

Local Coverage Article: Billing and Coding: IUD (Hormone-Eluting) for Endometrial Hyperplasia - CPT 58999 (A55061)

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Contractor Information

CONTRACTOR NAME	CONTRACT TYPE	CONTRACT NUMBER	JURISDICTION	STATE(S)
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

Article ID

A55061

Original Effective Date

10/01/2015

Article Title

Billing and Coding: IUD (Hormone-Eluting) for
Endometrial Hyperplasia - CPT 58999

Revision Effective Date

10/01/2015

Article Type

Billing and Coding

Revision Ending Date

N/A

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Retirement Date

N/A

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CMS National Coverage Policy

N/A

Article Guidance

Article Text:

Providers are aware that Medicare does not allow payment for contraceptive devices or medication. For this reason the service, 58300, insertion of intrauterine device (IUD) has an "N" status in the Medicare Physician Fee Schedule, which means the service cannot be covered when billed to Medicare.

Noridian is aware that insertion of a progestin-containing intrauterine device (IUD) is an alternative method of managing endometrial hyperplasia in patients who are not reasonable surgical candidates or who wish to preserve fertility. Noridian has determined that the use of a progestin containing IUD may be approved for use in the Medicare beneficiary who presents with endometrial hyperplasia without atypia.

Since the CPT code for IUD insertion will be auto-denied, providers should bill this service using CPT 58999 and an appropriate diagnosis for endometrial hyperplasia, including the product description "hormone IUD for endometrial hyperplasia" in Item 19 of the CMS-1500 form or the electronic equivalent.

Acceptable CPT Code for Billing IUD Insertion**CPT DESCRIPTION**

58999 UNLISTED PROCEDURE, FEMALE GENITAL SYSTEM (NON-OBSTETRICAL)

Acceptable ICD-10-CM Codes for Billing IUD Insertion**ICD-10-CM Codes Description**

N85.00 ENDOMETRIAL HYPERPLASIA, unspecified

N85.01 SIMPLE ENDOMETRIAL HYPERPLASIA WITHOUT ATYPIA

The medical record must clearly document the specific clinical circumstances evidencing this medical necessity.

Effective Immediately

Coding Information

CPT/HCPCS Codes**Group 1 Paragraph:**

58999

Group 1 Codes:

N/A

CPT/HCPCS Modifiers

N/A

ICD-10 Codes that Support Medical Necessity**Group 1 Paragraph:**

N85.00

N85.01

Group 1 Codes:

N/A

ICD-10 Codes that DO NOT Support Medical Necessity

N/A

Additional ICD-10 Information

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 policy does not apply to that Bill Type. Complete absence of all Bill Types indicates that coverage is not influenced by Bill Type and the policy should be assumed to apply equally to all claims.

N/A

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 policy, 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 policy should be assumed to apply equally to all Revenue Codes.

N/A

Other Coding Information

N/A

Revision History Information

REVISION HISTORY DATE	REVISION HISTORY NUMBER	REVISION HISTORY EXPLANATION
10/01/2015	R2	Converted to Billing and Coding article type only. No changes to article content.

REVISION HISTORY DATE	REVISION HISTORY NUMBER	REVISION HISTORY EXPLANATION
10/01/2015	R1	Typographical error - duplication of the word 'are'.

Associated Documents

Related Local Coverage Document(s)

N/A

Related National Coverage Document(s)

N/A

Statutory Requirements URL(s)

N/A

Rules and Regulations URL(s)

N/A

CMS Manual Explanations URL(s)

N/A

Other URL(s)

N/A

Public Version(s)

Updated on 05/08/2020 with effective dates 10/01/2015 - N/A

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Keywords

- IUD
- Hormone-Eluting
- Endometrial
- Hyperplasia
- 58999