

Local Coverage Article: Billing and Coding: Barium Swallow Studies, Modified (A56589)

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Novitas Solutions, Inc.	A and B MAC	04112 - MAC B	J - H	Colorado
Novitas Solutions, Inc.	A and B MAC	04211 - MAC A	J - H	New Mexico
Novitas Solutions, Inc.	A and B MAC	04212 - MAC B	J - H	New Mexico
Novitas Solutions, Inc.	A and B MAC	04311 - MAC A	J - H	Oklahoma
Novitas Solutions, Inc.	A and B MAC	04312 - MAC B	J - H	Oklahoma
Novitas Solutions, Inc.	A and B MAC	04411 - MAC A	J - H	Texas
Novitas Solutions, Inc.	A and B MAC	04412 - MAC B	J - H	Texas
Novitas Solutions, Inc.	A and B MAC	04911 - MAC A	J - H	Colorado New Mexico Oklahoma Texas
Novitas Solutions, Inc.	A and B MAC	07101 - MAC A	J - H	Arkansas
Novitas Solutions, Inc.	A and B MAC	07102 - MAC B	J - H	Arkansas
Novitas Solutions, Inc.	A and B MAC	07201 - MAC A	J - H	Louisiana
Novitas Solutions, Inc.	A and B MAC	07202 - MAC B	J - H	Louisiana
Novitas Solutions, Inc.	A and B MAC	07301 - MAC A	J - H	Mississippi
Novitas Solutions, Inc.	A and B MAC	07302 - MAC B	J - H	Mississippi
Novitas Solutions, Inc.	A and B MAC	12101 - MAC A	J - L	Delaware
Novitas Solutions, Inc.	A and B MAC	12102 - MAC B	J - L	Delaware
Novitas Solutions, Inc.	A and B MAC	12201 - MAC A	J - L	District of Columbia
Novitas Solutions, Inc.	A and B MAC	12202 - MAC B	J - L	District of Columbia
Novitas Solutions, Inc.	A and B MAC	12301 - MAC A	J - L	Maryland
Novitas Solutions, Inc.	A and B MAC	12302 - MAC B	J - L	Maryland
Novitas Solutions, Inc.	A and B MAC	12401 - MAC A	J - L	New Jersey
Novitas Solutions, Inc.	A and B MAC	12402 - MAC B	J - L	New Jersey
Novitas Solutions, Inc.	A and B MAC	12501 - MAC A	J - L	Pennsylvania
Novitas Solutions, Inc.	A and B MAC	12502 - MAC B	J - L	Pennsylvania

CONTRACTOR NAME	CONTRACT TYPE	CONTRACT NUMBER	JURISDICTION	STATE(S)
Novitas Solutions, Inc.	A and B MAC	12901 - MAC A	J - L	Delaware District of Columbia Maryland New Jersey Pennsylvania

Article Information

General Information

Article ID

A56589

Original Effective Date

05/30/2019

Article Title

Billing and Coding: Barium Swallow Studies, Modified

Revision Effective Date

01/01/2020

Article Type

Billing and Coding

Revision Ending Date

N/A

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Retirement Date

N/A

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CMS National Coverage Policy

N/A

Article Guidance

Article Text:

This article provides billing and coding guidelines for Local Coverage Determination (LCD) L35433, Barium Swallow Studies, Modified. Please refer to the LCD for reasonable and necessary requirements.

The Current Procedural Terminology (CPT)/Healthcare Common Procedure Coding System (HCPCS) code(s) may be subject to National Correct Coding Initiative (NCCI) edits. This information does not take precedence over NCCI edits. Please refer to NCCI for correct coding guidelines and specific applicable code combinations prior to billing Medicare.

Coding Information

CPT codes 70370, 70371 and 74230 describe the complete barium swallow study and should only be billed one time per patient on the same date of service. Only one of these CPT codes should be billed per patient on the same date of service.

Coding Information

CPT/HCPCS Codes

Group 1 Paragraph:

Note: Providers are reminded to refer to the long descriptors of the CPT codes in their CPT book.

Group 1 Codes:

CODE	DESCRIPTION
70370	Throat x-ray & fluoroscopy
70371	Speech evaluation complex
74230	X-ray xm swlng funcj c+

CPT/HCPCS Modifiers

N/A

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

It is the provider's responsibility to select codes carried out to the highest level of specificity and selected from the ICD-10-CM code book appropriate to the year in which the service is rendered for the claim(s) submitted.

Report dysphagia with the primary diagnosis of I69.091, I69.191, I69.291, I69.391, I69.891, I69.991, J69.0, R13.0, R13.10-R13.14 or R13.19. At least one of the secondary diagnoses from the secondary diagnoses list below is required for R13.0, R13.10-R13.14 and R13.19. ICD-10 codes I69.091, I69.191, I69.291, I69.391, I69.891, I69.991 and J69.0 do not require a secondary diagnosis)

Medicare is establishing the following limited coverage for **CPT/HCPCS codes 70370, 70371 and 74230:**
Primary Diagnosis

Group 1 Codes:

ICD-10 CODE	DESCRIPTION
I69.091	Dysphagia following nontraumatic subarachnoid hemorrhage
I69.191	Dysphagia following nontraumatic intracerebral hemorrhage
I69.291	Dysphagia following other nontraumatic intracranial hemorrhage
I69.391	Dysphagia following cerebral infarction
I69.891	Dysphagia following other cerebrovascular disease
I69.991	Dysphagia following unspecified cerebrovascular disease
J69.0	Pneumonitis due to inhalation of food and vomit
R13.0	Aphagia
R13.10	Dysphagia, unspecified

ICD-10 CODE	DESCRIPTION
R13.11	Dysphagia, oral phase
R13.12	Dysphagia, oropharyngeal phase
R13.13	Dysphagia, pharyngeal phase
R13.14	Dysphagia, pharyngoesophageal phase
R13.19	Other dysphagia

Group 2 Paragraph:

The following are **secondary (dual) diagnoses to be used with R13.0, R13.10-R13.14 and R13.19 (primary diagnosis)** to meet limited coverage for **CPT/HCPCS codes 70370, 70371 and 74230:**

Secondary Diagnosis:

Group 2 Codes:

ICD-10 CODE	DESCRIPTION
A31.0	Pulmonary mycobacterial infection
B91	Sequelae of poliomyelitis
C00.0	Malignant neoplasm of external upper lip
C00.1	Malignant neoplasm of external lower lip
C00.2	Malignant neoplasm of external lip, unspecified
C00.3	Malignant neoplasm of upper lip, inner aspect
C00.4	Malignant neoplasm of lower lip, inner aspect
C00.5	Malignant neoplasm of lip, unspecified, inner aspect
C00.6	Malignant neoplasm of commissure of lip, unspecified
C00.8	Malignant neoplasm of overlapping sites of lip
C00.9	Malignant neoplasm of lip, unspecified
C01	Malignant neoplasm of base of tongue
C02.0	Malignant neoplasm of dorsal surface of tongue
C02.1	Malignant neoplasm of border of tongue
C02.2	Malignant neoplasm of ventral surface of tongue
C02.3	Malignant neoplasm of anterior two-thirds of tongue, part unspecified
C02.4	Malignant neoplasm of lingual tonsil
C02.8	Malignant neoplasm of overlapping sites of tongue
C02.9	Malignant neoplasm of tongue, unspecified
C03.0	Malignant neoplasm of upper gum

ICD-10 CODE	DESCRIPTION
C03.1	Malignant neoplasm of lower gum
C03.9	Malignant neoplasm of gum, unspecified
C04.0	Malignant neoplasm of anterior floor of mouth
C04.1	Malignant neoplasm of lateral floor of mouth
C04.8	Malignant neoplasm of overlapping sites of floor of mouth
C04.9	Malignant neoplasm of floor of mouth, unspecified
C05.0	Malignant neoplasm of hard palate
C05.1	Malignant neoplasm of soft palate
C05.2	Malignant neoplasm of uvula
C05.8	Malignant neoplasm of overlapping sites of palate
C05.9	Malignant neoplasm of palate, unspecified
C06.0	Malignant neoplasm of cheek mucosa
C06.1	Malignant neoplasm of vestibule of mouth
C06.2	Malignant neoplasm of retromolar area
C06.80	Malignant neoplasm of overlapping sites of unspecified parts of mouth
C06.89	Malignant neoplasm of overlapping sites of other parts of mouth
C06.9	Malignant neoplasm of mouth, unspecified
C07	Malignant neoplasm of parotid gland
C08.0	Malignant neoplasm of submandibular gland
C08.1	Malignant neoplasm of sublingual gland
C08.9	Malignant neoplasm of major salivary gland, unspecified
C09.0	Malignant neoplasm of tonsillar fossa
C09.1	Malignant neoplasm of tonsillar pillar (anterior) (posterior)
C09.8	Malignant neoplasm of overlapping sites of tonsil
C09.9	Malignant neoplasm of tonsil, unspecified
C10.0	Malignant neoplasm of vallecula
C10.1	Malignant neoplasm of anterior surface of epiglottis
C10.2	Malignant neoplasm of lateral wall of oropharynx
C10.3	Malignant neoplasm of posterior wall of oropharynx
C10.4	Malignant neoplasm of branchial cleft
C10.8	Malignant neoplasm of overlapping sites of oropharynx
C10.9	Malignant neoplasm of oropharynx, unspecified

ICD-10 CODE	DESCRIPTION
C11.0	Malignant neoplasm of superior wall of nasopharynx
C11.1	Malignant neoplasm of posterior wall of nasopharynx
C11.2	Malignant neoplasm of lateral wall of nasopharynx
C11.3	Malignant neoplasm of anterior wall of nasopharynx
C11.8	Malignant neoplasm of overlapping sites of nasopharynx
C11.9	Malignant neoplasm of nasopharynx, unspecified
C12	Malignant neoplasm of pyriform sinus
C13.0	Malignant neoplasm of postcricoid region
C13.1	Malignant neoplasm of aryepiglottic fold, hypopharyngeal aspect
C13.2	Malignant neoplasm of posterior wall of hypopharynx
C13.8	Malignant neoplasm of overlapping sites of hypopharynx
C13.9	Malignant neoplasm of hypopharynx, unspecified
C14.0	Malignant neoplasm of pharynx, unspecified
C14.2	Malignant neoplasm of Waldeyer's ring
C14.8	Malignant neoplasm of overlapping sites of lip, oral cavity and pharynx
C15.3	Malignant neoplasm of upper third of esophagus
C15.4	Malignant neoplasm of middle third of esophagus
C15.5	Malignant neoplasm of lower third of esophagus
C15.8	Malignant neoplasm of overlapping sites of esophagus
C15.9	Malignant neoplasm of esophagus, unspecified
C30.0	Malignant neoplasm of nasal cavity
C30.1	Malignant neoplasm of middle ear
C31.0	Malignant neoplasm of maxillary sinus
C31.1	Malignant neoplasm of ethmoidal sinus
C31.2	Malignant neoplasm of frontal sinus
C31.3	Malignant neoplasm of sphenoid sinus
C31.8	Malignant neoplasm of overlapping sites of accessory sinuses
C32.0	Malignant neoplasm of glottis
C32.1	Malignant neoplasm of supraglottis
C32.2	Malignant neoplasm of subglottis
C32.3	Malignant neoplasm of laryngeal cartilage
C32.8	Malignant neoplasm of overlapping sites of larynx

ICD-10 CODE	DESCRIPTION
C32.9	Malignant neoplasm of larynx, unspecified
C76.0	Malignant neoplasm of head, face and neck
C77.0	Secondary and unspecified malignant neoplasm of lymph nodes of head, face and neck
C78.7	Secondary malignant neoplasm of liver and intrahepatic bile duct
C78.80	Secondary malignant neoplasm of unspecified digestive organ
C78.89	Secondary malignant neoplasm of other digestive organs
D10.1	Benign neoplasm of tongue
D10.2	Benign neoplasm of floor of mouth
D10.30	Benign neoplasm of unspecified part of mouth
D10.39	Benign neoplasm of other parts of mouth
D10.4	Benign neoplasm of tonsil
D10.5	Benign neoplasm of other parts of oropharynx
D10.6	Benign neoplasm of nasopharynx
D10.7	Benign neoplasm of hypopharynx
D10.9	Benign neoplasm of pharynx, unspecified
D11.0	Benign neoplasm of parotid gland
D11.7	Benign neoplasm of other major salivary glands
ICD-10 CODE	DESCRIPTION
D11.9	Benign neoplasm of major salivary gland, unspecified
D13.0	Benign neoplasm of esophagus
D38.0	Neoplasm of uncertain behavior of larynx
D49.1	Neoplasm of unspecified behavior of respiratory system
F44.4	Conversion disorder with motor symptom or deficit
F44.7	Conversion disorder with mixed symptom presentation
G10	Huntington's disease
G12.21	Amyotrophic lateral sclerosis
G12.22	Progressive bulbar palsy
G12.23	Primary lateral sclerosis
G12.24	Familial motor neuron disease
G12.25	Progressive spinal muscle atrophy
G12.29	Other motor neuron disease

ICD-10 CODE	DESCRIPTION
G12.8	Other spinal muscular atrophies and related syndromes
G14	Postpolio syndrome
G20	Parkinson's disease
G21.0	Malignant neuroleptic syndrome
G21.11	Neuroleptic induced parkinsonism
G21.19	Other drug induced secondary parkinsonism
G21.2	Secondary parkinsonism due to other external agents
G21.3	Postencephalitic parkinsonism
G21.4	Vascular parkinsonism
G21.8	Other secondary parkinsonism
G21.9	Secondary parkinsonism, unspecified
G23.0	Hallervorden-Spatz disease
G23.1	Progressive supranuclear ophthalmoplegia [Steele-Richardson-Olszewski]
G23.2	Striatonigral degeneration
G23.8	Other specified degenerative diseases of basal ganglia
G23.9	Degenerative disease of basal ganglia, unspecified
G24.09	Other drug induced dystonia
G24.1	Genetic torsion dystonia
G24.2	Idiopathic nonfamilial dystonia
G24.3	Spasmodic torticollis
G24.4	Idiopathic orofacial dystonia
G24.5	Blepharospasm
G24.8	Other dystonia
G24.9	Dystonia, unspecified
G25.3	Myoclonus
G25.4	Drug-induced chorea
G25.5	Other chorea
G25.70	Drug induced movement disorder, unspecified
G25.71	Drug induced akathisia
G25.79	Other drug induced movement disorders
G25.82	Stiff-man syndrome
G25.83	Benign shuddering attacks

ICD-10 CODE	DESCRIPTION
G25.89	Other specified extrapyramidal and movement disorders
G25.9	Extrapyramidal and movement disorder, unspecified
G26	Extrapyramidal and movement disorders in diseases classified elsewhere
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
G37.5	Concentric sclerosis [Balo] of central nervous system
G37.8	Other specified demyelinating diseases of central nervous system
G37.9	Demyelinating disease of central nervous system, unspecified
G70.00	Myasthenia gravis without (acute) exacerbation
G70.01	Myasthenia gravis with (acute) exacerbation
G71.01	Duchenne or Becker muscular dystrophy
G71.09	Other specified muscular dystrophies
G80.3	Athetoid cerebral palsy
G80.4	Ataxic cerebral palsy
G80.8	Other cerebral palsy
G81.00	Flaccid hemiplegia affecting unspecified side
G81.01	Flaccid hemiplegia affecting right dominant side
G81.02	Flaccid hemiplegia affecting left dominant side
G81.03	Flaccid hemiplegia affecting right nondominant side
G81.04	Flaccid hemiplegia affecting left nondominant side
G81.10	Spastic hemiplegia affecting unspecified side
G81.11	Spastic hemiplegia affecting right dominant side
G81.12	Spastic hemiplegia affecting left dominant side
G81.13	Spastic hemiplegia affecting right nondominant side

ICD-10 CODE	DESCRIPTION
G81.14	Spastic hemiplegia affecting left nondominant side
G81.90	Hemiplegia, unspecified affecting unspecified side
G81.91	Hemiplegia, unspecified affecting right dominant side
G81.92	Hemiplegia, unspecified affecting left dominant side
G81.93	Hemiplegia, unspecified affecting right nondominant side
G81.94	Hemiplegia, unspecified affecting left nondominant side
G82.50	Quadriplegia, unspecified
G82.51	Quadriplegia, C1-C4 complete
G82.52	Quadriplegia, C1-C4 incomplete
G82.53	Quadriplegia, C5-C7 complete
G82.54	Quadriplegia, C5-C7 incomplete
G90.3	Multi-system degeneration of the autonomic nervous system
I63.30	Cerebral infarction due to thrombosis of unspecified cerebral artery
I63.311	Cerebral infarction due to thrombosis of right middle cerebral artery
I63.312	Cerebral infarction due to thrombosis of left middle cerebral artery
I63.313	Cerebral infarction due to thrombosis of bilateral middle cerebral arteries
I63.319	Cerebral infarction due to thrombosis of unspecified middle cerebral artery
I63.321	Cerebral infarction due to thrombosis of right anterior cerebral artery
I63.322	Cerebral infarction due to thrombosis of left anterior cerebral artery
I63.323	Cerebral infarction due to thrombosis of bilateral anterior cerebral arteries
I63.329	Cerebral infarction due to thrombosis of unspecified anterior cerebral artery
I63.331	Cerebral infarction due to thrombosis of right posterior cerebral artery
I63.332	Cerebral infarction due to thrombosis of left posterior cerebral artery
ICD-10 CODE	DESCRIPTION
I63.333	Cerebral infarction due to thrombosis of bilateral posterior cerebral arteries
I63.339	Cerebral infarction due to thrombosis of unspecified posterior cerebral artery
I63.341	Cerebral infarction due to thrombosis of right cerebellar artery
I63.342	Cerebral infarction due to thrombosis of left cerebellar artery
I63.343	Cerebral infarction due to thrombosis of bilateral cerebellar arteries
I63.349	Cerebral infarction due to thrombosis of unspecified cerebellar artery
I63.39	Cerebral infarction due to thrombosis of other cerebral artery
I63.40	Cerebral infarction due to embolism of unspecified cerebral artery

ICD-10 CODE	DESCRIPTION
I63.411	Cerebral infarction due to embolism of right middle cerebral artery
I63.412	Cerebral infarction due to embolism of left middle cerebral artery
I63.413	Cerebral infarction due to embolism of bilateral middle cerebral arteries
I63.419	Cerebral infarction due to embolism of unspecified middle cerebral artery
I63.421	Cerebral infarction due to embolism of right anterior cerebral artery
I63.422	Cerebral infarction due to embolism of left anterior cerebral artery
I63.423	Cerebral infarction due to embolism of bilateral anterior cerebral arteries
I63.429	Cerebral infarction due to embolism of unspecified anterior cerebral artery
I63.431	Cerebral infarction due to embolism of right posterior cerebral artery
I63.432	Cerebral infarction due to embolism of left posterior cerebral artery
I63.433	Cerebral infarction due to embolism of bilateral posterior cerebral arteries
I63.439	Cerebral infarction due to embolism of unspecified posterior cerebral artery
I63.441	Cerebral infarction due to embolism of right cerebellar artery
I63.442	Cerebral infarction due to embolism of left cerebellar artery
I63.443	Cerebral infarction due to embolism of bilateral cerebellar arteries
I63.449	Cerebral infarction due to embolism of unspecified cerebellar artery
I63.49	Cerebral infarction due to embolism of other cerebral artery
I63.50	Cerebral infarction due to unspecified occlusion or stenosis of unspecified cerebral artery
I63.511	Cerebral infarction due to unspecified occlusion or stenosis of right middle cerebral artery
I63.512	Cerebral infarction due to unspecified occlusion or stenosis of left middle cerebral artery
I63.513	Cerebral infarction due to unspecified occlusion or stenosis of bilateral middle cerebral arteries
I63.519	Cerebral infarction due to unspecified occlusion or stenosis of unspecified middle cerebral artery
I63.521	Cerebral infarction due to unspecified occlusion or stenosis of right anterior cerebral artery
I63.522	Cerebral infarction due to unspecified occlusion or stenosis of left anterior cerebral artery
I63.523	Cerebral infarction due to unspecified occlusion or stenosis of bilateral anterior cerebral arteries
I63.529	Cerebral infarction due to unspecified occlusion or stenosis of unspecified anterior

ICD-10 CODE	DESCRIPTION
	cerebral artery
I63.531	Cerebral infarction due to unspecified occlusion or stenosis of right posterior cerebral artery
I63.532	Cerebral infarction due to unspecified occlusion or stenosis of left posterior cerebral artery
I63.533	Cerebral infarction due to unspecified occlusion or stenosis of bilateral posterior cerebral arteries
I63.539	Cerebral infarction due to unspecified occlusion or stenosis of unspecified posterior cerebral artery
I63.541	Cerebral infarction due to unspecified occlusion or stenosis of right cerebellar artery
I63.542	Cerebral infarction due to unspecified occlusion or stenosis of left cerebellar artery
I63.543	Cerebral infarction due to unspecified occlusion or stenosis of bilateral cerebellar arteries
I63.549	Cerebral infarction due to unspecified occlusion or stenosis of unspecified cerebellar artery
I63.59	Cerebral infarction due to unspecified occlusion or stenosis of other cerebral artery
I63.6	Cerebral infarction due to cerebral venous thrombosis, nonpyogenic
I63.81	Other cerebral infarction due to occlusion or stenosis of small artery
I63.89	Other cerebral infarction
I63.9	Cerebral infarction, unspecified
I66.01	Occlusion and stenosis of right middle cerebral artery
I66.02	Occlusion and stenosis of left middle cerebral artery
I66.03	Occlusion and stenosis of bilateral middle cerebral arteries
I66.09	Occlusion and stenosis of unspecified middle cerebral artery
I66.11	Occlusion and stenosis of right anterior cerebral artery
I66.12	Occlusion and stenosis of left anterior cerebral artery
I66.13	Occlusion and stenosis of bilateral anterior cerebral arteries
I66.19	Occlusion and stenosis of unspecified anterior cerebral artery
I66.21	Occlusion and stenosis of right posterior cerebral artery
I66.22	Occlusion and stenosis of left posterior cerebral artery
I66.23	Occlusion and stenosis of bilateral posterior cerebral arteries
I66.29	Occlusion and stenosis of unspecified posterior cerebral artery
I66.3	Occlusion and stenosis of cerebellar arteries

ICD-10 CODE	DESCRIPTION
I66.8	Occlusion and stenosis of other cerebral arteries
I66.9	Occlusion and stenosis of unspecified cerebral artery
I67.89	Other cerebrovascular disease
I69.020	Aphasia following nontraumatic subarachnoid hemorrhage
I69.021	Dysphasia following nontraumatic subarachnoid hemorrhage
I69.022	Dysarthria following nontraumatic subarachnoid hemorrhage
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
I69.059	Hemiplegia and hemiparesis following nontraumatic subarachnoid hemorrhage affecting unspecified side
I69.091	Dysphagia following nontraumatic subarachnoid hemorrhage
I69.120	Aphasia following nontraumatic intracerebral hemorrhage
I69.121	Dysphasia following nontraumatic intracerebral hemorrhage
I69.122	Dysarthria following nontraumatic intracerebral hemorrhage
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
I69.159	Hemiplegia and hemiparesis following nontraumatic intracerebral hemorrhage affecting unspecified side
I69.191	Dysphagia following nontraumatic intracerebral hemorrhage
I69.220	Aphasia following other nontraumatic intracranial hemorrhage
I69.221	Dysphasia following other nontraumatic intracranial hemorrhage
I69.222	Dysarthria following other nontraumatic intracranial hemorrhage
I69.251	Hemiplegia and hemiparesis following other nontraumatic intracranial hemorrhage

ICD-10 CODE	DESCRIPTION
	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 affecting left non-dominant side
I69.259	Hemiplegia and hemiparesis following other nontraumatic intracranial hemorrhage affecting unspecified side
I69.291	Dysphagia following other nontraumatic intracranial hemorrhage
I69.320	Aphasia following cerebral infarction
I69.321	Dysphasia following cerebral infarction
I69.322	Dysarthria following cerebral infarction
I69.351	Hemiplegia and hemiparesis following cerebral infarction affecting right dominant side
I69.352	Hemiplegia and hemiparesis following cerebral infarction affecting left dominant side
I69.353	Hemiplegia and hemiparesis following cerebral infarction affecting right non-dominant side
I69.354	Hemiplegia and hemiparesis following cerebral infarction affecting left non-dominant side
I69.359	Hemiplegia and hemiparesis following cerebral infarction affecting unspecified side
I69.391	Dysphagia following cerebral infarction
I69.820	Aphasia following other cerebrovascular disease
ICD-10 CODE	DESCRIPTION
I69.821	Dysphasia following other cerebrovascular disease
I69.822	Dysarthria following other cerebrovascular disease
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
I69.859	Hemiplegia and hemiparesis following other cerebrovascular disease affecting

ICD-10 CODE	DESCRIPTION
	unspecified side
I69.891	Dysphagia following other cerebrovascular disease
I69.920	Aphasia following unspecified cerebrovascular disease
I69.921	Dysphasia following unspecified cerebrovascular disease
I69.922	Dysarthria following unspecified cerebrovascular disease
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
I69.959	Hemiplegia and hemiparesis following unspecified cerebrovascular disease affecting unspecified side
I69.991	Dysphagia following unspecified cerebrovascular disease
J05.0	Acute obstructive laryngitis [croup]
J38.00	Paralysis of vocal cords and larynx, unspecified
J38.01	Paralysis of vocal cords and larynx, unilateral
J38.02	Paralysis of vocal cords and larynx, bilateral
J38.4	Edema of larynx
J47.0	Bronchiectasis with acute lower respiratory infection
J47.1	Bronchiectasis with (acute) exacerbation
J47.9	Bronchiectasis, uncomplicated
J69.0	Pneumonitis due to inhalation of food and vomit
K20.0	Eosinophilic esophagitis
K21.9	Gastro-esophageal reflux disease without esophagitis
K22.0	Achalasia of cardia
K22.2	Esophageal obstruction
K22.3	Perforation of esophagus
K22.4	Dyskinesia of esophagus
K22.5	Diverticulum of esophagus, acquired
K94.30	Esophagostomy complications, unspecified

ICD-10 CODE	DESCRIPTION
K94.31	Esophagostomy hemorrhage
K94.32	Esophagostomy infection
K94.33	Esophagostomy malfunction
K94.39	Other complications of esophagostomy
M33.00	Juvenile dermatomyositis, organ involvement unspecified
M33.01	Juvenile dermatomyositis with respiratory involvement
M33.02	Juvenile dermatomyositis with myopathy
M33.09	Juvenile dermatomyositis with other organ involvement
M33.10	Other dermatomyositis, organ involvement unspecified
M33.11	Other dermatomyositis with respiratory involvement
M33.12	Other dermatomyositis with myopathy
M33.19	Other dermatomyositis with other organ involvement
M33.20	Polymyositis, organ involvement unspecified
M33.21	Polymyositis with respiratory involvement
M33.22	Polymyositis with myopathy
M33.29	Polymyositis with other organ involvement
M33.90	Dermatopolymyositis, unspecified, organ involvement unspecified
M33.91	Dermatopolymyositis, unspecified with respiratory involvement
M33.92	Dermatopolymyositis, unspecified with myopathy
M33.99	Dermatopolymyositis, unspecified with other organ involvement
M34.0	Progressive systemic sclerosis
M34.1	CR(E)ST syndrome
M34.2	Systemic sclerosis induced by drug and chemical
M34.81	Systemic sclerosis with lung involvement
M34.82	Systemic sclerosis with myopathy
M34.83	Systemic sclerosis with polyneuropathy
M34.89	Other systemic sclerosis
M34.9	Systemic sclerosis, unspecified
M36.0	Dermato(poly)myositis in neoplastic disease
R13.10	Dysphagia, unspecified
R47.02	Dysphasia
R47.1	Dysarthria and anarthria

ICD-10 CODE	DESCRIPTION
R47.81	Slurred speech
R47.89	Other speech disturbances
R47.9	Unspecified speech disturbances
R49.8	Other voice and resonance disorders
R63.3	Feeding difficulties
R68.89	Other general symptoms and signs
S09.10XS	Unspecified injury of muscle and tendon of head, sequela
S09.19XS	Other specified injury of muscle and tendon of head, sequela
S09.8XXS	Other specified injuries of head, sequela
S09.90XS	Unspecified injury of head, sequela
S16.8XXS	Other specified injury of muscle, fascia and tendon at neck level, sequela
S16.9XXS	Unspecified injury of muscle, fascia and tendon at neck level, sequela
S19.80XS	Other specified injuries of unspecified part of neck, sequela
S19.81XS	Other specified injuries of larynx, sequela
S19.82XS	Other specified injuries of cervical trachea, sequela
S19.83XS	Other specified injuries of vocal cord, sequela
S19.84XS	Other specified injuries of thyroid gland, sequela
S19.85XS	Other specified injuries of pharynx and cervical esophagus, sequela
S19.89XS	Other specified injuries of other specified part of neck, sequela
S19.9XXS	Unspecified injury of neck, sequela
S29.001S	Unspecified injury of muscle and tendon of front wall of thorax, sequela
S29.002S	Unspecified injury of muscle and tendon of back wall of thorax, sequela
S29.009S	Unspecified injury of muscle and tendon of unspecified wall of thorax, sequela
S29.091S	Other injury of muscle and tendon of front wall of thorax, sequela
S29.092S	Other injury of muscle and tendon of back wall of thorax, sequela
S29.099S	Other injury of muscle and tendon of unspecified wall of thorax, sequela
S29.8XXS	Other specified injuries of thorax, sequela
S29.9XXS	Unspecified injury of thorax, sequela
T17.300A	Unspecified foreign body in larynx causing asphyxiation, initial encounter
T17.308A	Unspecified foreign body in larynx causing other injury, initial encounter
T17.310A	Gastric contents in larynx causing asphyxiation, initial encounter
T17.318A	Gastric contents in larynx causing other injury, initial encounter

ICD-10 CODE	DESCRIPTION
T17.320A	Food in larynx causing asphyxiation, initial encounter
T17.328A	Food in larynx causing other injury, initial encounter
ICD-10 CODE	DESCRIPTION
T17.390A	Other foreign object in larynx causing asphyxiation, initial encounter
T17.398A	Other foreign object in larynx causing other injury, initial encounter
T17.400A	Unspecified foreign body in trachea causing asphyxiation, initial encounter
T17.408A	Unspecified foreign body in trachea causing other injury, initial encounter
T17.410A	Gastric contents in trachea causing asphyxiation, initial encounter
T17.418A	Gastric contents in trachea causing other injury, initial encounter
T17.420A	Food in trachea causing asphyxiation, initial encounter
T17.428A	Food in trachea causing other injury, initial encounter
T17.490A	Other foreign object in trachea causing asphyxiation, initial encounter
T17.498A	Other foreign object in trachea causing other injury, initial encounter
T17.500A	Unspecified foreign body in bronchus causing asphyxiation, initial encounter
T17.508A	Unspecified foreign body in bronchus causing other injury, initial encounter
T17.510A	Gastric contents in bronchus causing asphyxiation, initial encounter
T17.518A	Gastric contents in bronchus causing other injury, initial encounter
T17.520A	Food in bronchus causing asphyxiation, initial encounter
T17.528A	Food in bronchus causing other injury, initial encounter
T17.590A	Other foreign object in bronchus causing asphyxiation, initial encounter
T17.598A	Other foreign object in bronchus causing other injury, initial encounter
T17.800A	Unspecified foreign body in other parts of respiratory tract causing asphyxiation, initial encounter
T17.808A	Unspecified foreign body in other parts of respiratory tract causing other injury, initial encounter
T17.810A	Gastric contents in other parts of respiratory tract causing asphyxiation, initial encounter
T17.818A	Gastric contents in other parts of respiratory tract causing other injury, initial encounter
T17.820A	Food in other parts of respiratory tract causing asphyxiation, initial encounter
T17.828A	Food in other parts of respiratory tract causing other injury, initial encounter
T17.890A	Other foreign object in other parts of respiratory tract causing asphyxiation, initial encounter

ICD-10 CODE	DESCRIPTION
T17.898A	Other foreign object in other parts of respiratory tract causing other injury, initial encounter
T17.900A	Unspecified foreign body in respiratory tract, part unspecified causing asphyxiation, initial encounter
T17.908A	Unspecified foreign body in respiratory tract, part unspecified causing other injury, initial encounter
T17.910A	Gastric contents in respiratory tract, part unspecified causing asphyxiation, initial encounter
T17.918A	Gastric contents in respiratory tract, part unspecified causing other injury, initial encounter
T17.920A	Food in respiratory tract, part unspecified causing asphyxiation, initial encounter
T17.928A	Food in respiratory tract, part unspecified causing other injury, initial encounter
T17.990A	Other foreign object in respiratory tract, part unspecified in causing asphyxiation, initial encounter
T17.998A	Other foreign object in respiratory tract, part unspecified causing other injury, initial encounter
Z08	Encounter for follow-up examination after completed treatment for malignant neoplasm
Z09	Encounter for follow-up examination after completed treatment for conditions other than malignant neoplasm
Z85.21	Personal history of malignant neoplasm of larynx
Z85.22	Personal history of malignant neoplasm of nasal cavities, middle ear, and accessory sinuses
Z85.818	Personal history of malignant neoplasm of other sites of lip, oral cavity, and pharynx
Z85.819	Personal history of malignant neoplasm of unspecified site of lip, oral cavity, and pharynx

ICD-10 Codes that DO NOT Support Medical Necessity

Group 1 Paragraph:

All those not listed under the "ICD-10 Codes that Support Medical Necessity" section of this article.

Group 1 Codes:

ICD-10 CODE	DESCRIPTION
XX000	Not Applicable

Additional ICD-10 Information

N/A

Bill Type Codes:

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

CODE	DESCRIPTION
012x	Hospital Inpatient (Medicare Part B only)
013x	Hospital Outpatient
021x	Skilled Nursing - Inpatient (Including Medicare Part A)
022x	Skilled Nursing - Inpatient (Medicare Part B only)
023x	Skilled Nursing - Outpatient
075x	Clinic - Comprehensive Outpatient Rehabilitation Facility (CORF)
085x	Critical Access Hospital

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.

Note: The contractor has identified the Bill Type and Revenue Codes applicable for use with the CPT/HCPCS codes included in this article. Providers are reminded that not all CPT/HCPCS codes listed can be billed with all Bill Type and/or Revenue Codes listed. CPT/HCPCS codes are required to be billed with specific Bill Type and Revenue Codes. Providers are encouraged to refer to the CMS Internet-Only Manual (IOM) Publication 100-04, *Medicare Claims Processing Manual*, for further guidance.

CODE	DESCRIPTION
032X	Radiology - Diagnostic - General Classification
044X	Speech-Language Pathology - General Classification

Other Coding Information

N/A

Revision History Information

REVISION HISTORY DATE	REVISION HISTORY NUMBER	REVISION HISTORY EXPLANATION
01/01/2020	R2	Article revised and published on 01/16/2020 effective for dates of service on and after 01/01/2020 to reflect the Annual CPT/HCPCS Code Update. The following CPT code(s) have undergone a descriptor change for either the short description or the long description. Depending on which description is used in this article, there may not be any change in how the code displays in the document: 74230. Minor formatting changes have been corrected throughout the article.
11/14/2019	R1	Article revised and published on 11/14/2019. System changes have been made to our articles in response to CMS Change Request 10901. The Coding Section has been reordered and new sections for CPT/HCPCS Modifiers and Other Coding Information have been added.

Associated Documents

Related Local Coverage Document(s)

LCD(s)

L35433 - Barium Swallow Studies, Modified

Related National Coverage Document(s)

N/A

Statutory Requirements URL(s)

N/A

Rules and Regulations URL(s)

N/A

CMS Manual Explanations URL(s)

N/A

Other URL(s)

N/A

Public Version(s)

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

Some older versions have been archived. Please visit the MCD Archive Site to retrieve them.

Keywords

N/A