Other incomplete lesion at C4 level of cervical spinal cord, subsequent encounter		
S14.154S*	Other incomplete lesion at C4 level of cervical spinal cord, sequela		
CODE	DESCRIPTION		
S14.155A*	Other incomplete lesion at C5 level of cervical spinal cord, initial encounter		
S14.155D*	Other incomplete lesion at C5 level of cervical spinal cord, subsequent encounter		
S14.155S*	Other incomplete lesion at C5 level of cervical spinal cord, sequela		
S14.156A*	Other incomplete lesion at C6 level of cervical spinal cord, initial encounter		
S14.156D*	Other incomplete lesion at C6 level of cervical spinal cord, subsequent encounter		
S14.156S*	Other incomplete lesion at C6 level of cervical spinal cord, sequela		
S14.157A*	Other incomplete lesion at C7 level of cervical spinal cord, initial encounter		
S14.157D*	Other incomplete lesion at C7 level of cervical spinal cord, subsequent encounter		
S14.157S*	Other incomplete lesion at C7 level of cervical spinal cord, sequela		
S14.158A*	Other incomplete lesion at C8 level of cervical spinal cord, initial encounter		
S14.158D*	Other incomplete lesion at C8 level of cervical spinal cord, subsequent encounter		
S14.158S*	Other incomplete lesion at C8 level of cervical spinal cord, sequela		
S24.0XXA*	Concussion and edema of thoracic spinal cord, initial encounter		
S24.0XXD*	Concussion and edema of thoracic spinal cord, subsequent encounter		
S24.0XXS*	Concussion and edema of thoracic spinal cord, sequela		
S24.111A*	Complete lesion at T1 level of thoracic spinal cord, initial encounter		
S24.111D*	Complete lesion at T1 level of thoracic spinal cord, subsequent encounter		
S24.111S*	Complete lesion at T1 level of thoracic spinal cord, sequela		
S24.112A*	Complete lesion at T2-T6 level of thoracic spinal cord, initial encounter		
S24.112D*	Complete lesion at T2-T6 level of thoracic spinal cord, subsequent encounter		

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CODE	DESCRIPTION		
S24.112S*	Complete lesion at T2-T6 level of thoracic spinal cord, sequela		
S24.113A*	Complete lesion at T7-T10 level of thoracic spinal cord, initial encounter		
S24.113D*	Complete lesion at T7-T10 level of thoracic spinal cord, subsequent encounter		
S24.113S*	Complete lesion at T7-T10 level of thoracic spinal cord, sequela		
S24.114A*	Complete lesion at T11-T12 level of thoracic spinal cord, initial encounter		
S24.114D*	Complete lesion at T11-T12 level of thoracic spinal cord, subsequent encounter		
S24.114S*	Complete lesion at T11-T12 level of thoracic spinal cord, sequela		
S24.131A*	Anterior cord syndrome at T1 level of thoracic spinal cord, initial encounter		
S24.131D*	Anterior cord syndrome at T1 level of thoracic spinal cord, subsequent encounter		
S24.131S*	Anterior cord syndrome at T1 level of thoracic spinal cord, sequela		
S24.132A*	Anterior cord syndrome at T2-T6 level of thoracic spinal cord, initial encounter		
S24.132D*	Anterior cord syndrome at T2-T6 level of thoracic spinal cord, subsequent encounter		
S24.132S*	Anterior cord syndrome at T2-T6 level of thoracic spinal cord, sequela		
S24.133A*	Anterior cord syndrome at T7-T10 level of thoracic spinal cord, initial encounter		
S24.133D*	Anterior cord syndrome at T7-T10 level of thoracic spinal cord, subsequent encounter		
S24.133S*	Anterior cord syndrome at T7-T10 level of thoracic spinal cord, sequela		
S24.134A*	Anterior cord syndrome at T11-T12 level of thoracic spinal cord, initial encounter		
S24.134D*	Anterior cord syndrome at T11-T12 level of thoracic spinal cord, subsequent encounter		
S24.134S*	Anterior cord syndrome at T11-T12 level of thoracic spinal cord, sequela		
S24.141A*	Brown-Sequard syndrome at T1 level of thoracic spinal cord, initial encounter		
S24.141D*	Brown-Sequard syndrome at T1 level of thoracic spinal cord, subsequent encounter		
S24.141S*	Brown-Sequard syndrome at T1 level of thoracic spinal cord, sequela		
S24.142A*	Brown-Sequard syndrome at T2-T6 level of thoracic spinal cord, initial encounter		
S24.142D*	Brown-Sequard syndrome at T2-T6 level of thoracic spinal cord, subsequent encounter		
S24.142S*	Brown-Sequard syndrome at T2-T6 level of thoracic spinal cord, sequela		
S24.143A*	Brown-Sequard syndrome at T7-T10 level of thoracic spinal cord, initial encounter		
S24.143D*	Brown-Sequard syndrome at T7-T10 level of thoracic spinal cord, subsequent encounter		
S24.143S*	Brown-Sequard syndrome at T7-T10 level of thoracic spinal cord, sequela		
S24.144A*	Brown-Sequard syndrome at T11-T12 level of thoracic spinal cord, initial encounter		

CODE	DESCRIPTION	
S24.144D*	Brown-Sequard syndrome at T11-T12 level of thoracic spinal cord, subsequent encounter	
S24.144S*	Brown-Sequard syndrome at T11-T12 level of thoracic spinal cord, sequela	
S24.151A*	Other incomplete lesion at T1 level of thoracic spinal cord, initial encounter	
S24.151D*	Other incomplete lesion at T1 level of thoracic spinal cord, subsequent encounter	
S24.151S*	Other incomplete lesion at T1 level of thoracic spinal cord, sequela	
S24.152A*	Other incomplete lesion at T2-T6 level of thoracic spinal cord, initial encounter	
S24.152D*	Other incomplete lesion at T2-T6 level of thoracic spinal cord, subsequent encounter	
S24.152S*	Other incomplete lesion at T2-T6 level of thoracic spinal cord, sequela	
S24.153A*	Other incomplete lesion at T7-T10 level of thoracic spinal cord, initial encounter Other incomplete lesion at T7-T10 level of thoracic spinal cord, subsequent encounter	
S24.153D*		
S24.153S*	Other incomplete lesion at T7-T10 level of thoracic spinal cord, sequela	
S24.154A*	Other incomplete lesion at T11-T12 level of thoracic spinal cord, initial encounter	
S24.154D*	Other incomplete lesion at T11-T12 level of thoracic spinal cord, subsequent encounter	
S24.154S*	Other incomplete lesion at T11-T12 level of thoracic spinal cord, sequela	

Group 3 Medical Necessity ICD-10-CM Codes Asterisk Explanation:

* The diagnosis codes above require a second code from Group 2 in order to be payable.

ICD-10-CM Codes that DO NOT Support Medical Necessity

Group 1 Paragraph:

All ICD-10-CM codes not listed in this article under ICD-10-CM codes that Support Medical Necessity

Group 1 Codes:

N/A

ICD-10-PCS Codes		
Group 1 Paragraph:		
N/A		

Group 1 Codes:

N/A

Additional	ICD-10	Information
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N/A

Bill Type Codes

Contractors may specify Bill Types to help providers identify those Bill Types typically used to report this service. Absence of a Bill Type does not guarantee that the article does not apply to that Bill Type. Complete absence of all Bill Types indicates that coverage is not influenced by Bill Type and the article should be assumed to apply equally to all claims.

CODE	DESCRIPTION
999x	Not Applicable

Revenue Codes

Contractors may specify Revenue Codes to help providers identify those Revenue Codes typically used to report this service. In most instances Revenue Codes are purely advisory. Unless specified in the article, services reported under other Revenue Codes are equally subject to this coverage determination. Complete absence of all Revenue Codes indicates that coverage is not influenced by Revenue Code and the article should be assumed to apply equally to all Revenue Codes.

N/A

CODE	DESCRIPTION
99999	Not Applicable

Other Coding Information			
Group 1 Paragraph:			
N/A			
Group 1 Codes:			
N/A			

Revision History Information

REVISION HISTORY DATE	REVISION HISTORY NUMBER	REVISION HISTORY EXPLANATION
10/01/2023	R7	Updated to indicate this article is an LCD Reference Article.

REVISION HISTORY DATE	REVISION HISTORY NUMBER	REVISION HISTORY EXPLANATION	
10/01/2023	R6	Per Annual ICD-10 Updates:	
		The following codes were added to Group 1: G43.E01, G43.E09, G43.E11, G43.E19	
		These updates are effective 10/01/2023.	
10/01/2023	R5	Per Annual ICD-10 Updates:	
		The following codes were added to Group 1: G37.81, G37.89, H50.621, H50.622, H50.629, H50.631, H50.632, H50.639, H50.641, H50.642, H50.649, H50.651, H50.652, H50.659, H50.661, H50.662, H50.669, H50.671, H50.672, H50.679, H50.681, H50.682, H50.689.	
		The following codes were deleted from Group 1: G37.8.	
		The following codes were added to Group 3: G93.42, G93.43, G93.44.	
01/01/2023	R4	Removed the asterisk (*) from ICD-10 Code K22.0 in Group 1 ICD-10 Codes as it was inappropriately placed on that code. This update is effective 10/01/2019 to match the original effective date of the policy.	
01/01/2023	R3	Per 2023 CPT/HCPCS updates, either the long or short descriptions of CPT codes 43499 and 64999 have been updated.	
10/01/2020	R2	Under Article Text added: Added <i>anatomic to bullet "A complete anatomic description of the site(s) injected.</i>	
		Added after last paragraph: Due to the short life of botulinum toxin, Medicare will reimburse the unused portion of these drugs. (R3538CP-1) Therefore, scheduling of more than one patient, where possible, is allowed to prevent wastage of botulinum toxin.	
		In all cases, the documentation must show the exact dosage of the drug given to the patient, the reason for unavoidable wastage, and the amount of the discarded portion of the drug.	
		If a single dose vial is split between multiple patients, Medicare will allow payment only for the portion used for the beneficiary plus a pro rata amount for wastage. Note that if non-Medicare patients are treated with a portion of the same vial, it would be expected that those non-Medicare patients be billed for their pro rata share of wastage.	

REVISION HISTORY DATE	REVISION HISTORY NUMBER	REVISION HISTORY EXPLANATION	
		Bill Medicare patients for wastage using the -JW modifier on a separate line and the appropriate number of units, rounded to the nearest unit such that the total billed does not exceed the contents of the vial.	
		For split vials, for example, if patient 1 received 30 units and patient 2 received 60 units from a 100 unit vial, wastage billed with -JW would be:	
		 patient 1: 3 units [(30 units used for the patient/90 total units used) * 10 units of wastage = 3.33 rounded to 3] patient 2: 7 units [(60 units used for the patient/90 total units used) * 10 units of wastage = 6.66 rounded to 7] 	
		If additional vials are needed to address the needs of a set of patients, pro rata wastage should be calculated over the total vial volume for that session. Furthermore it is expected that a provider will use the most economical combination of vials that will meet the needs of a set of patients should multiple sizes be available.	
		If the HCPCS code for the administered drug represents other than 1 unit of drug (e.g., 100 units of the drug could be 1 HCPCS "unit") rounding should be in relation to the nearest full HCPCS unit for the administered drug (rounded down) and any reported wastage (rounded up, but not to exceed the total contents of the vial)	
10/01/2020	R1	Move of G82.50* and G82.54* from Group III to Group II - Typographical Error.	

Associated Documents

Related Local Coverage Documents

Articles

A55383 - Response to Comments: Botulinum Toxin Types A and B

LCDs

DL35170 - (MCD Archive Site)

L35170 - Botulinum Toxin Types A and B Policy

Related National Coverage Documents

N/A

Statutory Requirements URLs

N/A

Rules and Regulations URLs

N/A

CMS Manual Explanations URLs

N/A

Other URLs

N/A

Public Versions

UPDATED ON	EFFECTIVE DATES	STATUS				
Some older versions have been archived. Please visit the MCD Archive Site to retrieve them.						
11/08/2023	10/01/2023 - N/A	Currently in Effect (This Version)				
10/17/2023	10/01/2023 - N/A	Superseded				
08/24/2023	10/01/2023 - N/A	Superseded				
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Keywords

N/A