ROUTINE FOOT CARE

CPT CODES:

11055  Paring or cutting of benign hyperkeratotic lesion (e.g., corn or callus); single lesion
11056  two to four lesions
11057  more than four lesions
11719  Trimming of non-dystrophic nails, any number
11720  Debridement of nail(s) by any method(s); one to five
11721  six or more
G0127  Trimming of dystrophic nails, any number

Care is considered routine unless the patient has a secondary diagnosis of a systemic disease and is under the active care of a doctor.

COVERED PRIMARY DIAGNOSIS:

110.1  Dermatophytosis of nail
700    Corns and callusities
703.8  Other specified diseases of nail (dystrophic nails)
703.9  Unspecified disease of nail

SYSTEMIC CONDITIONS:

The following diagnoses require a Q modifier:

249.00  *Secondary diabetes mellitus without mention of complication, not stated as uncontrolled or unspecified
249.01  *Secondary diabetes mellitus without mention of complication, uncontrolled
249.10  *Secondary diabetes mellitus with ketoacidosis, not stated as uncontrolled, or unspecified
249.11  *Secondary diabetes mellitus with ketoacidosis, uncontrolled
249.20  *Secondary diabetes mellitus with hyperosmolarity, not stated as uncontrolled, or unspecified
249.21  *Secondary diabetes mellitus with hyperosmolarity, uncontrolled
249.30  *Secondary diabetes mellitus with other coma, not stated as uncontrolled, or unspecified
249.31  *Secondary diabetes mellitus with other coma, uncontrolled
249.40  *Secondary diabetes mellitus with renal manifestations, not stated as uncontrolled, or unspecified
249.41  *Secondary diabetes mellitus with renal manifestations, uncontrolled
249.50  *Secondary diabetes mellitus with ophthalmic manifestations, not stated as uncontrolled, or unspecified
249.51  *Secondary diabetes mellitus with ophthalmic manifestations, uncontrolled
249.60  *Secondary diabetes mellitus with neurological manifestations, not stated as uncontrolled, or unspecified
249.61  *Secondary diabetes mellitus with neurological manifestations, uncontrolled
249.70  *Secondary diabetes mellitus with peripheral circulatory disorders, not stated as uncontrolled, or unspecified
249.71  *Secondary diabetes mellitus with peripheral circulatory disorders, uncontrolled
249.80  *Secondary diabetes mellitus with other specified manifestations, not stated as uncontrolled, or unspecified
249.81  *Secondary diabetes mellitus with other specified manifestations, uncontrolled
249.90  *Secondary diabetes mellitus with unspecified complication, not stated as uncontrolled, or unspecified
249.91  *Secondary diabetes mellitus with unspecified complication, uncontrolled
250.00  *Diabetes mellitus without mention of complication, Type II or unspecified type, not stated as uncontrolled
MEDICAID CODING GUIDELINE

Effective 7-1-02

RETIRED 3-1-12

250.01 *Diabetes mellitus without mention of complication, Type I (Juvenile Type), not stated as uncontrolled
250.02 *Diabetes mellitus without mention of complication, Type II or unspecified type, not stated as uncontrolled
250.03 *Diabetes mellitus without mention of complication, Type I (Juvenile Type), uncontrolled
250.10 *Diabetes with ketoacidosis, Type II or unspecified type, not stated as uncontrolled
250.11 *Diabetes with ketoacidosis, Type I (Juvenile Type), not stated as uncontrolled
250.12 *Diabetes with ketoacidosis, Type II or unspecified type, not stated as uncontrolled
250.13 *Diabetes with ketoacidosis, Type I (Juvenile Type), uncontrolled
250.20 *Diabetes with hyperosmolality, Type II or unspecified type, not stated as uncontrolled
250.21 *Diabetes with hyperosmolality, Type I (Juvenile Type), not stated as uncontrolled
250.22 *Diabetes with hyperosmolality, Type II or unspecified type, not stated as uncontrolled
250.23 *Diabetes with hyperosmolality, Type I (Juvenile Type), uncontrolled
250.30 *Diabetes with other coma, Type II or unspecified type, not stated as uncontrolled
250.31 *Diabetes with other coma, Type I (Juvenile Type), not stated as uncontrolled
250.32 *Diabetes with other coma, Type II or unspecified type, not stated as uncontrolled
250.33 *Diabetes with other coma, Type I (Juvenile Type), uncontrolled
250.40 *Diabetes with renal manifestations, Type II or unspecified type, not stated as uncontrolled
250.41 *Diabetes with renal manifestations, Type I (Juvenile Type), not stated as uncontrolled
250.42 *Diabetes with renal manifestations, Type II or unspecified type, not stated as uncontrolled
250.43 *Diabetes with renal manifestations, Type I (Juvenile Type), uncontrolled
250.50 *Diabetes with ophthalmic manifestations, Type II or unspecified type, not stated as uncontrolled
250.51 *Diabetes with ophthalmic manifestations, Type I (Juvenile Type), not stated as uncontrolled
250.52 *Diabetes with ophthalmic manifestations, Type II or unspecified type, not stated as uncontrolled
250.53 *Diabetes with ophthalmic manifestations, Type I (Juvenile Type), uncontrolled
250.60 *Diabetes with neurological manifestations, Type II or unspecified type, not stated as uncontrolled
250.61 *Diabetes with neurological manifestations, Type I (Juvenile Type), not stated as uncontrolled
250.62 *Diabetes with neurological manifestations, Type II or unspecified type, not stated as uncontrolled
250.63 *Diabetes with neurological manifestations, Type I (Juvenile Type), uncontrolled
250.70 *Diabetes with peripheral circulatory disorders, Type II or unspecified type, not stated as uncontrolled
250.71 *Diabetes with peripheral circulatory disorders, Type I (Juvenile Type), not stated as uncontrolled
250.72 *Diabetes with peripheral circulatory disorders, Type II or unspecified type, not stated as uncontrolled
250.73 *Diabetes with peripheral circulatory disorders, Type I (Juvenile Type), uncontrolled
250.80 *Diabetes with other specified manifestations, Type II or unspecified type, not stated as uncontrolled
250.81 *Diabetes with other specified manifestations, Type I (Juvenile Type), not stated as uncontrolled
250.82 *Diabetes with other specified manifestations, Type II or unspecified type, not stated as uncontrolled
250.83 *Diabetes with other specified manifestations, Type I (Juvenile Type), uncontrolled
250.90 *Diabetes with unspecified complication, Type II or unspecified type, not stated as uncontrolled
250.91 *Diabetes with unspecified complication, Type I (Juvenile Type), not stated as uncontrolled
250.92 *Diabetes with unspecified complication, Type II or unspecified type, not stated as uncontrolled
250.93 *Diabetes with unspecified complication, Type I (Juvenile Type), uncontrolled

440.20 Atherosclerosis of native arteries of the extremities, unspecified
440.21 Atherosclerosis of native arteries of the extremities with intermittent claudication
440.22 Atherosclerosis of native arteries of the extremities with rest pain
440.23 Atherosclerosis of native arteries of the extremities with ulceration
440.24 Atherosclerosis of native arteries of the extremities with gangrene
440.29 Other atherosclerosis of native arteries of the extremities
440.30 Atherosclerosis of unspecified bypass graft of the extremities
440.31 Atherosclerosis of autologous vein bypass graft of the extremities
440.32 Atherosclerosis of nonautologous biological bypass graft of the extremities
440.4 *Chronic total occlusion of artery of the extremities
443.1 Thromboangiitis obliterans (Buerger’s Disease)
443.9 Peripheral Vascular Disease, unspecified

(*) Indicates these code ranges allow coverage only if the patient is under active care of a doctor of medicine or osteopathy.
The following diagnoses do not require a Q modifier:

- 340 *Multiple sclerosis
- 344.00 Quadriplegia, unspecified
- 344.01 Quadriplegia C1-C4 complete
- 344.02 Quadriplegia C1-C4 incomplete
- 344.03 Quadriplegia C5-C7 complete
- 344.04 Quadriplegia C5-C7 incomplete
- 344.09 Other quadriplegia
- 344.1 Paraplegia
- 344.30 Monoplegia of lower limb affecting unspecified side
- 344.31 Monoplegia of lower limb affecting dominant side
- 344.32 Monoplegia of lower limb affecting nondominant side
- 355.0 Lesion of sciatic nerve
- 355.1 Meralgia paresthetica
- 355.2 Other lesion of femoral nerve
- 355.3 Lesion of lateral popliteal nerve
- 355.4 Lesion of medial popliteal nerve
- 355.5 Tarsal Tunnel Syndrome
- 355.6 Lesion of plantar nerve
- 355.71 Causalgia of lower limb
- 355.79 Other Mononeuritis of lower limb
- 355.8 Mononeuritis of lower limb, unspecified
- 355.9 Mononeuritis of unspecified site
- 356.0 Hereditary peripheral neuropathy
- 356.1 Peroneal muscular atrophy
- 356.2 Hereditary sensory neuropathy
- 356.3 Refsum’s Disease
- 356.4 Idiopathic progressive polyneuropathy
- 356.8 Other specified idiopathic peripheral neuropathy
- 356.9 Unspecified idiopathic peripheral neuropathy
- 357.0 Acute infective polyneuritis
- 357.1 Polyneuritis in collagen vascular disease
- 357.2 *Polyneuritis in diabetes
- 357.3 *Polyneuritis in malignant disease
- 357.4 *Polyneuritis in other diseases, classified elsewhere
- 357.5 *Alcoholic polyneuritis
- 357.6 *Polyneuritis due to drugs
- 357.7 *Polyneuritis due to other toxic agents
- 357.81 Chronic inflammatory demyelinating polyneuritis
- 357.82 Critical illness polyneuropathy
- 357.89 Other inflammatory and toxic neuropathy
- 357.9 Unspecified inflammatory and toxic neuropathies
- 451.0 *Phlebitis and Thrombophlebitis of superficial vessels of lower extremities
- 451.11 *Phlebitis and Thrombophlebitis of femoral vein (deep) (superficial)
- 451.19 *Phlebitis and Thrombophlebitis of other
- 451.2 *Phlebitis and Thrombophlebitis of lower extremities, unspecified

(*) Indicates these code ranges allow coverage only if the patient is under active care of a doctor of medicine or osteopathy.
Class A Findings:
- Non-traumatic amputation of foot or integral skeletal portion thereof

Class B Findings:
- Absent posterior tibial pulse
- Absent dorsalis pedis pulse
- Advanced trophic changes, such as: (three required)
  - hair growth decreased or absent
  - nail changes (thickening)
  - pigmentary changes (discoloration)
  - skin texture (thin, shiny)
  - skin color (rubor or redness)

Class C Findings:
- Claudication
- Temperature changes (e.g., cold feet)
- Edema
- Paresthesias (abnormal spontaneous sensations in the feet)
- Burning

NATIONAL FOOT CARE MODIFIERS:
Q7 -- One (1) Class A finding
Q8 -- Two (2) Class B findings
Q9 -- One (1) Class B and Two (2) Class C findings

One of the following combinations is necessary to allow payment for routine foot care:

1.  11055, 11056, 11057  
    Primary diagnosis – 700
    Secondary diagnosis – one of the systemic diagnoses

2.  G0127, 11720, 11721  
    Primary diagnosis – 110.1, 703.8, or 703.9
    Secondary diagnosis – one of the systemic diagnoses

3.  11719  
    Primary diagnosis – one of the systemic diagnoses
MYCOTIC NAILS

The treatment of mycotic nails (without a systemic disease) for an ambulatory patient is covered only when the physician treating a patient’s mycotic condition documents in the medical record:

1. there is clinical evidence of mycosis of the toenail
2. the patient has marked limitation of ambulation, pain, or secondary infection resulting from the thickening and dystrophy of the infected toenail plate

Treatment of mycotic nails for a nonambulatory patient is covered only when the physician treating a patient’s mycotic condition documents in the medical record:

1. there is clinical evidence of mycosis of the toenail
2. the patient suffers from pain or secondary infection resulting from the thickening and dystrophy of the infected toenail plate.

Note: Compliance with this policy may be subject to pre and post payment data analysis and medical review.