

LCD Reference Article	Billing and Coding Article
-----------------------	----------------------------

## Article - Billing and Coding: Chemodenervation (A56646)

Links in PDF documents are not guaranteed to work. To follow a web link, please use the MCD Website.

### Contractor Information

CONTRACTOR NAME	CONTRACT TYPE	CONTRACT NUMBER	JURISDICTION	STATES
Palmetto GBA	A and B MAC	10112 - MAC B	J - J	Alabama
Palmetto GBA	A and B MAC	10212 - MAC B	J - J	Georgia
Palmetto GBA	A and B MAC	10312 - MAC B	J - J	Tennessee
Palmetto GBA	A and B and HHH MAC	11202 - MAC B	J - M	South Carolina
Palmetto GBA	A and B and HHH MAC	11302 - MAC B	J - M	Virginia
Palmetto GBA	A and B and HHH MAC	11402 - MAC B	J - M	West Virginia
Palmetto GBA	A and B and HHH MAC	11502 - MAC B	J - M	North Carolina

### Article Information

#### General Information

**Article ID**

A56646

**Article Title**

Billing and Coding: Chemodenervation

**Article Type**

Billing and Coding

**Original Effective Date**

07/04/2019

**Revision Effective Date**

10/01/2023

**Revision Ending Date**

N/A

**Retirement Date**

N/A

**AMA CPT / ADA CDT / AHA NUBC Copyright Statement**

CPT codes, descriptions and other data only are copyright 2023 American Medical Association. All Rights Reserved. Applicable FARS/HHSARS apply.

Fee schedules, relative value units, conversion factors and/or related components are not assigned by the AMA, are not part of CPT, and the AMA is not recommending their use. The AMA does not directly or indirectly practice medicine or dispense medical services. The AMA assumes no liability for data contained or not contained herein.

Current Dental Terminology © 2023 American Dental Association. All rights reserved.

Copyright © 2023, the American Hospital Association, Chicago, Illinois. Reproduced with permission. No portion of the American Hospital Association (AHA) copyrighted materials contained within this publication may be copied without the express written consent of the AHA. AHA copyrighted materials including the UB04 codes and descriptions may not be removed, copied, or utilized within any software, product, service, solution or derivative work without the written consent of the AHA. If an entity wishes to utilize any AHA materials, please contact the AHA at 312 893 6816.

Making copies or utilizing the content of the UB04 Manual, including the codes and/or descriptions, for internal purposes, resale and/or to be used in any product or publication; creating any modified or derivative work of the UB04 Manual and/or codes and descriptions; and/or making any commercial use of UB04 Manual or any portion thereof, including the

codes and/or descriptions, is only authorized with an express license from the American Hospital Association. The American Hospital Association (the "AHA") has not reviewed, and is not responsible for, the completeness or accuracy of any information contained in this material, nor was the AHA or any of its affiliates, involved in the preparation of this material, or the analysis of information provided in the material. The views and/or positions presented in the material do not necessarily represent the views of the AHA. CMS and its products and services are not endorsed by the AHA or any of its affiliates.

## CMS National Coverage Policy

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

## Article Guidance

### Article Text

The information in this article contains billing, coding or other guidelines that complement the Local Coverage Determination (LCD) for Chemodenervation L33458.

## Coding Information

### CPT/HCPCS Codes

#### Group 1 Paragraph:

Injection of a chemodenervation agent for the treatment of achalasia is a procedure that should be done by providers with training to treat diseases of the gastrointestinal (GI) tract (e.g., gastroenterologists and surgeons). Refer to the Upper Gastrointestinal Endoscopy and Visualization L34434 LCD for guidelines for the treatment of achalasia.

Use CPT<sup>®</sup> codes 95873 and 95874, in addition to, the code for the primary procedure CPT<sup>®</sup> codes 64612, 64615, 64616, 64642, 64643, 64644, 64645, 64646, 64647, 64653, 64999.

#### Group 1 Codes: (19 Codes)

CODE	DESCRIPTION
46505	Chemodenervation anal musc
52287	Cystoscopy chemodenervation
64611	Chemodenerv saliv glands
64612	Destroy nerve face muscle
64615	Chemodenerv musc migraine

CODE	DESCRIPTION
64616	Chemodenerv musc neck dyston
64617	Chemodener muscle larynx emg
64642	Chemodenerv 1 extremity 1-4
64643	Chemodenerv 1 extrem 1-4 ea
64644	Chemodenerv 1 extrem 5/> mus
64645	Chemodenerv 1 extrem 5/> ea
64646	Chemodenerv trunk musc 1-5
64647	Chemodenerv trunk musc 6/>
64650	Chemodenerv eccrine glands
64653	Chemodenerv eccrine glands
64999	Unlisted px nervous system
67345	Destroy nerve of eye muscle
95873	Guide nerv destr elec stim
95874	Guide nerv destr needle emg

**Group 2 Paragraph:**

HCPCS Codes

**Group 2 Codes:** (4 Codes)

CODE	DESCRIPTION
J0585	Injection,onabotulinumtoxina
J0586	Abobotulinumtoxina
J0587	Inj, rimabotulinumtoxinb
J0588	Incobotulinumtoxin a

**CPT/HCPCS Modifiers**

N/A

**ICD-10-CM Codes that Support Medical Necessity**

**Group 1 Paragraph:**

CPT® code 46505; HCPCS codes J0585, J0586, J0587, J0588

**Group 1 Codes:** (3 Codes)

CODE	DESCRIPTION
K60.0	Acute anal fissure
K60.1	Chronic anal fissure
K60.2	Anal fissure, unspecified

**Group 2 Paragraph:**

CPT® Code 52287; HCPCS code J0585

**Group 2 Codes: (13 Codes)**

CODE	DESCRIPTION
G12.23	Primary lateral sclerosis
G12.24	Familial motor neuron disease
G12.25	Progressive spinal muscle atrophy
G83.4	Cauda equina syndrome
N31.0	Uninhibited neuropathic bladder, not elsewhere classified
N31.1	Reflex neuropathic bladder, not elsewhere classified
N31.8	Other neuromuscular dysfunction of bladder
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
R35.0	Frequency of micturition

**Group 3 Paragraph:**

CPT® code 64611; HCPCS codes J0587, J0585, J0588

**Group 3 Codes: (2 Codes)**

CODE	DESCRIPTION
K11.7	Disturbances of salivary secretion
R68.2	Dry mouth, unspecified

**Group 4 Paragraph:**

CPT® code 64612; HCPCS codes J0585, J0586, J0587, J0588

**Group 4 Codes: (34 Codes)**

CODE	DESCRIPTION
G24.4	Idiopathic orofacial dystonia
G24.5	Blepharospasm
G43.011	Migraine without aura, intractable, with status migrainosus
G43.019	Migraine without aura, intractable, without status migrainosus
G43.111	Migraine with aura, intractable, with status migrainosus
G43.119	Migraine with aura, intractable, without status migrainosus
G43.411	Hemiplegic migraine, intractable, with status migrainosus
G43.419	Hemiplegic migraine, intractable, without status migrainosus
G43.511	Persistent migraine aura without cerebral infarction, intractable, with status migrainosus
G43.519	Persistent migraine aura without cerebral infarction, intractable, without status migrainosus
G43.611	Persistent migraine aura with cerebral infarction, intractable, with status migrainosus
G43.619	Persistent migraine aura with cerebral infarction, intractable, without status migrainosus
G43.B1	Ophthalmoplegic migraine, intractable
G43.C1	Periodic headache syndromes in child or adult, intractable
G43.D1	Abdominal migraine, intractable
G43.811	Other migraine, intractable, with status migrainosus
G43.819	Other migraine, intractable, without status migrainosus
G43.831	Menstrual migraine, intractable, with status migrainosus
G43.839	Menstrual migraine, intractable, without status migrainosus
G43.911	Migraine, unspecified, intractable, with status migrainosus
G43.919	Migraine, unspecified, intractable, without status migrainosus
G44.021	Chronic cluster headache, intractable
G44.221	Chronic tension-type headache, intractable
G50.9	Disorder of trigeminal nerve, unspecified
G51.31	Clonic hemifacial spasm, right
G51.32	Clonic hemifacial spasm, left
G51.33	Clonic hemifacial spasm, bilateral
G51.8	Other disorders of facial nerve
G51.9	Disorder of facial nerve, unspecified

CODE	DESCRIPTION
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
H02.049	Spastic entropion of unspecified eye, unspecified eyelid

**Group 5 Paragraph:**

CPT® codes 64616 or 64617; HCPCS codes J0585, J0586, J0587, J0588

**Group 5 Codes: (27 Codes)**

CODE	DESCRIPTION
G24.3	Spasmodic torticollis
G43.011	Migraine without aura, intractable, with status migrainosus
G43.019	Migraine without aura, intractable, without status migrainosus
G43.111	Migraine with aura, intractable, with status migrainosus
G43.119	Migraine with aura, intractable, without status migrainosus
G43.411	Hemiplegic migraine, intractable, with status migrainosus
G43.419	Hemiplegic migraine, intractable, without status migrainosus
G43.511	Persistent migraine aura without cerebral infarction, intractable, with status migrainosus
G43.519	Persistent migraine aura without cerebral infarction, intractable, without status migrainosus
G43.611	Persistent migraine aura with cerebral infarction, intractable, with status migrainosus
G43.619	Persistent migraine aura with cerebral infarction, intractable, without status migrainosus
G43.B1	Ophthalmoplegic migraine, intractable
G43.C1	Periodic headache syndromes in child or adult, intractable
G43.D1	Abdominal migraine, intractable
G43.811	Other migraine, intractable, with status migrainosus
G43.819	Other migraine, intractable, without status migrainosus
G43.831	Menstrual migraine, intractable, with status migrainosus
G43.839	Menstrual migraine, intractable, without status migrainosus
G43.911	Migraine, unspecified, intractable, with status migrainosus

CODE	DESCRIPTION
G43.919	Migraine, unspecified, intractable, without status migrainosus
G44.021	Chronic cluster headache, intractable
G44.221	Chronic tension-type headache, intractable
J38.01	Paralysis of vocal cords and larynx, unilateral
J38.02	Paralysis of vocal cords and larynx, bilateral
J38.5	Laryngeal spasm
M43.6	Torticollis
R49.0	Dysphonia

**Group 6 Paragraph:**

CPT<sup>®</sup> codes 64642, 64643, 64644, 64645, 64646, 64647; HCPCS codes J0585, J0586, J0587, J0588

**Group 6 Codes: (143 Codes)**

CODE	DESCRIPTION
G04.1	Tropical spastic paraplegia
G11.4	Hereditary spastic paraplegia
G24.02	Drug induced acute dystonia
G24.09	Other drug induced dystonia
G24.1	Genetic torsion dystonia
G24.2	Idiopathic nonfamilial dystonia
G24.8	Other dystonia
G24.9	Dystonia, unspecified
G25.89	Other specified extrapyramidal and movement disorders
G35	Multiple sclerosis
G36.0	Neuromyelitis optica [Devic]
G36.1	Acute and subacute hemorrhagic leukoencephalitis [Hurst]
G36.8	Other specified acute disseminated demyelination
G36.9	Acute disseminated demyelination, unspecified
G37.0	Diffuse sclerosis of central nervous system
G37.1	Central demyelination of corpus callosum
G37.2	Central pontine myelinolysis
G37.3	Acute transverse myelitis in demyelinating disease of central nervous system
G37.4	Subacute necrotizing myelitis of central nervous system

CODE	DESCRIPTION
G37.5	Concentric sclerosis [Balo] of central nervous system
G37.9	Demyelinating disease of central nervous system, unspecified
G80.0	Spastic quadriplegic cerebral palsy
G80.1	Spastic diplegic cerebral palsy
G80.2	Spastic hemiplegic cerebral palsy
G80.3	Athetoid cerebral palsy
G80.4	Ataxic cerebral palsy
G80.8	Other cerebral palsy
G80.9	Cerebral palsy, unspecified
G81.11	Spastic hemiplegia affecting right dominant side
G81.12	Spastic hemiplegia affecting left dominant side
G81.13	Spastic hemiplegia affecting right nondominant side
G81.14	Spastic hemiplegia affecting left nondominant side
G82.20	Paraplegia, unspecified
G82.21	Paraplegia, complete
G82.22	Paraplegia, incomplete
G82.51	Quadriplegia, C1-C4 complete
G82.52	Quadriplegia, C1-C4 incomplete
G82.53	Quadriplegia, C5-C7 complete
G82.54	Quadriplegia, C5-C7 incomplete
G83.0	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
G83.31	Monoplegia, unspecified affecting right dominant side
G83.32	Monoplegia, unspecified affecting left dominant side
G83.33	Monoplegia, unspecified affecting right nondominant side



CODE	DESCRIPTION
G83.34	Monoplegia, unspecified affecting left nondominant side
G83.81	Brown-Sequard syndrome
G83.82	Anterior cord syndrome
I69.031	Monoplegia of upper limb following nontraumatic subarachnoid hemorrhage affecting right dominant side
I69.032	Monoplegia of upper limb following nontraumatic subarachnoid hemorrhage affecting left dominant side
I69.033	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
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
I69.131	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

CODE	DESCRIPTION
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
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
I69.231	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
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

<b>CODE</b>	<b>DESCRIPTION</b>
	affecting left non-dominant side
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
I69.342	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
<b>CODE</b>	<b>DESCRIPTION</b>
I69.354	Hemiplegia and hemiparesis following cerebral infarction affecting left non-dominant side
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-

CODE	DESCRIPTION
	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
I69.931	Monoplegia of upper limb following unspecified cerebrovascular disease affecting right dominant side
I69.932	Monoplegia of upper limb following unspecified cerebrovascular disease affecting left dominant side
I69.933	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
I69.942	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
I69.951	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
M62.411	Contracture of muscle, right shoulder
M62.412	Contracture of muscle, left shoulder
M62.421	Contracture of muscle, right upper arm

CODE	DESCRIPTION
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
M62.838	Other muscle spasm

**Group 7 Paragraph:**

CPT® code 64615; HCPCS code J0585

**Group 7 Codes: (26 Codes)**

CODE	DESCRIPTION
G43.011	Migraine without aura, intractable, with status migrainosus
G43.019	Migraine without aura, intractable, without status migrainosus
G43.111	Migraine with aura, intractable, with status migrainosus
G43.119	Migraine with aura, intractable, without status migrainosus
G43.411	Hemiplegic migraine, intractable, with status migrainosus
G43.419	Hemiplegic migraine, intractable, without status migrainosus
G43.511	Persistent migraine aura without cerebral infarction, intractable, with status migrainosus
G43.519	Persistent migraine aura without cerebral infarction, intractable, without status migrainosus
G43.611	Persistent migraine aura with cerebral infarction, intractable, with status migrainosus
G43.619	Persistent migraine aura with cerebral infarction, intractable, without status migrainosus

CODE	DESCRIPTION
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.A1	Cyclical vomiting, in migraine, intractable
G43.B1	Ophthalmoplegic migraine, intractable
G43.811	Other migraine, intractable, with status migrainosus
G43.819	Other migraine, intractable, without status migrainosus
G43.831	Menstrual migraine, intractable, with status migrainosus
G43.839	Menstrual migraine, intractable, without status migrainosus
G43.911	Migraine, unspecified, intractable, with status migrainosus
G43.919	Migraine, unspecified, 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

**Group 8 Paragraph:**

CPT® code 64650, 64653, 64999; HCPCS codes J0585, J0586, J0587, J0588

\*64999 to be billed only with L74.512 and L74.513 with chemodenervation.

\*NOTE- As there is no specific CPT® code for exocrine glands, use CPT® code 64653 when billing for hyperlacrimation.

**Group 8 Codes: (8 Codes)**

CODE	DESCRIPTION
H04.211	Epiphora due to excess lacrimation, right lacrimal gland
H04.212	Epiphora due to excess lacrimation, left lacrimal gland
H04.213	Epiphora due to excess lacrimation, bilateral lacrimal glands
L74.510	Primary focal hyperhidrosis, axilla
L74.511	Primary focal hyperhidrosis, face
L74.512	Primary focal hyperhidrosis, palms
L74.513	Primary focal hyperhidrosis, soles

CODE	DESCRIPTION
L74.52	Secondary focal hyperhidrosis

**Group 9 Paragraph:**

CPT® code 67345; HCPCS codes J0585, J0586, J0587, J0588

**Group 9 Codes: (93 Codes)**

CODE	DESCRIPTION
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
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
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

CODE	DESCRIPTION
H50.05	Alternating esotropia
H50.06	Alternating esotropia with A pattern
H50.07	Alternating esotropia with V pattern
H50.08	Alternating esotropia with other noncomitancies
H50.111	Monocular exotropia, right eye
H50.112	Monocular exotropia, left eye
H50.121	Monocular exotropia with A pattern, right eye
H50.122	Monocular exotropia with A pattern, left eye
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



CODE	DESCRIPTION
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
H50.639	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

CODE	DESCRIPTION
H51.22	Internuclear ophthalmoplegia, left eye
H51.23	Internuclear ophthalmoplegia, bilateral
H51.8	Other specified disorders of binocular movement

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

**Group 1 Paragraph:**

All other ICD-10 codes not listed under ICD-10 Codes that Support Medical Necessity will be denied as not medically necessary.

**Group 1 Codes:**

N/A

**ICD-10-PCS Codes**

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 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.

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 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

**Other Coding Information**

## Revision History Information

REVISION HISTORY DATE	REVISION HISTORY NUMBER	REVISION HISTORY EXPLANATION
10/01/2023	R10	Under <b>ICD-10-CM Codes that Support Medical Necessity Group 7: Codes</b> added G43.E01, G43.E09, G43.E11, and G43.E19. This revision is retroactive effective for dates of service on or after 10/1/23.
10/01/2023	R9	Under <b>ICD-10-CM Codes that Support Medical Necessity Group 6: Codes</b> deleted G37.8. Under <b>ICD-10-CM Codes that Support Medical Necessity Group 9: Codes</b> added 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 and H50.689. This revision is due to the Annual ICD-10-CM Update and will become effective on 10/1/23.
01/01/2023	R8	Under <b>CPT/HCPCS Codes Group 1: Codes</b> the description was revised for 64999. This revision is due to the 2023 Annual/Q1 CPT/HCPCS Code Update and is retroactive effective for dates of service on or after 1/1/23.
04/29/2021	R7	Under <b>CMS National Coverage Policy</b> added description to regulation Title XVIII of the Social Security Act, §1833(e). Formatting, punctuation and typographical errors were corrected throughout the article. Acronyms were defined where appropriate throughout the article. CPT <sup>®</sup> was inserted throughout the article where applicable.
01/01/2021	R6	Under <b>CPT/HCPCS Codes Group 1: Codes</b> changed descriptors for 46505, 64642, 64643, 64644 and 64645. This revision is due to the Q1 2021 CPT/HCPCS Code Update and is retroactive effective for dates of service on or after 1/1/2021.
10/10/2019	R5	This article is being revised in order to adhere to CMS requirements per Chapter 13, Section 13.5.1 of the Program Integrity Manual. Title XVIII of the Social Security Act, §1833(e) was removed from the <b>CMS National Coverage Policy</b> section of the related Chemodenervation L33458 LCD and placed in this article. The registered trademark symbol was added throughout article where applicable.
10/01/2019	R4	Under <b>Covered ICD-10 Codes Group 7: Codes</b> the description changed for ICD-10 code G43.A1. This revision is due to the 2019 Annual ICD-10 Code Update and is effective on October 1, 2019.
08/01/2019	R3	Under <b>Covered ICD-10 Codes Group 5: Codes</b> ICD code G440.21 has been added.

REVISION HISTORY DATE	REVISION HISTORY NUMBER	REVISION HISTORY EXPLANATION
07/25/2019	R2	Under <b>Covered ICD-10 Codes Group 6: Codes</b> ICD code G81.11 has been added.
07/04/2019	R1	All coding located in the <b>Coding Information</b> section has been removed from the related Chemodenervation L33458 LCD and added to this article.

## Associated Documents

### Related Local Coverage Documents

#### LCDs

[L33458 - Chemodenervation](#)

### 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.		
10/12/2023	10/01/2023 - N/A	Currently in Effect (This Version)
09/05/2023	10/01/2023 - N/A	Superseded
01/17/2023	01/01/2023 - 09/30/2023	Superseded

## Keywords

- Chemodenervation