

Local Coverage Determination (LCD): Plastic Surgery (L37020)

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Contractor Information

| Contractor Name | Contract Type | Contract Number | Jurisdiction | State(s) |
|--|---------------|-----------------|--------------|--------------|
| Noridian Healthcare Solutions, LLC | A and B MAC | 02101 - MAC A | J - F | Alaska |
| Noridian Healthcare Solutions, LLC | A and B MAC | 02102 - MAC B | J - F | Alaska |
| Noridian Healthcare Solutions, LLC | A and B MAC | 02201 - MAC A | J - F | Idaho |
| Noridian Healthcare Solutions, LLC | A and B MAC | 02202 - MAC B | J - F | Idaho |
| Noridian Healthcare Solutions, LLC | A and B MAC | 02301 - MAC A | J - F | Oregon |
| Noridian Healthcare Solutions, LLC | A and B MAC | 02302 - MAC B | J - F | Oregon |
| Noridian Healthcare Solutions, LLC | A and B MAC | 02401 - MAC A | J - F | Washington |
| Noridian Healthcare Solutions, LLC | A and B MAC | 02402 - MAC B | J - F | Washington |
| Noridian Healthcare Solutions, LLC | A and B MAC | 03101 - MAC A | J - F | Arizona |
| Noridian Healthcare Solutions, LLC | A and B MAC | 03102 - MAC B | J - F | Arizona |
| Noridian Healthcare Solutions, LLC | A and B MAC | 03201 - MAC A | J - F | Montana |
| Noridian Healthcare Solutions, LLC | A and B MAC | 03202 - MAC B | J - F | Montana |
| Noridian Healthcare Solutions, LLC | A and B MAC | 03301 - MAC A | J - F | North Dakota |
| Noridian Healthcare Solutions, LLC | A and B MAC | 03302 - MAC B | J - F | North Dakota |
| Noridian Healthcare Solutions, LLC | A and B MAC | 03401 - MAC A | J - F | South Dakota |
| Noridian Healthcare Solutions, LLC | A and B MAC | 03402 - MAC B | J - F | South Dakota |
| Noridian Healthcare Solutions, LLC | A and B MAC | 03501 - MAC A | J - F | Utah |
| Noridian Healthcare Solutions, LLC | A and B MAC | 03502 - MAC B | J - F | Utah |
| Noridian Healthcare Solutions, LLC | A and B MAC | 03601 - MAC A | J - F | Wyoming |
| Noridian Healthcare Solutions, LLC | A and B MAC | 03602 - MAC B | J - F | Wyoming |

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LCD Information

Document Information

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| LCD ID L37020 | Original Effective Date For services performed on or after 10/10/2017 |
| LCD Title Plastic Surgery | Revision Effective Date For services performed on or after 10/10/2017 |
| Proposed LCD in Comment Period N/A | Revision Ending Date N/A |
| Source Proposed LCD DL37020 | Retirement Date N/A |
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| | Notice Period End Date 10/09/2017 |

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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.

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

Title XVIII of the Social Security Act, §1862(a)(10). Coverage of cosmetic surgery is discussed.

Medicare On-Line Manual System, Publication 100-02, *Medicare Benefit Policy Manual*, Chapter 16, §§10, 120, and 180.

Medicare On-Line Manual System, Publication 100-03, *Medicare National Coverage Determinations Manual*, Chapter 1, Part 2, §§140.2 and 140.4.

Coverage Guidance

Coverage Indications, Limitations, and/or Medical Necessity

According to the American Society of Plastic Surgeons, the specialty of plastic surgery includes reconstructive surgery and cosmetic surgery.

Reconstructive Surgery

Reconstructive surgery is performed on abnormal structures of the body caused by congenital defects, developmental abnormalities, trauma, infection, tumors, or disease. It is generally performed to improve function but may also be done to approximate a normal appearance.

Transgender Surgery

This policy does not address coverage for procedures associated with transgender surgery. All coverage determinations for transgender surgery are currently handled by individual consideration on a case by case review with particular consideration of the World Professional Association for Transgender Health (WPATH) Standards of Care as interpreted through the various Medicare statutes, rules, regulations, and Manual instructions.

Cosmetic Surgery

Cosmetic surgery is performed to reshape normal structures of the body to improve the patient's appearance and self-esteem.

As it regards a Medicare covered benefit the *Medicare Internet Only Manual 100-02 Chapter 16* states: Cosmetic surgery or expenses incurred in connection with such surgery is not covered. Cosmetic surgery includes any surgical procedure directed at improving appearance, except when required for the prompt (i.e., as soon as medically feasible) repair of accidental injury or for the improvement of the functioning of a malformed body member. For example, this exclusion does not apply to surgery in connection with treatment of severe burns or repair of the face following a serious automobile accident, or to surgery for therapeutic purposes which coincidentally also serves some cosmetic purpose.

Surgery to correct congenital defects, developmental abnormalities, trauma, infections, tumors, or disease may be covered when the surgery is considered reconstructive in nature.

Cosmetic surgery performed purely for the purpose of enhancing one's appearance is not eligible for coverage. Cosmetic surgery performed to treat psychiatric or emotional problems is not covered.

Corrective facial surgery will be considered cosmetic rather than reconstructive when there is no functional impairment present.

If a noncovered cosmetic surgery is performed in the same operative period as a covered surgical procedure, benefits will be provided for the covered surgical procedure only.

Benefits may be provided for complications arising from cosmetic surgery. Such complications include infection, hemorrhage, or other serious documented medical complication.

Payment may be made for the following procedures when performed for the reasons indicated:

1. Reduction Mammoplasty

Macromastia (also called breast hypertrophy) is an increase in the volume and weight of breast tissue relative to the general body habitus. Macromastia may adversely affect other body systems: such as musculoskeletal, respiratory, and integument (skin). These symptoms include but are not necessarily limited to:

1. Muscle strain such as backache, neck pain, shoulder pain and less often upper extremity peripheral neuropathy and/or headache;
2. Problems associated with excess breast weight and brassiere support such as clavicular bra strap grooves;
3. Hygiene problems such as intertrigo, exacerbation of acne in the folds underneath the breast and/or local hidradenitis suppurativa refractory to usual medical care;
4. Clearly demonstrated interference with normal activities of daily living as noted as noted by a breast specific questionnaire for ADLs;

Reduction mammoplasty is covered by Medicare when it is performed:

1. To reduce the size of the hypertrophic breast(s) and reduce or alleviate symptoms caused by the breast hypertrophy, or
2. To reduce the size of a normal breast to bring it into symmetry with a breast reconstructed after breast cancer surgery.

Non-surgical interventions preceding reduction mammoplasty should include **as appropriate**, but are not limited to, the following:

- Determining the macromastia is not due to an active endocrine or metabolic process
- Determining the symptoms are refractory to appropriately fitted supporting garments, or following unilateral mastectomy, persistent with an appropriately fitted prosthesis or reconstruction therapy at the site of the absent breast.
- Determining that dermatologic signs and/or symptoms are refractory to, or recurrent following, a completed course of medical management.

For Medicare purposes, a reasonable and necessary reduction mammoplasty may be indicated in the presence of significantly enlarged breasts and the presence of **at least two** of the following signs and/or symptoms when the breast hypertrophy and the symptoms and signs have been present for at least six months and have not responded to a reasonable non-surgical care program:

- Upper back, shoulder and /or neck pain that appears to be directly correlated to the macromastia

- Headache (cephalgia) when same can be directly attributed to the excessive breast weight and its effect on the neck and/or shoulders and other reasonable causes of a headache have been addressed/ruled out
- Significant thoracic kyphosis which is felt to be directly correlated to the breast hypertrophy.
- Chronic breast pain due to the excessive weight of the breasts.
- Intertriginous maceration or infection of the inframammary skin refractory to usual dermatologic measures.
- Shoulder grooving from supporting garment (bra strap).
- Upper extremity paresthesia due to brachial plexus compressions syndrome secondary to the weight of the breasts being transferred to the shoulder strap area

The MAC understands that conservative measures are often not effective or sustained however given the risks of surgery these measures should be attempted for a reasonable period of time as some patients will respond and be able to avoid surgery and the inherent surgical risks. Complications of reduction mammoplasty surgery include but are not limited to:

- Infection
- Delayed wound healing
- Wound dehiscence
- Hematoma and/or seroma
- Skin or nipple-areola necrosis
- Fat necrosis
- Cosmetic deformity
- Unfavorable scarring
- Alteration of nipple sensation
- Thromboembolic complications (blood clots)
- Inability to breast feed
- Need for surgical revision
- Need for physical therapy
- Potential for anesthesia related complications

Considerable attention has been given to the amount of breast tissue removed in differentiating between cosmetic and medically necessary reduction mammoplasty. Evidence indicates that patients experience similar preoperative breast hypertrophy related symptoms and similar postoperative symptom relief after reduction mammoplasty regardless of resection volume

In a prospective trial of 188 patients undergoing reduction mammoplasty for macromastia related symptoms the degree of relief was not correlated with the amount of breast volume removed. The surgeon must document in the clinical records the amount of tissue reduction anticipated and the rationale on how that amount was determined.

Medicare coverage of reduction mammoplasty is limited to those circumstances where the medical record supports medical necessity and reasonableness criteria including:

- The signs and/or symptoms have been present for at least six months
- Medical treatment and/or physical interventions have not adequately alleviated symptoms
- The patient has been informed of the risks of complications
- The notes indicate the proposed amount of tissue to be removed and the rationale supporting that determination

Cosmetic surgery to reshape the breasts to improve appearance is not a Medicare benefit. Cosmetic signs and/or symptoms would include ptosis, poorly fitting clothing and beneficiary perception of unacceptable appearance.

2. Removal of Breast Implants

For a patient who has had an implant(s) placed for reconstructive or cosmetic purposes, Medicare considers treatment of any one or more of the following conditions to be medically necessary:

- Broken or failed implant
- Infection
- Implant extrusion
- Siliconoma or granuloma
- Interference with diagnosis of breast cancer
- Painful capsular contracture with disfigurement

3. Mastectomy for gynecomastia (19300)

Gynecomastia is the excessive growth of the male mammary glands. This condition may cause significant clinical manifestations when the excessive breast weight adversely affects the supporting structures of the shoulders, neck, and trunk.

Mastectomy with nipple preservation or reduction mammoplasty is considered reconstructive and a covered service for males with gynecomastia Grade III and IV or abnormal breast development with redundancy.

American Society of Plastic Surgeons' gynecomastia scale:

- Grade II: Moderate breast enlargement exceeding areola boundaries with edges that are indistinct from the chest
- Grade III: Moderate breast enlargement exceeding areola boundaries with edges that are indistinct from the chest with skin redundancy present
- Grade IV: Marked breast enlargement with skin redundancy and feminization of the breast

4. Abdominal Lipectomy/Panniculectomy

Abdominal lipectomy/panniculectomy is surgical removal of excessive fat and skin from the abdomen. When surgery is performed to alleviate such complicating factors as inability to walk normally, chronic pain, ulceration created by the abdominal skin fold, or intertrigonal dermatitis, and the above symptoms have been present for at least three months and are refractory to usual standard medical therapy, such surgery may be considered reconstructive. Preoperative photographs may be required to support justification and should be supplied upon request.

5. Suction-Assisted Lipectomy

Suction-assisted lipectomy is a surgical procedure employing high vacuum pressure to suction away localized collections of unwanted fat. When the procedure is utilized to remove a lipoma, it is considered reconstructive surgery. The clinical record must clearly demonstrate medical necessity for the lipoma removal as most such tumors are benign and do not require removal. All other uses are currently considered cosmetic in nature and non-covered

6. Dermabrasion

Coverage will be provided when correcting defects resulting from traumatic injury, surgery, burns or disease. Dermabrasion following burn scarring is usually accomplished in 3-4 treatments. If the results are not optimum, other treatments may be undertaken. Dermabrasion performed post acne scarring is classified as cosmetic and is not covered for payment.

7. Rhytidectomy

Coverage will be provided when functional impairment as a result of a disease state exists (e.g., facial paralysis).

8. Blepharoplasty and Blepharoptosis

These procedures are addressed in a separate Noridian LCD.

9. Rhinoplasty

Nasal surgery is defined as any procedure performed on the external or internal structures of the nose, septum, or turbinate. This surgery may be performed to improve abnormal function, reconstruct congenital or acquired deformities, or to enhance appearance. It generally involves rearrangement or excision of the supporting bony and cartilaginous structures and incision or excision of the overlying skin of the nose.

10. Cosmetic Nasal Surgery

Nasal surgery performed solely to improve the patient's appearance in the absence of any signs and/or symptoms of functional abnormalities, should be considered cosmetic in nature and is noncovered under the Medicare Program.

11. Reconstructive Nasal Surgery

When nasal surgery, including rhinoplasty, is performed to improve nasal respiratory function, correct anatomic abnormalities caused by birth defects or disease, or revise structural deformities produced by trauma, the procedure may be considered reconstructive.

Reconstructive nasal surgery is generally directed to improve nasal respiratory function (e.g., airway obstruction or stricture, synechia formation); repair defects caused by trauma (e.g., nasoseptal deviation, intranasal cicatrix, dislocated nasal bone fractures, turbinate hypertrophy); treat congenital anatomic abnormalities (e.g., cleft lip nasal deformities, choanal atresia, oronasal or oromaxillary fistula); treat nasal cutaneous disease (e.g., rhinophyma, dermoid cyst); or to replace nasal tissue lost after tumor ablative surgery.

Services billed with a diagnosis code that is not listed in the ICD-10-CM Codes That Support Medical Necessity section of this policy may be considered at redetermination on a case-by-case basis.

Compliance with the provisions in this policy is subject to monitoring by post payment data analysis and subsequent medical review.

Summary of Evidence

N/A

Analysis of Evidence (Rationale for Determination)

N/A

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Coding Information

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.

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 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.

99999 Not Applicable

CPT/HCPCS Codes

Group 1 Paragraph: N/A

Group 1 Codes:

- 15780 DERMABRASION; TOTAL FACE (EG, FOR ACNE SCARRING, FINE WRINKLING, RHYTIDS, GENERAL KERATOSIS)
- 15781 DERMABRASION; SEGMENTAL, FACE
- 15782 DERMABRASION; REGIONAL, OTHER THAN FACE
- 15783 DERMABRASION; SUPERFICIAL, ANY SITE (EG, TATTOO REMOVAL)
- 15830 EXCISION, EXCESSIVE SKIN AND SUBCUTANEOUS TISSUE (INCLUDES LIPECTOMY); ABDOMEN, INFRAUMBILICAL PANNICULECTOMY
- 15832 EXCISION, EXCESSIVE SKIN AND SUBCUTANEOUS TISSUE (INCLUDES LIPECTOMY); THIGH

15833 EXCISION, EXCESSIVE SKIN AND SUBCUTANEOUS TISSUE (INCLUDES LIPECTOMY); LEG
 15834 EXCISION, EXCESSIVE SKIN AND SUBCUTANEOUS TISSUE (INCLUDES LIPECTOMY); HIP
 15835 EXCISION, EXCESSIVE SKIN AND SUBCUTANEOUS TISSUE (INCLUDES LIPECTOMY); BUTTOCK
 15836 EXCISION, EXCESSIVE SKIN AND SUBCUTANEOUS TISSUE (INCLUDES LIPECTOMY); ARM
 15837 EXCISION, EXCESSIVE SKIN AND SUBCUTANEOUS TISSUE (INCLUDES LIPECTOMY); FOREARM OR HAND
 15838 EXCISION, EXCESSIVE SKIN AND SUBCUTANEOUS TISSUE (INCLUDES LIPECTOMY); SUBMENTAL FAT PAD
 15839 EXCISION, EXCESSIVE SKIN AND SUBCUTANEOUS TISSUE (INCLUDES LIPECTOMY); OTHER AREA
 EXCISION, EXCESSIVE SKIN AND SUBCUTANEOUS TISSUE (INCLUDES LIPECTOMY), ABDOMEN (EG,
 15847 ABDOMINOPLASTY) (INCLUDES UMBILICAL TRANSPOSITION AND FASCIAL PPLICATION) (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)
 15876 SUCTION ASSISTED LIPECTOMY; HEAD AND NECK
 15877 SUCTION ASSISTED LIPECTOMY; TRUNK
 15878 SUCTION ASSISTED LIPECTOMY; UPPER EXTREMITY
 15879 SUCTION ASSISTED LIPECTOMY; LOWER EXTREMITY
 19316 MASTOPEXY
 19318 REDUCTION MAMMAPLASTY
 19324 MAMMAPLASTY, AUGMENTATION; WITHOUT PROSTHETIC IMPLANT
 19325 MAMMAPLASTY, AUGMENTATION; WITH PROSTHETIC IMPLANT
 19328 REMOVAL OF INTACT MAMMARY IMPLANT
 19330 REMOVAL OF MAMMARY IMPLANT MATERIAL
 19340 IMMEDIATE INSERTION OF BREAST PROSTHESIS FOLLOWING MASTOPEXY, MASTECTOMY OR IN RECONSTRUCTION
 19342 DELAYED INSERTION OF BREAST PROSTHESIS FOLLOWING MASTOPEXY, MASTECTOMY OR IN RECONSTRUCTION
 19350 NIPPLE/AREOLA RECONSTRUCTION
 19355 CORRECTION OF INVERTED NIPPLES
 19357 BREAST RECONSTRUCTION, IMMEDIATE OR DELAYED, WITH TISSUE EXPANDER, INCLUDING SUBSEQUENT EXPANSION
 19361 BREAST RECONSTRUCTION WITH LATISSIMUS DORSI FLAP, WITHOUT PROSTHETIC IMPLANT
 19364 BREAST RECONSTRUCTION WITH FREE FLAP
 19366 BREAST RECONSTRUCTION WITH OTHER TECHNIQUE
 19367 BREAST RECONSTRUCTION WITH TRANSVERSE RECTUS ABDOMINIS MYOCUTANEOUS FLAP (TRAM), SINGLE PEDICLE, INCLUDING CLOSURE OF DONOR SITE;
 BREAST RECONSTRUCTION WITH TRANSVERSE RECTUS ABDOMINIS MYOCUTANEOUS FLAP (TRAM),
 19368 SINGLE PEDICLE, INCLUDING CLOSURE OF DONOR SITE; WITH MICROVASCULAR ANASTOMOSIS (SUPERCHARGING)
 19369 BREAST RECONSTRUCTION WITH TRANSVERSE RECTUS ABDOMINIS MYOCUTANEOUS FLAP (TRAM), DOUBLE PEDICLE, INCLUDING CLOSURE OF DONOR SITE
 19370 OPEN PERIPROSTHETIC CAPSULOTOMY, BREAST
 19371 PERIPROSTHETIC CAPSULECTOMY, BREAST
 19380 REVISION OF RECONSTRUCTED BREAST
 19396 PREPARATION OF MOULAGE FOR CUSTOM BREAST IMPLANT
 30400 RHINOPLASTY, PRIMARY; LATERAL AND ALAR CARTILAGES AND/OR ELEVATION OF NASAL TIP
 30410 RHINOPLASTY, PRIMARY; COMPLETE, EXTERNAL PARTS INCLUDING BONY PYRAMID, LATERAL AND ALAR CARTILAGES, AND/OR ELEVATION OF NASAL TIP
 30420 RHINOPLASTY, PRIMARY; INCLUDING MAJOR SEPTAL REPAIR
 30430 RHINOPLASTY, SECONDARY; MINOR REVISION (SMALL AMOUNT OF NASAL TIP WORK)
 30435 RHINOPLASTY, SECONDARY; INTERMEDIATE REVISION (BONY WORK WITH OSTEOTOMIES)
 30450 RHINOPLASTY, SECONDARY; MAJOR REVISION (NASAL TIP WORK AND OSTEOTOMIES)

ICD-10 Codes that Support Medical Necessity

Group 1 Paragraph:

Providers are to use the ICD-10-CM® Code that most correctly describes the condition for which any procedure is performed.

These are the only covered ICD-10-CM codes that support medical necessity:

Dermabrasion (CPT Codes 15780-15783)

Group 1 Codes:

| ICD-10 Codes | Description |
|-------------------------|---|
| L71.0 | Perioral dermatitis |
| L71.1 | Rhinophyma |
| L71.8 | Other rosacea |
| T20.311A | Burn of third degree of right ear [any part, except ear drum], initial encounter |
| T20.311D | Burn of third degree of right ear [any part, except ear drum], subsequent encounter |
| T20.311S | Burn of third degree of right ear [any part, except ear drum], sequela |
| T20.312A | Burn of third degree of left ear [any part, except ear drum], initial encounter |
| T20.312D | Burn of third degree of left ear [any part, except ear drum], subsequent encounter |
| T20.312S | Burn of third degree of left ear [any part, except ear drum], sequela |
| T20.32XA | Burn of third degree of lip(s), initial encounter |
| T20.32XD | Burn of third degree of lip(s), subsequent encounter |
| T20.32XS | Burn of third degree of lip(s), sequela |
| T20.33XA | Burn of third degree of chin, initial encounter |
| T20.33XD | Burn of third degree of chin, subsequent encounter |
| T20.33XS | Burn of third degree of chin, sequela |
| T20.34XA | Burn of third degree of nose (septum), initial encounter |
| T20.34XD | Burn of third degree of nose (septum), subsequent encounter |
| T20.34XS | Burn of third degree of nose (septum), sequela |
| T20.35XA | Burn of third degree of scalp [any part], initial encounter |
| T20.35XD | Burn of third degree of scalp [any part], subsequent encounter |
| T20.35XS | Burn of third degree of scalp [any part], sequela |
| T20.36XA | Burn of third degree of forehead and cheek, initial encounter |
| T20.36XD | Burn of third degree of forehead and cheek, subsequent encounter |
| T20.36XS | Burn of third degree of forehead and cheek, sequela |
| T20.37XA | Burn of third degree of neck, initial encounter |
| T20.37XD | Burn of third degree of neck, subsequent encounter |
| T20.37XS | Burn of third degree of neck, sequela |
| T20.39XA | Burn of third degree of multiple sites of head, face, and neck, initial encounter |
| T20.39XD | Burn of third degree of multiple sites of head, face, and neck, subsequent encounter |
| T20.39XS | Burn of third degree of multiple sites of head, face, and neck, sequela |
| T20.711A | Corrosion of third degree of right ear [any part, except ear drum], initial encounter |
| T20.711D | Corrosion of third degree of right ear [any part, except ear drum], subsequent encounter |
| T20.711S | Corrosion of third degree of right ear [any part, except ear drum], sequela |
| T20.712A | Corrosion of third degree of left ear [any part, except ear drum], initial encounter |
| T20.712D | Corrosion of third degree of left ear [any part, except ear drum], subsequent encounter |
| T20.712S | Corrosion of third degree of left ear [any part, except ear drum], sequela |
| T20.72XA | Corrosion of third degree of lip(s), initial encounter |
| T20.72XD | Corrosion of third degree of lip(s), subsequent encounter |
| T20.72XS | Corrosion of third degree of lip(s), sequela |
| T20.73XA | Corrosion of third degree of chin, initial encounter |
| T20.73XD | Corrosion of third degree of chin, subsequent encounter |
| T20.73XS | Corrosion of third degree of chin, sequela |
| T20.74XA | Corrosion of third degree of nose (septum), initial encounter |
| T20.74XD | Corrosion of third degree of nose (septum), subsequent encounter |
| T20.74XS | Corrosion of third degree of nose (septum), sequela |
| T20.75XA | Corrosion of third degree of scalp [any part], initial encounter |
| T20.75XD | Corrosion of third degree of scalp [any part], subsequent encounter |
| T20.75XS | Corrosion of third degree of scalp [any part], sequela |
| T20.76XA | Corrosion of third degree of forehead and cheek, initial encounter |
| T20.76XD | Corrosion of third degree of forehead and cheek, subsequent encounter |
| T20.76XS | Corrosion of third degree of forehead and cheek, sequela |
| T20.77XA | Corrosion of third degree of neck, initial encounter |
| T20.77XD | Corrosion of third degree of neck, subsequent encounter |
| T20.77XS | Corrosion of third degree of neck, sequela |
| T20.79XA | Corrosion of third degree of multiple sites of head, face, and neck, initial encounter |
| T20.79XD | Corrosion of third degree of multiple sites of head, face, and neck, subsequent encounter |
| T20.79XS | Corrosion of third degree of multiple sites of head, face, and neck, sequela |

**ICD-10
Codes****Description**

| | |
|----------|--|
| T21.31XA | Burn of third degree of chest wall, initial encounter |
| T21.31XD | Burn of third degree of chest wall, subsequent encounter |
| T21.31XS | Burn of third degree of chest wall, sequela |
| T21.32XA | Burn of third degree of abdominal wall, initial encounter |
| T21.32XD | Burn of third degree of abdominal wall, subsequent encounter |
| T21.32XS | Burn of third degree of abdominal wall, sequela |
| T21.33XA | Burn of third degree of upper back, initial encounter |
| T21.33XD | Burn of third degree of upper back, subsequent encounter |
| T21.33XS | Burn of third degree of upper back, sequela |
| T21.34XA | Burn of third degree of lower back, initial encounter |
| T21.34XD | Burn of third degree of lower back, subsequent encounter |
| T21.34XS | Burn of third degree of lower back, sequela |
| T21.35XA | Burn of third degree of buttock, initial encounter |
| T21.35XD | Burn of third degree of buttock, subsequent encounter |
| T21.35XS | Burn of third degree of buttock, sequela |
| T21.36XA | Burn of third degree of male genital region, initial encounter |
| T21.36XD | Burn of third degree of male genital region, subsequent encounter |
| T21.36XS | Burn of third degree of male genital region, sequela |
| T21.37XA | Burn of third degree of female genital region, initial encounter |
| T21.37XD | Burn of third degree of female genital region, subsequent encounter |
| T21.37XS | Burn of third degree of female genital region, sequela |
| T21.39XA | Burn of third degree of other site of trunk, initial encounter |
| T21.39XD | Burn of third degree of other site of trunk, subsequent encounter |
| T21.39XS | Burn of third degree of other site of trunk, sequela |
| T21.71XA | Corrosion of third degree of chest wall, initial encounter |
| T21.71XD | Corrosion of third degree of chest wall, subsequent encounter |
| T21.71XS | Corrosion of third degree of chest wall, sequela |
| T21.72XA | Corrosion of third degree of abdominal wall, initial encounter |
| T21.72XD | Corrosion of third degree of abdominal wall, subsequent encounter |
| T21.72XS | Corrosion of third degree of abdominal wall, sequela |
| T21.73XA | Corrosion of third degree of upper back, initial encounter |
| T21.73XD | Corrosion of third degree of upper back, subsequent encounter |
| T21.73XS | Corrosion of third degree of upper back, sequela |
| T21.74XA | Corrosion of third degree of lower back, initial encounter |
| T21.74XD | Corrosion of third degree of lower back, subsequent encounter |
| T21.74XS | Corrosion of third degree of lower back, sequela |
| T21.75XA | Corrosion of third degree of buttock, initial encounter |
| T21.75XD | Corrosion of third degree of buttock, subsequent encounter |
| T21.75XS | Corrosion of third degree of buttock, sequela |
| T21.76XA | Corrosion of third degree of male genital region, initial encounter |
| T21.76XD | Corrosion of third degree of male genital region, subsequent encounter |
| T21.76XS | Corrosion of third degree of male genital region, sequela |
| T21.77XA | Corrosion of third degree of female genital region, initial encounter |
| T21.77XD | Corrosion of third degree of female genital region, subsequent encounter |
| T21.77XS | Corrosion of third degree of female genital region, sequela |
| T21.79XA | Corrosion of third degree of other site of trunk, initial encounter |
| T21.79XD | Corrosion of third degree of other site of trunk, subsequent encounter |
| T21.79XS | Corrosion of third degree of other site of trunk, sequela |
| T22.311A | Burn of third degree of right forearm, initial encounter |
| T22.311D | Burn of third degree of right forearm, subsequent encounter |
| T22.311S | Burn of third degree of right forearm, sequela |
| T22.312A | Burn of third degree of left forearm, initial encounter |
| T22.312D | Burn of third degree of left forearm, subsequent encounter |
| T22.312S | Burn of third degree of left forearm, sequela |
| T22.321A | Burn of third degree of right elbow, initial encounter |
| T22.321D | Burn of third degree of right elbow, subsequent encounter |
| T22.321S | Burn of third degree of right elbow, sequela |
| T22.322A | Burn of third degree of left elbow, initial encounter |

**ICD-10
Codes****Description**

| | |
|----------|--|
| T22.322D | Burn of third degree of left elbow, subsequent encounter |
| T22.322S | Burn of third degree of left elbow, sequela |
| T22.331A | Burn of third degree of right upper arm, initial encounter |
| T22.331D | Burn of third degree of right upper arm, subsequent encounter |
| T22.331S | Burn of third degree of right upper arm, sequela |
| T22.332A | Burn of third degree of left upper arm, initial encounter |
| T22.332D | Burn of third degree of left upper arm, subsequent encounter |
| T22.332S | Burn of third degree of left upper arm, sequela |
| T22.341A | Burn of third degree of right axilla, initial encounter |
| T22.341D | Burn of third degree of right axilla, subsequent encounter |
| T22.341S | Burn of third degree of right axilla, sequela |
| T22.342A | Burn of third degree of left axilla, initial encounter |
| T22.342D | Burn of third degree of left axilla, subsequent encounter |
| T22.342S | Burn of third degree of left axilla, sequela |
| T22.351A | Burn of third degree of right shoulder, initial encounter |
| T22.351D | Burn of third degree of right shoulder, subsequent encounter |
| T22.351S | Burn of third degree of right shoulder, sequela |
| T22.352A | Burn of third degree of left shoulder, initial encounter |
| T22.352D | Burn of third degree of left shoulder, subsequent encounter |
| T22.352S | Burn of third degree of left shoulder, sequela |
| T22.361A | Burn of third degree of right scapular region, initial encounter |
| T22.361D | Burn of third degree of right scapular region, subsequent encounter |
| T22.361S | Burn of third degree of right scapular region, sequela |
| T22.362A | Burn of third degree of left scapular region, initial encounter |
| T22.362D | Burn of third degree of left scapular region, subsequent encounter |
| T22.362S | Burn of third degree of left scapular region, sequela |
| T22.391A | Burn of third degree of multiple sites of right shoulder and upper limb, except wrist and hand, initial encounter |
| T22.391D | Burn of third degree of multiple sites of right shoulder and upper limb, except wrist and hand, subsequent encounter |
| T22.391S | Burn of third degree of multiple sites of right shoulder and upper limb, except wrist and hand, sequela |
| T22.392A | Burn of third degree of multiple sites of left shoulder and upper limb, except wrist and hand, initial encounter |
| T22.392D | Burn of third degree of multiple sites of left shoulder and upper limb, except wrist and hand, subsequent encounter |
| T22.392S | Burn of third degree of multiple sites of left shoulder and upper limb, except wrist and hand, sequela |
| T22.711A | Corrosion of third degree of right forearm, initial encounter |
| T22.711D | Corrosion of third degree of right forearm, subsequent encounter |
| T22.711S | Corrosion of third degree of right forearm, sequela |
| T22.712A | Corrosion of third degree of left forearm, initial encounter |
| T22.712D | Corrosion of third degree of left forearm, subsequent encounter |
| T22.712S | Corrosion of third degree of left forearm, sequela |
| T22.721A | Corrosion of third degree of right elbow, initial encounter |
| T22.721D | Corrosion of third degree of right elbow, subsequent encounter |
| T22.721S | Corrosion of third degree of right elbow, sequela |
| T22.722A | Corrosion of third degree of left elbow, initial encounter |
| T22.722D | Corrosion of third degree of left elbow, subsequent encounter |
| T22.722S | Corrosion of third degree of left elbow, sequela |
| T22.731A | Corrosion of third degree of right upper arm, initial encounter |
| T22.731D | Corrosion of third degree of right upper arm, subsequent encounter |
| T22.731S | Corrosion of third degree of right upper arm, sequela |
| T22.732A | Corrosion of third degree of left upper arm, initial encounter |
| T22.732D | Corrosion of third degree of left upper arm, subsequent encounter |
| T22.732S | Corrosion of third degree of left upper arm, sequela |
| T22.741A | Corrosion of third degree of right axilla, initial encounter |
| T22.741D | Corrosion of third degree of right axilla, subsequent encounter |

| ICD-10 Codes | Description |
|-------------------------|---|
| T22.741S | Corrosion of third degree of right axilla, sequela |
| T22.742A | Corrosion of third degree of left axilla, initial encounter |
| T22.742D | Corrosion of third degree of left axilla, subsequent encounter |
| T22.742S | Corrosion of third degree of left axilla, sequela |
| T22.751A | Corrosion of third degree of right shoulder, initial encounter |
| T22.751D | Corrosion of third degree of right shoulder, subsequent encounter |
| T22.751S | Corrosion of third degree of right shoulder, sequela |
| T22.752A | Corrosion of third degree of left shoulder, initial encounter |
| T22.752D | Corrosion of third degree of left shoulder, subsequent encounter |
| T22.752S | Corrosion of third degree of left shoulder, sequela |
| T22.761A | Corrosion of third degree of right scapular region, initial encounter |
| T22.761D | Corrosion of third degree of right scapular region, subsequent encounter |
| T22.761S | Corrosion of third degree of right scapular region, sequela |
| T22.762A | Corrosion of third degree of left scapular region, initial encounter |
| T22.762D | Corrosion of third degree of left scapular region, subsequent encounter |
| T22.762S | Corrosion of third degree of left scapular region, sequela |
| T22.791A | Corrosion of third degree of multiple sites of right shoulder and upper limb, except wrist and hand, initial encounter |
| T22.791D | Corrosion of third degree of multiple sites of right shoulder and upper limb, except wrist and hand, subsequent encounter |
| T22.791S | Corrosion of third degree of multiple sites of right shoulder and upper limb, except wrist and hand, sequela |
| T22.792A | Corrosion of third degree of multiple sites of left shoulder and upper limb, except wrist and hand, initial encounter |
| T22.792D | Corrosion of third degree of multiple sites of left shoulder and upper limb, except wrist and hand, subsequent encounter |
| T22.792S | Corrosion of third degree of multiple sites of left shoulder and upper limb, except wrist and hand, sequela |
| T23.311A | Burn of third degree of right thumb (nail), initial encounter |
| T23.311D | Burn of third degree of right thumb (nail), subsequent encounter |
| T23.311S | Burn of third degree of right thumb (nail), sequela |
| T23.312A | Burn of third degree of left thumb (nail), initial encounter |
| T23.312D | Burn of third degree of left thumb (nail), subsequent encounter |
| T23.312S | Burn of third degree of left thumb (nail), sequela |
| T23.321A | Burn of third degree of single right finger (nail) except thumb, initial encounter |
| T23.321D | Burn of third degree of single right finger (nail) except thumb, subsequent encounter |
| T23.321S | Burn of third degree of single right finger (nail) except thumb, sequela |
| T23.322A | Burn of third degree of single left finger (nail) except thumb, initial encounter |
| T23.322D | Burn of third degree of single left finger (nail) except thumb, subsequent encounter |
| T23.322S | Burn of third degree of single left finger (nail) except thumb, sequela |
| T23.331A | Burn of third degree of multiple right fingers (nail), not including thumb, initial encounter |
| T23.331D | Burn of third degree of multiple right fingers (nail), not including thumb, subsequent encounter |
| T23.331S | Burn of third degree of multiple right fingers (nail), not including thumb, sequela |
| T23.332A | Burn of third degree of multiple left fingers (nail), not including thumb, initial encounter |
| T23.332D | Burn of third degree of multiple left fingers (nail), not including thumb, subsequent encounter |
| T23.332S | Burn of third degree of multiple left fingers (nail), not including thumb, sequela |
| T23.341A | Burn of third degree of multiple right fingers (nail), including thumb, initial encounter |
| T23.341D | Burn of third degree of multiple right fingers (nail), including thumb, subsequent encounter |
| T23.341S | Burn of third degree of multiple right fingers (nail), including thumb, sequela |
| T23.342A | Burn of third degree of multiple left fingers (nail), including thumb, initial encounter |
| T23.342D | Burn of third degree of multiple left fingers (nail), including thumb, subsequent encounter |
| T23.342S | Burn of third degree of multiple left fingers (nail), including thumb, sequela |
| T23.351A | Burn of third degree of right palm, initial encounter |
| T23.351D | Burn of third degree of right palm, subsequent encounter |
| T23.351S | Burn of third degree of right palm, sequela |
| T23.352A | Burn of third degree of left palm, initial encounter |
| T23.352D | Burn of third degree of left palm, subsequent encounter |
| T23.352S | Burn of third degree of left palm, sequela |

**ICD-10
Codes****Description**

| | |
|----------|---|
| T23.361A | Burn of third degree of back of right hand, initial encounter |
| T23.361D | Burn of third degree of back of right hand, subsequent encounter |
| T23.361S | Burn of third degree of back of right hand, sequela |
| T23.362A | Burn of third degree of back of left hand, initial encounter |
| T23.362D | Burn of third degree of back of left hand, subsequent encounter |
| T23.362S | Burn of third degree of back of left hand, sequela |
| T23.371A | Burn of third degree of right wrist, initial encounter |
| T23.371D | Burn of third degree of right wrist, subsequent encounter |
| T23.371S | Burn of third degree of right wrist, sequela |
| T23.372A | Burn of third degree of left wrist, initial encounter |
| T23.372D | Burn of third degree of left wrist, subsequent encounter |
| T23.372S | Burn of third degree of left wrist, sequela |
| T23.391A | Burn of third degree of multiple sites of right wrist and hand, initial encounter |
| T23.391D | Burn of third degree of multiple sites of right wrist and hand, subsequent encounter |
| T23.391S | Burn of third degree of multiple sites of right wrist and hand, sequela |
| T23.392A | Burn of third degree of multiple sites of left wrist and hand, initial encounter |
| T23.392D | Burn of third degree of multiple sites of left wrist and hand, subsequent encounter |
| T23.392S | Burn of third degree of multiple sites of left wrist and hand, sequela |
| T23.711A | Corrosion of third degree of right thumb (nail), initial encounter |
| T23.711D | Corrosion of third degree of right thumb (nail), subsequent encounter |
| T23.711S | Corrosion of third degree of right thumb (nail), sequela |
| T23.712A | Corrosion of third degree of left thumb (nail), initial encounter |
| T23.712D | Corrosion of third degree of left thumb (nail), subsequent encounter |
| T23.712S | Corrosion of third degree of left thumb (nail), sequela |
| T23.721A | Corrosion of third degree of single right finger (nail) except thumb, initial encounter |
| T23.721D | Corrosion of third degree of single right finger (nail) except thumb, subsequent encounter |
| T23.721S | Corrosion of third degree of single right finger (nail) except thumb, sequela |
| T23.722A | Corrosion of third degree of single left finger (nail) except thumb, initial encounter |
| T23.722D | Corrosion of third degree of single left finger (nail) except thumb, subsequent encounter |
| T23.722S | Corrosion of third degree of single left finger (nail) except thumb, sequela |
| T23.731A | Corrosion of third degree of multiple right fingers (nail), not including thumb, initial encounter |
| T23.731D | Corrosion of third degree of multiple right fingers (nail), not including thumb, subsequent encounter |
| T23.731S | Corrosion of third degree of multiple right fingers (nail), not including thumb, sequela |
| T23.732A | Corrosion of third degree of multiple left fingers (nail), not including thumb, initial encounter |
| T23.732D | Corrosion of third degree of multiple left fingers (nail), not including thumb, subsequent encounter |
| T23.732S | Corrosion of third degree of multiple left fingers (nail), not including thumb, sequela |
| T23.741A | Corrosion of third degree of multiple right fingers (nail), including thumb, initial encounter |
| T23.741D | Corrosion of third degree of multiple right fingers (nail), including thumb, subsequent encounter |
| T23.741S | Corrosion of third degree of multiple right fingers (nail), including thumb, sequela |
| T23.742A | Corrosion of third degree of multiple left fingers (nail), including thumb, initial encounter |
| T23.742D | Corrosion of third degree of multiple left fingers (nail), including thumb, subsequent encounter |
| T23.742S | Corrosion of third degree of multiple left fingers (nail), including thumb, sequela |
| T23.751A | Corrosion of third degree of right palm, initial encounter |
| T23.751D | Corrosion of third degree of right palm, subsequent encounter |
| T23.751S | Corrosion of third degree of right palm, sequela |
| T23.752A | Corrosion of third degree of left palm, initial encounter |
| T23.752D | Corrosion of third degree of left palm, subsequent encounter |
| T23.752S | Corrosion of third degree of left palm, sequela |
| T23.761A | Corrosion of third degree of back of right hand, initial encounter |
| T23.761D | Corrosion of third degree of back of right hand, subsequent encounter |
| T23.761S | Corrosion of third degree of back of right hand, sequela |
| T23.762A | Corrosion of third degree of back of left hand, initial encounter |
| T23.762D | Corrosion of third degree of back of left hand, subsequent encounter |
| T23.762S | Corrosion of third degree of back of left hand, sequela |
| T23.771A | Corrosion of third degree of right wrist, initial encounter |
| T23.771D | Corrosion of third degree of right wrist, subsequent encounter |
| T23.771S | Corrosion of third degree of right wrist, sequela |

**ICD-10
Codes****Description**

| | |
|----------|--|
| T23.772A | Corrosion of third degree of left wrist, initial encounter |
| T23.772D | Corrosion of third degree of left wrist, subsequent encounter |
| T23.772S | Corrosion of third degree of left wrist, sequela |
| T23.791A | Corrosion of third degree of multiple sites of right wrist and hand, initial encounter |
| T23.791D | Corrosion of third degree of multiple sites of right wrist and hand, subsequent encounter |
| T23.791S | Corrosion of third degree of multiple sites of right wrist and hand, sequela |
| T23.792A | Corrosion of third degree of multiple sites of left wrist and hand, initial encounter |
| T23.792D | Corrosion of third degree of multiple sites of left wrist and hand, subsequent encounter |
| T23.792S | Corrosion of third degree of multiple sites of left wrist and hand, sequela |
| T24.311A | Burn of third degree of right thigh, initial encounter |
| T24.311D | Burn of third degree of right thigh, subsequent encounter |
| T24.311S | Burn of third degree of right thigh, sequela |
| T24.312A | Burn of third degree of left thigh, initial encounter |
| T24.312D | Burn of third degree of left thigh, subsequent encounter |
| T24.312S | Burn of third degree of left thigh, sequela |
| T24.321A | Burn of third degree of right knee, initial encounter |
| T24.321D | Burn of third degree of right knee, subsequent encounter |
| T24.321S | Burn of third degree of right knee, sequela |
| T24.322A | Burn of third degree of left knee, initial encounter |
| T24.322D | Burn of third degree of left knee, subsequent encounter |
| T24.322S | Burn of third degree of left knee, sequela |
| T24.331A | Burn of third degree of right lower leg, initial encounter |
| T24.331D | Burn of third degree of right lower leg, subsequent encounter |
| T24.331S | Burn of third degree of right lower leg, sequela |
| T24.332A | Burn of third degree of left lower leg, initial encounter |
| T24.332D | Burn of third degree of left lower leg, subsequent encounter |
| T24.332S | Burn of third degree of left lower leg, sequela |
| T24.391A | Burn of third degree of multiple sites of right lower limb, except ankle and foot, initial encounter |
| T24.391D | Burn of third degree of multiple sites of right lower limb, except ankle and foot, subsequent encounter |
| T24.391S | Burn of third degree of multiple sites of right lower limb, except ankle and foot, sequela |
| T24.392A | Burn of third degree of multiple sites of left lower limb, except ankle and foot, initial encounter |
| T24.392D | Burn of third degree of multiple sites of left lower limb, except ankle and foot, subsequent encounter |
| T24.392S | Burn of third degree of multiple sites of left lower limb, except ankle and foot, sequela |
| T24.711A | Corrosion of third degree of right thigh, initial encounter |
| T24.711D | Corrosion of third degree of right thigh, subsequent encounter |
| T24.711S | Corrosion of third degree of right thigh, sequela |
| T24.712A | Corrosion of third degree of left thigh, initial encounter |
| T24.712D | Corrosion of third degree of left thigh, subsequent encounter |
| T24.712S | Corrosion of third degree of left thigh, sequela |
| T24.721A | Corrosion of third degree of right knee, initial encounter |
| T24.721D | Corrosion of third degree of right knee, subsequent encounter |
| T24.721S | Corrosion of third degree of right knee, sequela |
| T24.722A | Corrosion of third degree of left knee, initial encounter |
| T24.722D | Corrosion of third degree of left knee, subsequent encounter |
| T24.722S | Corrosion of third degree of left knee, sequela |
| T24.731A | Corrosion of third degree of right lower leg, initial encounter |
| T24.731D | Corrosion of third degree of right lower leg, subsequent encounter |
| T24.731S | Corrosion of third degree of right lower leg, sequela |
| T24.732A | Corrosion of third degree of left lower leg, initial encounter |
| T24.732D | Corrosion of third degree of left lower leg, subsequent encounter |
| T24.732S | Corrosion of third degree of left lower leg, sequela |
| T24.791A | Corrosion of third degree of multiple sites of right lower limb, except ankle and foot, initial encounter |
| T24.791D | Corrosion of third degree of multiple sites of right lower limb, except ankle and foot, subsequent encounter |
| T24.791S | Corrosion of third degree of multiple sites of right lower limb, except ankle and foot, sequela |

| ICD-10 Codes | Description |
|-------------------------|---|
| T24.792A | Corrosion of third degree of multiple sites of left lower limb, except ankle and foot, initial encounter |
| T24.792D | Corrosion of third degree of multiple sites of left lower limb, except ankle and foot, subsequent encounter |
| T24.792S | Corrosion of third degree of multiple sites of left lower limb, except ankle and foot, sequela |
| T25.311A | Burn of third degree of right ankle, initial encounter |
| T25.311D | Burn of third degree of right ankle, subsequent encounter |
| T25.311S | Burn of third degree of right ankle, sequela |
| T25.312A | Burn of third degree of left ankle, initial encounter |
| T25.312D | Burn of third degree of left ankle, subsequent encounter |
| T25.312S | Burn of third degree of left ankle, sequela |
| T25.321A | Burn of third degree of right foot, initial encounter |
| T25.321D | Burn of third degree of right foot, subsequent encounter |
| T25.321S | Burn of third degree of right foot, sequela |
| T25.322A | Burn of third degree of left foot, initial encounter |
| T25.322D | Burn of third degree of left foot, subsequent encounter |
| T25.322S | Burn of third degree of left foot, sequela |
| T25.331A | Burn of third degree of right toe(s) (nail), initial encounter |
| T25.331D | Burn of third degree of right toe(s) (nail), subsequent encounter |
| T25.331S | Burn of third degree of right toe(s) (nail), sequela |
| T25.332A | Burn of third degree of left toe(s) (nail), initial encounter |
| T25.332D | Burn of third degree of left toe(s) (nail), subsequent encounter |
| T25.332S | Burn of third degree of left toe(s) (nail), sequela |
| T25.391A | Burn of third degree of multiple sites of right ankle and foot, initial encounter |
| T25.391D | Burn of third degree of multiple sites of right ankle and foot, subsequent encounter |
| T25.391S | Burn of third degree of multiple sites of right ankle and foot, sequela |
| T25.392A | Burn of third degree of multiple sites of left ankle and foot, initial encounter |
| T25.392D | Burn of third degree of multiple sites of left ankle and foot, subsequent encounter |
| T25.392S | Burn of third degree of multiple sites of left ankle and foot, sequela |
| T25.711A | Corrosion of third degree of right ankle, initial encounter |
| T25.711D | Corrosion of third degree of right ankle, subsequent encounter |
| T25.711S | Corrosion of third degree of right ankle, sequela |
| T25.712A | Corrosion of third degree of left ankle, initial encounter |
| T25.712D | Corrosion of third degree of left ankle, subsequent encounter |
| T25.712S | Corrosion of third degree of left ankle, sequela |
| T25.721A | Corrosion of third degree of right foot, initial encounter |
| T25.721D | Corrosion of third degree of right foot, subsequent encounter |
| T25.721S | Corrosion of third degree of right foot, sequela |
| T25.722A | Corrosion of third degree of left foot, initial encounter |
| T25.722D | Corrosion of third degree of left foot, subsequent encounter |
| T25.722S | Corrosion of third degree of left foot, sequela |
| T25.731A | Corrosion of third degree of right toe(s) (nail), initial encounter |
| T25.731D | Corrosion of third degree of right toe(s) (nail), subsequent encounter |
| T25.731S | Corrosion of third degree of right toe(s) (nail), sequela |
| T25.732A | Corrosion of third degree of left toe(s) (nail), initial encounter |
| T25.732D | Corrosion of third degree of left toe(s) (nail), subsequent encounter |
| T25.732S | Corrosion of third degree of left toe(s) (nail), sequela |
| T25.791A | Corrosion of third degree of multiple sites of right ankle and foot, initial encounter |
| T25.791D | Corrosion of third degree of multiple sites of right ankle and foot, subsequent encounter |
| T25.791S | Corrosion of third degree of multiple sites of right ankle and foot, sequela |
| T25.792A | Corrosion of third degree of multiple sites of left ankle and foot, initial encounter |
| T25.792D | Corrosion of third degree of multiple sites of left ankle and foot, subsequent encounter |
| T25.792S | Corrosion of third degree of multiple sites of left ankle and foot, sequela |
| T26.21XA | Burn with resulting rupture and destruction of right eyeball, initial encounter |
| T26.21XD | Burn with resulting rupture and destruction of right eyeball, subsequent encounter |
| T26.21XS | Burn with resulting rupture and destruction of right eyeball, sequela |
| T26.22XA | Burn with resulting rupture and destruction of left eyeball, initial encounter |
| T26.22XD | Burn with resulting rupture and destruction of left eyeball, subsequent encounter |

| ICD-10 Codes | Description |
|---------------------|--|
| T26.22XS | Burn with resulting rupture and destruction of left eyeball, sequela |

Group 2 Paragraph:

Abdominal Lipectomy/Panniculectomy (CPT Codes 15830, 15832, 15833, 15834, 15835, 15836, 15837 and 15847)

Group 2 Codes:

| ICD-10 Codes | Description |
|---------------------|---|
| A31.1 | Cutaneous mycobacterial infection |
| A43.1 | Cutaneous nocardiosis |
| A46 | Erysipelas |
| A48.0 | Gas gangrene |
| B35.6 | Tinea cruris |
| B35.8 | Other dermatophytoses |
| B37.2 | Candidiasis of skin and nail |
| B95.0 | Streptococcus, group A, as the cause of diseases classified elsewhere |
| B95.1 | Streptococcus, group B, as the cause of diseases classified elsewhere |
| B95.2 | Enterococcus as the cause of diseases classified elsewhere |
| B95.3 | Streptococcus pneumoniae as the cause of diseases classified elsewhere |
| B95.4 | Other streptococcus as the cause of diseases classified elsewhere |
| B95.61 | Methicillin susceptible Staphylococcus aureus infection as the cause of diseases classified elsewhere |
| B95.62 | Methicillin resistant Staphylococcus aureus infection as the cause of diseases classified elsewhere |
| B95.7 | Other staphylococcus as the cause of diseases classified elsewhere |
| B96.0 | Mycoplasma pneumoniae [M. pneumoniae] as the cause of diseases classified elsewhere |
| B96.1 | Klebsiella pneumoniae [K. pneumoniae] as the cause of diseases classified elsewhere |
| B96.3 | Hemophilus influenzae [H. influenzae] as the cause of diseases classified elsewhere |
| B96.4 | Proteus (mirabilis) (morganii) as the cause of diseases classified elsewhere |
| B96.5 | Pseudomonas (aeruginosa) (mallei) (pseudomallei) as the cause of diseases classified elsewhere |
| B96.6 | Bacteroides fragilis [B. fragilis] as the cause of diseases classified elsewhere |
| B96.7 | Clostridium perfringens [C. perfringens] as the cause of diseases classified elsewhere |
| B96.81 | Helicobacter pylori [H. pylori] as the cause of diseases classified elsewhere |
| B96.82 | Vibrio vulnificus as the cause of diseases classified elsewhere |
| B96.89 | Other specified bacterial agents as the cause of diseases classified elsewhere |
| I70.231 | Atherosclerosis of native arteries of right leg with ulceration of thigh |
| I70.241 | Atherosclerosis of native arteries of left leg with ulceration of thigh |
| I70.25 | Atherosclerosis of native arteries of other extremities with ulceration |
| I70.431 | Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration of thigh |
| I70.441 | Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration of thigh |
| I70.45 | Atherosclerosis of autologous vein bypass graft(s) of other extremity with ulceration |
| I70.531 | Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration of thigh |
| I70.541 | Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration of thigh |
| I70.55 | Atherosclerosis of nonautologous biological bypass graft(s) of other extremity with ulceration |
| I70.631 | Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration of thigh |
| I70.641 | Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration of thigh |
| I70.65 | Atherosclerosis of nonbiological bypass graft(s) of other extremity with ulceration |
| I70.731 | Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration of thigh |
| I70.741 | Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration of thigh |
| I70.75 | Atherosclerosis of other type of bypass graft(s) of other extremity with ulceration |
| L03.311 | Cellulitis of abdominal wall |
| L08.1 | Erythrasma |
| L30.4 | Erythema intertrigo |
| L97.111 | Non-pressure chronic ulcer of right thigh limited to breakdown of skin |

| ICD-10 Codes | Description |
|---------------------|--|
| L97.112 | Non-pressure chronic ulcer of right thigh with fat layer exposed |
| L97.113 | Non-pressure chronic ulcer of right thigh with necrosis of muscle |
| L97.114 | Non-pressure chronic ulcer of right thigh with necrosis of bone |
| L97.121 | Non-pressure chronic ulcer of left thigh limited to breakdown of skin |
| L97.122 | Non-pressure chronic ulcer of left thigh with fat layer exposed |
| L97.123 | Non-pressure chronic ulcer of left thigh with necrosis of muscle |
| L97.124 | Non-pressure chronic ulcer of left thigh with necrosis of bone |
| L98.411 | Non-pressure chronic ulcer of buttock limited to breakdown of skin |
| L98.412 | Non-pressure chronic ulcer of buttock with fat layer exposed |
| L98.413 | Non-pressure chronic ulcer of buttock with necrosis of muscle |
| L98.414 | Non-pressure chronic ulcer of buttock with necrosis of bone |
| L98.421 | Non-pressure chronic ulcer of back limited to breakdown of skin |
| L98.422 | Non-pressure chronic ulcer of back with fat layer exposed |
| L98.423 | Non-pressure chronic ulcer of back with necrosis of muscle |
| L98.424 | Non-pressure chronic ulcer of back with necrosis of bone |
| L98.491 | Non-pressure chronic ulcer of skin of other sites limited to breakdown of skin |
| L98.492 | Non-pressure chronic ulcer of skin of other sites with fat layer exposed |
| L98.493 | Non-pressure chronic ulcer of skin of other sites with necrosis of muscle |
| L98.494 | Non-pressure chronic ulcer of skin of other sites with necrosis of bone |

Group 3 Paragraph:

Reconstructive Breast Surgery (CPT Codes 19316, 19324, 19325, 19328, 19330, 19340, 19342, 19350, 19355, 19357, 19361, 19364, 19366, 19367, 19368, 19369, 19370, 19371, 19380, 19396)

Group 3 Codes:

| ICD-10 Codes | Description |
|---------------------|---|
| C50.011 | Malignant neoplasm of nipple and areola, right female breast |
| C50.012 | Malignant neoplasm of nipple and areola, left female breast |
| C50.021 | Malignant neoplasm of nipple and areola, right male breast |
| C50.022 | Malignant neoplasm of nipple and areola, left male breast |
| C50.111 | Malignant neoplasm of central portion of right female breast |
| C50.112 | Malignant neoplasm of central portion of left female breast |
| C50.121 | Malignant neoplasm of central portion of right male breast |
| C50.122 | Malignant neoplasm of central portion of left male breast |
| C50.211 | Malignant neoplasm of upper-inner quadrant of right female breast |
| C50.212 | Malignant neoplasm of upper-inner quadrant of left female breast |
| C50.221 | Malignant neoplasm of upper-inner quadrant of right male breast |
| C50.222 | Malignant neoplasm of upper-inner quadrant of left male breast |
| C50.311 | Malignant neoplasm of lower-inner quadrant of right female breast |
| C50.312 | Malignant neoplasm of lower-inner quadrant of left female breast |
| C50.321 | Malignant neoplasm of lower-inner quadrant of right male breast |
| C50.322 | Malignant neoplasm of lower-inner quadrant of left male breast |
| C50.411 | Malignant neoplasm of upper-outer quadrant of right female breast |
| C50.412 | Malignant neoplasm of upper-outer quadrant of left female breast |
| C50.421 | Malignant neoplasm of upper-outer quadrant of right male breast |
| C50.422 | Malignant neoplasm of upper-outer quadrant of left male breast |
| C50.511 | Malignant neoplasm of lower-outer quadrant of right female breast |
| C50.512 | Malignant neoplasm of lower-outer quadrant of left female breast |
| C50.521 | Malignant neoplasm of lower-outer quadrant of right male breast |
| C50.522 | Malignant neoplasm of lower-outer quadrant of left male breast |
| C50.611 | Malignant neoplasm of axillary tail of right female breast |
| C50.612 | Malignant neoplasm of axillary tail of left female breast |
| C50.621 | Malignant neoplasm of axillary tail of right male breast |

| ICD-10 Codes | Description |
|---------------------|---|
| C50.622 | Malignant neoplasm of axillary tail of left male breast |
| C50.811 | Malignant neoplasm of overlapping sites of right female breast |
| C50.812 | Malignant neoplasm of overlapping sites of left female breast |
| C50.821 | Malignant neoplasm of overlapping sites of right male breast |
| C50.822 | Malignant neoplasm of overlapping sites of left male breast |
| C79.2 | Secondary malignant neoplasm of skin |
| C79.81 | Secondary malignant neoplasm of breast |
| D04.5 | Carcinoma in situ of skin of trunk |
| D05.01 | Lobular carcinoma in situ of right breast |
| D05.02 | Lobular carcinoma in situ of left breast |
| D05.11 | Intraductal carcinoma in situ of right breast |
| D05.12 | Intraductal carcinoma in situ of left breast |
| D05.81 | Other specified type of carcinoma in situ of right breast |
| D05.82 | Other specified type of carcinoma in situ of left breast |
| D24.1 | Benign neoplasm of right breast |
| D24.2 | Benign neoplasm of left breast |
| D48.61 | Neoplasm of uncertain behavior of right breast |
| D48.62 | Neoplasm of uncertain behavior of left breast |
| N65.0 | Deformity of reconstructed breast |
| N65.1 | Disproportion of reconstructed breast |
| T85.41XA | Breakdown (mechanical) of breast prosthesis and implant, initial encounter |
| T85.41XD | Breakdown (mechanical) of breast prosthesis and implant, subsequent encounter |
| T85.41XS | Breakdown (mechanical) of breast prosthesis and implant, sequela |
| T85.42XA | Displacement of breast prosthesis and implant, initial encounter |
| T85.42XD | Displacement of breast prosthesis and implant, subsequent encounter |
| T85.42XS | Displacement of breast prosthesis and implant, sequela |
| T85.43XA | Leakage of breast prosthesis and implant, initial encounter |
| T85.43XD | Leakage of breast prosthesis and implant, subsequent encounter |
| T85.43XS | Leakage of breast prosthesis and implant, sequela |
| T85.44XA | Capsular contracture of breast implant, initial encounter |
| T85.44XD | Capsular contracture of breast implant, subsequent encounter |
| T85.44XS | Capsular contracture of breast implant, sequela |
| T85.49XA | Other mechanical complication of breast prosthesis and implant, initial encounter |
| T85.49XD | Other mechanical complication of breast prosthesis and implant, subsequent encounter |
| T85.49XS | Other mechanical complication of breast prosthesis and implant, sequela |
| T85.79XA | Infection and inflammatory reaction due to other internal prosthetic devices, implants and grafts, initial encounter |
| T85.79XD | Infection and inflammatory reaction due to other internal prosthetic devices, implants and grafts, subsequent encounter |
| T85.79XS | Infection and inflammatory reaction due to other internal prosthetic devices, implants and grafts, sequela |
| Z42.1 | Encounter for breast reconstruction following mastectomy |
| Z45.811 | Encounter for adjustment or removal of right breast implant |
| Z45.812 | Encounter for adjustment or removal of left breast implant |
| Z48.3 | Aftercare following surgery for neoplasm |
| Z85.3 | Personal history of malignant neoplasm of breast |
| Z98.82 | Breast implant status |

**Group 4 Paragraph:
Reduction Mammoplasty (CPT Code 19318)**

Three diagnoses are required for payment (One primary and two secondary).

Primary ICD-10-CM:

Group 4 Codes:**ICD-10 Codes Description**

N62* Hypertrophy of breast
 N65.1* Disproportion of reconstructed breast

Group 4 Medical Necessity ICD-10 Codes Asterisk Explanation:

*Primary diagnosis N62 must be billed with two of the secondary diagnoses: listed in Group 5 Secondary Codes for Reduction Mammoplasty. N65.1 may be used as a standalone code when billing for surgery on the unaffected breast to restore symmetry following breast cancer surgery on the contralateral breast. Use one of the C50.XX ICD-10 codes as a secondary diagnosis.

C50.XX Codes:

C50.011
 C50.012
 C50.021
 C50.022
 C50.111
 C50.112
 C50.121
 C50.122
 C50.211
 C50.212
 C50.221
 C50.222
 C50.311
 C50.312
 C50.321
 C50.322
 C50.411
 C50.412
 C50.421
 C50.422
 C50.511
 C50.512
 C50.521
 C50.522
 C50.611
 C50.612
 C50.621
 C50.622
 C50.811
 C50.812
 C50.821
 C50.822

Group 5 Paragraph:

Secondary ICD-10-CMs to be used when billing one of the reduction mammoplasty primary codes. Correct coding for this procedure requires two secondary ICD-10-CM codes from Group 5 (this section) and one of the primary ICD-10-CM codes from Group 4.

Group 5 Codes:

| ICD-10 Codes | Description |
|---------------------|---|
| L26* | Exfoliative dermatitis |
| L30.4* | Erythema intertrigo |
| L53.8* | Other specified erythematous conditions |
| L54* | Erythema in diseases classified elsewhere |
| L92.0* | Granuloma annulare |

| ICD-10 Codes | Description |
|---------------------|---|
| L95.1* | Erythema elevatum diutinum |
| L98.2* | Febrile neutrophilic dermatosis [Sweet] |
| M25.511* | Pain in right shoulder |
| M25.512* | Pain in left shoulder |
| M40.04 | Postural kyphosis, thoracic region |
| M53.81 | Other specified dorsopathies, occipito-atlanto-axial region |
| M53.82 | Other specified dorsopathies, cervical region |
| M53.83 | Other specified dorsopathies, cervicothoracic region |
| M53.84 | Other specified dorsopathies, thoracic region |
| M54.2* | Cervicalgia |
| M54.6* | Pain in thoracic spine |
| M54.89* | Other dorsalgia |
| M54.9* | Dorsalgia, unspecified |
| M95.4 | Acquired deformity of chest and rib |
| N64.4 | Mastodynia |
| R20.2 | Paresthesia of skin |
| R21* | Rash and other nonspecific skin eruption |
| R51 | Headache |
| Z85.3* | Personal history of malignant neoplasm of breast |

Group 6 Paragraph:

Rhinoplasty (CPT Codes 30400-30450)

Group 6 Codes:

| ICD-10 Codes | Description |
|---------------------|---|
| C30.0 | Malignant neoplasm of nasal cavity |
| C41.0 | Malignant neoplasm of bones of skull and face |
| C43.31 | Malignant melanoma of nose |
| C43.39 | Malignant melanoma of other parts of face |
| C44.311 | Basal cell carcinoma of skin of nose |
| C44.319 | Basal cell carcinoma of skin of other parts of face |
| C44.321 | Squamous cell carcinoma of skin of nose |
| C44.329 | Squamous cell carcinoma of skin of other parts of face |
| C44.391 | Other specified malignant neoplasm of skin of nose |
| C44.399 | Other specified malignant neoplasm of skin of other parts of face |
| C76.0 | Malignant neoplasm of head, face and neck |
| D03.39 | Melanoma in situ of other parts of face |
| D04.39 | Carcinoma in situ of skin of other parts of face |
| D14.0 | Benign neoplasm of middle ear, nasal cavity and accessory sinuses |
| D16.4 | Benign neoplasm of bones of skull and face |
| D22.39 | Melanocytic nevi of other parts of face |
| D23.39 | Other benign neoplasm of skin of other parts of face |
| J34.0 | Abscess, furuncle and carbuncle of nose |
| J34.1 | Cyst and mucocele of nose and nasal sinus |
| J34.89 | Other specified disorders of nose and nasal sinuses |
| S02.2XXA | Fracture of nasal bones, initial encounter for closed fracture |
| S02.2XXB | Fracture of nasal bones, initial encounter for open fracture |
| S02.2XXD | Fracture of nasal bones, subsequent encounter for fracture with routine healing |
| S02.2XXG | Fracture of nasal bones, subsequent encounter for fracture with delayed healing |
| S02.2XXK | Fracture of nasal bones, subsequent encounter for fracture with nonunion |
| S02.2XXS | Fracture of nasal bones, sequela |

ICD-10 Codes that DO NOT Support Medical Necessity

Group 1 Paragraph:

All ICD-10-CM codes **not** listed above under ICD-10-CM Codes That Support Medical Necessity above.

Group 1 Codes: N/A

ICD-10 Additional Information [Back to Top](#)

General Information

Associated Information

For Reduction Mammoplasty:

1. Physicians should document the severity of the symptoms of breast hypertrophy and impact on health related quality of life as measured by an accepted breast specific questionnaire.

The beneficiary's medical record must contain the following information and be made available to any authorized Medicare auditor upon request:

- Height and weight
- Clinical evaluation of the signs and/or symptoms ascribed to the macromastia, therapies prior to reduction mammoplasty and the responses to these therapies.
- The operative report with documentation of the weight of tissue removed from each breast, obtained in the operating room.
- The pathology report of the tissue removed from each breast.

2. Reasons for denial include:

1. Surgery is deemed or later determined to be cosmetic in nature. Breast surgery for uncomplicated macromastia, pendulous breasts, or to correct otherwise uncomplicated nipple inversions will be considered cosmetic and not reasonable and necessary
2. Failure to clearly document persistent signs and symptoms despite a reasonable trial of conservative therapy for a reasonable length of time.
3. Services submitted without a listed diagnosis (ICD-10-CM) code supporting medical necessity
4. Use of any ICD-10-CM codes not listed in the ICD-10-CM Codes That Support Medical Necessity Section above.

For all procedures noted within this policy:

The medical record must be made available to Medicare or a Medicare auditor upon request.

The HCPCS/CPT code(s) may be subject to Correct Coding Initiative (CCI) edits. This policy does not take precedence over CCI edits. Please refer to the CCI for correct coding guidelines and specific applicable code combinations prior to billing Medicare.

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 may be denied as not reasonable and necessary.

When requesting a written redetermination, providers must include all relevant documentation with the request. Failure to include such items will likely result in an unfavorable determination. While not required, high quality photographs may be useful in determining medical necessity and may be submitted when the provider feels it is appropriate to do so.

Sources of Information

1. Retired Noridian and Montana LCDs

2. This LCD is based on the LCD for Reduction Mammoplasty developed by the intermediary contractor for Medicare Part A in Utah. The following references are from that policy: American Society of Plastic Surgeons. Reduction mammoplasty. Recommended criteria for third-party payer coverage 2011. Available at: <https://www.plasticsurgery.org/>
3. Schnur PL, Hoehn JG, Ilstrup DM, et al. Reduction mammoplasty: Cosmetic or reconstructive procedure? *Ann Plast Surg.* 1991;27(3):232-237.
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5. Mosteller RD. Simplified calculation of body-surface area. *NEJM.* 1987;317:1098
6. Coleman, E., Bockting, W., et al. Standards of Care for the Health of Transsexual, Transgender, and Gender-Nonconforming People, Version 7. *International Journal of Transgenderism* 2011; 13:165-232

NOTE: Some of the websites used to create this policy may no longer be available.

Bibliography

N/A

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[Revision History Information](#)

| Revision History Date | Revision History Number | Revision History Explanation | Reason(s) for Change |
|-----------------------|-------------------------|--|---|
| 10/10/2017 | R2 | 12/20/2017: At this time 21st Century Cures Act will apply to new and revised LCDs that restrict coverage which requires comment and notice. This revision is not a restriction to the coverage determination; and, therefore not all the fields included on the LCD are applicable as noted in this policy. Verbiage for Group 4 Coding for Reduction Mammoplasty changed to add: Use one of the C50.xx ICD-10 codes listed as a secondary diagnosis with primary diagnosis N65.1. | <ul style="list-style-type: none"> • Provider Education/Guidance |
| 10/10/2017 | R1 | Typographical Error: Broken link to resource fixed. | <ul style="list-style-type: none"> • Typographical Error |

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[Associated Documents](#)

Attachments N/A

Related Local Coverage Documents Article(s) [A55685 - Response to Comments: Plastic Surgery](#) LCD(s) [DL37020 - Plastic Surgery](#)

Related National Coverage Documents N/A

Public Version(s) Updated on 12/26/2017 with effective dates 10/10/2017 - N/A [Updated on 08/18/2017 with effective dates 10/10/2017 - N/A](#) [Updated on 08/11/2017 with effective dates 10/10/2017 - N/A](#) [Back to Top](#)

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