

PODIATRY SERVICES POLICY

POLICY METADATA

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| 1. Policy Type: Medical | 4. Initial Claim Date of Service |
| 2. Policy Status: Approved | Effective: November 1, 2011 |
| 3. Policy Author: William Deseron | 5. Last Revision: January 1, 2018 |
| | 6. Next Review: January 1, 2020 |

BACKGROUND

The Idaho State Legislature reduced Medicaid coverage of podiatry services in the 2011 House Bill 260. In 2012, the Department promulgated rules that allowed for adults and children to receive care under the podiatry scope of practice for the care of chronic conditions.

ELIGIBILITY

Adults and children are eligible for services if they meet the requirements in Section 541 of the IDAPA 16.03.09. Eligibility will be met if:

- The participant has a chronic disease where the evidence-based guidelines recommend regular foot care. These chronic diseases include:
 - ✓ Diabetes melitus.
 - ✓ Peripheral neuropathy involving the feet.
 - ✓ Chronic thrombophlebitis.
 - ✓ Peripheral vascular disease.
 - ✓ Other chronic conditions that require regular podiatric care for the purpose of preventing recurrent wounds, pressure ulcers, or amputation.
 - ✓ Other foot conditions that have the potential to seriously or irreversibly compromise overall health.
- The participant has an acute foot condition that, if left untreated, may cause an adverse outcome to the participant's health.

COVERED SERVICES

Coverage for podiatry services is limited to:

- Acute and preventive care services defined in chronic care guidelines for the foot, ankle and area from the mid-calf down.
- Treatment of acute conditions that if left untreated will result in chronic damage to the participant's foot, ankle, or the area from the mid-calf down.
- Routine foot care such as cutting, removal, debridement, or other surgical treatment of toenails (i.e., CPT procedure codes 11719, 11720, and 11721) are covered only when the participant has a chronic condition with vascular restrictions such as diabetes or peripheral vascular disease.

INVESTIGATIONAL AND NOT MEDICALLY NECESSARY

Any procedure that is considered to be experimental or investigational is not covered.

POLICY INTENT

As a cost savings measure effective July 2011, the Idaho Legislature limited coverage for podiatric services under Medicaid. Services were defined to ensure quality of treatment and continuity of care.

GLOSSARY

Acute Foot Conditions: An acute foot condition, for the purpose of this provision, means any condition that hinders normal function, threatens the individual's health, or complicates any disease.

Podiatry Service: Podiatry or podiatric medicine is a branch of medicine devoted to the study of diagnosis, medical and surgical treatment of disorders of the foot, ankle, and lower extremity.

CONDITIONS – ALLOW, PEND, OR DENY CLAIMS

Claims for participants with conditions denoting acute or chronic diagnoses on the attached list would **pay** automatically.

Claims that would be **pending** for manual review by a Department RN:

- Claims with a diagnosis that is not on the acute or chronic diagnosis list, but is billed with a KX modifier.
- Claims for an attending podiatrist in an inpatient setting.

Claims that would be automatically **denied** or denied after review by a Department RN:

- Claims for podiatry services for participants with a diagnosis that is not on the attached diagnosis list, and was not billed with a KX modifier.
- Claims billed by a podiatrist that are not classified as podiatry services.
- Claims for routine foot care if the patient does not have a condition listed in the restricted benefit.

REFERENCES

42 CFR 440.60; (a) “Medical care or any other type remedial care provided by licensed practitioners” means any medical or remedial care or services, other than physicians' services, provided by licensed practitioners within the scope of practice as defined under State law; <https://www.gpo.gov/fdsys/granule/CFR-2012-title42-vol4/CFR-2012-title42-vol4-sec440-60>

2011, House Bill 260;

<https://legislature.idaho.gov/sessioninfo/2011/legislation/H0260/>.

IDAPA 16.03.09 – Medicaid Basic Plan Benefits;

<https://adminrules.idaho.gov/rules/current/16/0309.pdf>.

Medicaid Information Release #MA11-12;

<http://healthandwelfare.idaho.gov/Portals/0/Providers/Medicaid/MA11-12.pdf>.

Podiatric Handbook;

<https://www.idmedicaid.com/Provider%20Guidelines/Podiatric%20Medicine%20and%20Surgery%20Services.pdf>.

Section 1905(a)(6) of the Act; medical care, or any other type of remedial care recognized under State law, furnished by licensed practitioners within the scope of their practice as defined by State law; http://www.ssa.gov/OP_Home/ssact/title19/1905.htm.

Section 1937 of the Act; State Flexibility in Benefit Packages;

http://www.ssa.gov/OP_Home/ssact/title19/1937.htm.

State Plan for Basic and Enhanced Alternative Benefit Plans; under the section “Other 1937” benefits;

<http://www.healthandwelfare.idaho.gov/Medical/Medicaid/tabid/123/Default.aspx>.

RESTRICTED BENEFIT DIAGNOSES FOR ROUTINE FOOT CARE

The following **ICD-10-CM** diagnosis codes have been identified as covered chronic conditions with vascular restrictions for dates of service on or after October 1, 2015. Unspecified diagnosis codes are not covered.

A52.15	E08.00 – E13.9	G13.0 – G13.1	G57.00 – G57.93	G58.8 – G65.2	I70.211 – I70.92
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CONDITIONS THAT ALLOW AUTOMATIC PAYMENT OF CLAIMS

The following **ICD-10-CM** diagnosis codes have been identified by the Department as indicating a covered acute or chronic condition for dates of service on or after October 1, 2015.

A30.0 – A30.8	Leprosy [Hansen's disease]
A50.41 – A50.49	Late congenital neurosyphilis [juvenile neurosyphilis]
A52.11 – A52.2	Symptomatic and asymptomatic neurosyphilis
B07.0 – B07.9	Viral warts
B08.4	Enteroviral vesicular stomatitis with exanthem
B08.8	Other specified viral infections characterized by skin and mucous membrane lesions
B35.1	Tinea unguium
B35.3	Tinea pedis
B37.2	Candidiasis of skin and nail
B47.0 – B47.1	Mycetoma
B78.1	Cutaneous strongyloidiasis
C4A.71 – C4A.72	Merkel cell carcinoma of lower limb, including hip
C44.712 – C44.799	Other malignant neoplasm of skin (Unspecified diagnosis codes are not covered)
D04.71 – D04.72	Carcinoma in situ of skin of lower limb, including hip
D18.01	Hemangioma of skin and subcutaneous tissue
D21.20 – D21.22	Benign neoplasm of connective and other soft tissue of lower limb, including hip
D23.71 – D23.72	Other benign neoplasm of skin of lower limb, including hip
D48.5	Neoplasm of uncertain behavior of skin
D51.0	Vitamin B12 deficiency anemia due to intrinsic factor deficiency
D86.3	Sarcoidosis of skin
E08.00 – E08.9	Diabetes mellitus (Unspecified diagnosis codes are not covered)
E09.00 – E09.9	Drug or chemical induced diabetes mellitus (Unspecified diagnosis codes are not covered)
E10 – E10.9	Type 1 diabetes mellitus (Unspecified diagnosis codes are not covered)
E11 – E11.9	Type 2 diabetes mellitus (Unspecified diagnosis codes are not covered)
E13 – E13.9	Other specified diabetes mellitus (Unspecified diagnosis codes are not covered)
E52	Niacin deficiency [pellagra]

E53.1	Pyridoxine deficiency
E75.01 – E75.09	GM2 gangliosidosis
E75.21 – E75.23	Other sphingolipidosis
E75.25 – E75.29	Metachromatic leukodystrophy and other sphingolipidosis
E83.2	Disorders of zinc metabolism
E85.1	Neuropathic hereditary amyloidosis
G13.0 – G13.1	Systemic atrophies primarily affecting central nervous system in diseases classified elsewhere
G32.0 – G32.89	Other degenerative disorders of nervous system in diseases classified elsewhere
G57.01 – G57.93	Mononeuropathies (Unspecified diagnosis codes are not covered)
G58.0 – G58.9	Other mononeuropathies
G59.0	Mononeuropathy in diseases classified elsewhere
G60.0 – G60.9	Hereditary and idiopathic neuropathy
G61.0 – G61.8	Inflammatory polyneuropathy
G62.0 – G62.89	Other polyneuropathies
G63	Polyneuropathy in diseases classified elsewhere
G64	Other disorders of peripheral nervous system
G65.0 – G65.2	Sequelae of inflammatory and toxic polyneuropathies
G99.0	Autonomic neuropathy in diseases classified elsewhere
I70.211 – I70.213	Atherosclerosis of native arteries of extremities with intermittent claudication
I70.221 – I70.223	Atherosclerosis of native arteries of extremities with rest pain
I70.232 – I70.238	Atherosclerosis of native arteries of right leg with ulceration
I70.242 – I70.248	Atherosclerosis of native arteries of left leg with ulceration
I70.261 – I70.263	Atherosclerosis of native arteries of extremities with gangrene
I70.291 – I70.293	Other atherosclerosis of native arteries of extremities
I70.411 – I70.413	Atherosclerosis of autologous vein bypass graft(s) of the extremities with intermittent claudication
I70.421 – I70.423	Atherosclerosis of autologous vein bypass graft(s) of the extremities with rest pain
I70.432 – I70.438	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration
I70.442 – I70.448	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration
I70.461 – I70.463	Atherosclerosis of autologous vein bypass graft(s) of the extremities with gangrene
I70.491 – I70.493	Other atherosclerosis of autologous vein bypass graft(s) of the extremities
I70.511 – I70.513	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities intermittent claudication
I70.521 – I70.523	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with rest pain
I70.532 – I70.538	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration
I70.542 – I70.548	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration
I70.561 – I70.563	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with gangrene

I70.591 – I70.593	Other atherosclerosis of nonautologous biological bypass graft(s) of the extremities
I70.611 – I70.613	Atherosclerosis of nonbiological bypass graft(s) of the extremities with intermittent claudication
I70.621 – I70.623	Atherosclerosis of nonbiological bypass graft(s) of the extremities with rest pain
I70.632 – I70.638	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration
I70.642 – I70.648	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration
I70.661 – I70.663	Atherosclerosis of nonbiological bypass graft(s) of the extremities with gangrene
I70.691 – I70.693	Other atherosclerosis of nonbiological bypass graft(s) of the extremities
I70.711 – I70.713	Atherosclerosis of other type of bypass graft(s) of the extremities with intermittent claudication
I70.721 – I70.723	Atherosclerosis of other type of bypass graft(s) of the extremities with rest pain
I70.732 – I70.738	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration
I70.742 – I70.748	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration
I70.761 – I70.763	Atherosclerosis of other type of bypass graft(s) of the extremities with gangrene
I70.791 – I70.793	Other atherosclerosis of other type of bypass graft(s) of the extremities
I70.92	Chronic total occlusion of artery of the extremities
I73.00-I73.89	Other peripheral vascular diseases
I78.1	Nevus, non-neoplastic
I79.1	Aortitis in diseases classified elsewhere
I79.8	Other disorders of arteries, arterioles and capillaries in diseases classified elsewhere
I80.01 – I80.93	Phlebitis and thrombophlebitis of lower extremity (Unspecified diagnosis codes are not covered)
I83.011 – I83.028	Varicose veins of lower extremity with ulcer (Unspecified diagnosis codes are not covered)
I83.11 – I83.12	Varicose veins of lower extremity with inflammation
I83.212 – I83.218	Varicose veins of right lower extremity with both ulcer and inflammation
I83.222 – I83.228	Varicose veins of left lower extremity with both ulcer and inflammation
I87.811 – I87.813	Varicose veins of lower extremities with pain
I87.891 – I87.893	Varicose veins of lower extremities with other complications
I87.2	Venous insufficiency (chronic) (peripheral)
I87.00 – I87.8	Other disorders of veins (Unspecified diagnosis codes are not covered)
I96	Gangrene, not elsewhere classified
K90.0 – K90.1	Intestinal malabsorption
L02.415 – L02.416	Cutaneous abscess of lower limb
L02.425 – L02.426	Furuncle of lower limb
L02.435 – L02.436	Carbuncle of lower limb
L02.611 – L02.632	Cutaneous abscess, furuncle and carbuncle of foot (Unspecified diagnosis codes are not covered)
L03.031 – L03.042	Cellulitis and acute lymphangitis (Unspecified diagnosis codes are not covered)
L03.115 – L03.116	Cellulitis of other parts of limb
L03.125 – L03.126	Acute lymphangitis of other parts of limb

L08.0 – L08.89	Other local infections of skin and subcutaneous tissue
L11.0	Acquired keratosis follicularis
L12.0 – L12.2	Pemphigoid
L12.31 – L12.35	Acquired epidermolysis bullosa
L12.8	Other pemphigoid
L26	Exfoliative dermatitis
L27.0 – L27.8	Dermatitis due to substances taken internally
L28.0 – L28.1	Lichen simplex chronicus and prurigo
L30.0 – L30.8	Other dermatitis
L43.0 – L43.8	Lichen planus
L54	Erythema in diseases classified elsewhere
L56.5	Disseminated superficial actinic porokeratosis (DSAP)
L59.8	Other specified disorders of the skin and subcutaneous tissue related to radiation
L60.0 – L60.8	Nail disorders
L62	Nail disorders in diseases classified elsewhere
L72.0	Epidermal cyst
L72.11 – L72.8	Follicular cysts of skin and subcutaneous tissue
L74.513	Primary focal hyperhidrosis, soles
L84	Corns and callosities
L85.0 – L85.8	Other epidermal thickening
L86	Keratoderma in diseases classified elsewhere
L87.0 – L87.8	Transepidermal elimination disorders
L88	Pyoderma gangrenosum
L89.510 – L89.624	Pressure ulcer of ankle or heel (Unspecified diagnosis codes are not covered)
L89.890 – L89.894	Pressure ulcer of other site
L90.5	Scar conditions and fibrosis of skin
L90.8	Atrophic disorder of skin, other
L91.8	Hypertrophic disorder of the skin, other
L92.0	Granuloma annulare
L92.1	Necrobiosis lipoidica, not elsewhere classified
L92.8	Granulomatous disorders of the skin and subcutaneous tissue, other
L94.8	Localized connective tissue disorders, other
L95.1	Erythema elevatum diutinum
L97.211 – L97.228	Non-pressure chronic ulcer of calf (Unspecified diagnosis codes are not covered)
L97.311 – L97.328	Non-pressure chronic ulcer of ankle (Unspecified diagnosis codes are not covered)
L97.411 – L97.428	Non-pressure chronic ulcer of heel and midfoot (Unspecified diagnosis codes are not covered)

L97.511 – L97.528	Non-pressure chronic ulcer of other part of the foot (Unspecified diagnosis codes are not covered)
L97.811 – L97.828	Non-pressure chronic ulcer of lower leg (Unspecified diagnosis codes are not covered)
L98.0	Pyogenic granuloma
L98.2	Febrile neutrophilic dermatosis [Sweet]
L98.3	Eosinophilic cellulitis [Wells]
L98.8	Other specified disorders of the skin and subcutaneous tissue
M05.071 – M05.072	Felty's syndrome, ankle and foot
M05.171 – M05.172	Rheumatoid lung disease with rheumatoid arthritis of ankle and foot
M05.271 – M05.272	Rheumatoid vasculitis with rheumatoid arthritis of ankle and foot
M05.371 – M05.372	Rheumatoid heart disease with rheumatoid arthritis of ankle and foot
M05.471 – M05.472	Rheumatoid myopathy with rheumatoid arthritis of ankle, foot
M05.571 – M05.572	Rheumatoid polyneuropathy with rheumatoid arthritis of ankle and foot
M05.671 – M05.672	Rheumatoid arthritis of ankle and foot with involvement of other organs and systems
M05.771 – M05.772	Rheumatoid arthritis with rheumatoid factor of ankle and foot without organ or systems involvement
M05.871 – M05.872	Other rheumatoid arthritis with rheumatoid factor of ankle and foot
M06.071 – M06.072	Rheumatoid arthritis without rheumatoid factor, ankle and foot
M06.271 – M06.272	Rheumatoid bursitis, ankle and foot
M06.371 – M06.372	Rheumatoid nodule, ankle and foot Rheumatoid nodule, ankle and foot
M06.871 – M06.872	Other specified rheumatoid arthritis, ankle and foot
M08.271 – M08.272	Juvenile rheumatoid arthritis with systemic onset, ankle and foot
M08.471 – M08.472	Pauciarticular juvenile rheumatoid arthritis, ankle and foot
M08.871 – M08.872	Other juvenile arthritis, ankle and foot
M1A.710 – M1A.721	Idiopathic chronic gout, ankle and foot
M1A.1710 – M1A.1721	Lead-induced chronic gout, ankle and foot
M1A.2710 – M1A.2721	Drug-induced chronic gout, ankle and foot
M1A.3710 – M1A.3721	Chronic gout due to renal impairment, ankle and foot
M1A.4710 – M1A.4721	Other secondary chronic gout, ankle and foot
M10.071 – M10.072	Idiopathic gout, ankle and foot
M10.171 – M10.172	Lead-induced gout, ankle and foot
M10.271 – M10.272	Drug-induced gout, ankle and foot
M10.371 – M10.372	Gout due to renal impairment, ankle and foot
M10.471 – M10.472	Other secondary gout, ankle and foot
M12.071 – M12.072	Chronic postrheumatic arthropathy [Jaccoud], ankle and foot
M12.171 – M12.172	Kaschin-Beck disease, ankle and foot
M12.271 – M12.272	Villonodular synovitis (pigmented), ankle and foot
M12.371 – M12.372	Palindromic rheumatism, ankle and foot
M12.471 – M12.472	Intermittent hydrarthrosis, ankle and foot

M12.571 – M12.572	Traumatic arthropathy, ankle and foot
M12.871 – M12.872	Other specific arthropathies, not elsewhere classified, ankle and foot
M14.671 – M14.672	Charcot's joint, ankle and foot
M19.071 – M19.072	Primary osteoarthritis ankle and foot
M19.171 – M19.172	Post-traumatic osteoarthritis, ankle and foot
M19.271 – M19.272	Secondary osteoarthritis, ankle and foot
M20.11 – M20.5X2	Acquired deformities of toes (Unspecified diagnosis codes are not covered)
M21.071 – M21.072	Valgus deformity, not elsewhere classified, ankle
M21.171 – M21.172	Varus deformity, not elsewhere classified, ankle
M21.371 – M21.372	Acquired Foot drop
M21.531 – M21.6X2	Acquired clawfoot or clubfoot, Bunion , Bunionette or other acquired deformities of the foot (Unspecified diagnosis codes are not covered)
M24.071 – M24.075	Loose body in ankle and toe joints (Unspecified diagnosis codes are not covered)
M24.171 – M24.175	Other articular cartilage disorders, ankle and foot (Unspecified diagnosis codes are not covered)
M24.271 – M24.275	Disorder of ligament, ankle and foot (Unspecified diagnosis codes are not covered)
M24.371 – M24.375	Pathological dislocation of ankle and foot, not elsewhere classified (Unspecified diagnosis codes are not covered)
M24.471 – M24.478	Recurrent dislocation, ankle, foot and toes (Unspecified diagnosis codes are not covered)
M24.571 – M24.575	Contracture, ankle and foot (Unspecified diagnosis codes are not covered)
M24.671 – M24.675	Ankylosis, ankle and foot (Unspecified diagnosis codes are not covered)
M24.871 – M24.875	Other specific joint derangements of ankle and foot, not elsewhere classified (Unspecified diagnosis codes are not covered)
M25.271 – M25.272	Flail joint, ankle and foot (Unspecified diagnosis codes are not covered)
M25.371 – M25.375	Other instability, ankle and foot (Unspecified diagnosis codes are not covered)
M25.471 – M25.475	Effusion, ankle and foot (Unspecified diagnosis codes are not covered)
M25.571 – M25.572	Pain in ankle and joints of foot
M25.671 – M25.675	Stiffness of ankle and foot, not elsewhere classified (Unspecified diagnosis codes are not covered)
M25.771 – M25.775	Osteophyte, ankle and foot (Unspecified diagnosis codes are not covered)
M25.87 – M25.872	Other specified joint disorders, ankle and foot
M34.0 – M34.89	Systemic sclerosis [scleroderma]
M63.871 – M63.872	Disorders of muscle in diseases classified elsewhere, ankle and foot
M65.061 – M65.072	Abscess of tendon sheath, lower leg, ankle or foot
M65.171 – M65.172	Other infective (teno)synovitis, ankle and foot
M65.261 – M65.272	Calcific tendinitis, lower leg, ankle and foot (Unspecified diagnosis codes are not covered)
M65.861 – M65.872	Other synovitis and tenosynovitis, lower leg, ankle and foot (Unspecified diagnosis codes are not covered)
M66.271 – M66.272	Spontaneous rupture of extensor tendons, ankle and foot
M66.361 – M66.372	Spontaneous rupture of flexor tendons, lower leg, ankle or foot (Unspecified diagnosis codes are

	not covered)
M66.861 – M66.872	Spontaneous rupture of other tendons, lower leg, ankle or foot (Unspecified diagnosis codes are not covered)
M67.01 – M67.02	Short Achilles tendon (acquired)
M67.261 – M67.272	Synovial hypertrophy, not elsewhere classified, lower leg, ankle or foot (Unspecified diagnosis codes are not covered)
M67.371 – M67.372	Transient synovitis, ankle and foot
M67.471 – M67.472	Ganglion, ankle and foot
M67.871 – M67.874	Other specified disorders of synovium and tendon, ankle and foot
M71.071 – M71.072	Abscess of bursa, ankle and foot
M71.171 – M71.172	Other infective bursitis, ankle and foot
M71.371 – M71.372	Other bursal cyst, ankle and foot
M71.471 – M71.472	Calcium deposit in bursa, ankle and foot
M71.571 – M71.572	Other bursitis, not elsewhere classified, ankle and foot
M71.871 – M71.872	Other specified bursopathies, ankle and foot
M72.2	Plantar fascial fibromatosis
M76.61 – M76.899	Achilles , peroneal, posterior tibial tendinitis, and other enthesopathies of the lower limb (Unspecified diagnosis codes are not covered)
M77.31 – M77.8	Calcaneal spur, metatarsalgia and Other enthesopathy of foot (Unspecified diagnosis codes are not covered)
M79.5	Residual foreign body in soft tissue
M79.661 – M79.675	Pain in lower leg, foot or toes (Unspecified diagnosis codes are not covered)
M80.061A – M80.062S	Age-related osteoporosis with current pathological fracture, lower leg
M80.071A – M80.072S	Age-related osteoporosis with current pathological fracture ankle and foot
M80.861A – M80.862S	Other osteoporosis with current pathological fracture, lower leg
M80.871A – M80.872S	Other osteoporosis with current pathological fracture, ankle and foot
M84.361A – M84.364S	Stress fracture, tibia or fibula
M84.371A – M84.372S	Stress fracture, ankle
M84.374A – M84.375S	Stress fracture, foot
M84.377A – M84.378S	Stress fracture, toes
M84.461A – M84.464S	Pathological fracture, tibia or fibula
M84.471A – M84.472S	Pathological fracture, ankle
M84.474A – M84.475S	Pathological fracture, foot
M84.477A – M84.478S	Pathological fracture, toes
M84.561A – M84.564S	Pathological fracture in neoplastic disease, tibia or fibula
M84.571A – M84.572S	Pathological fracture in neoplastic disease, ankle
M84.574A – M84.575S	Pathological fracture in neoplastic disease, foot
M84.661A – M84.664S	Pathological fracture in other disease, tibia or fibula

M84.671A – M84.672S	Pathological fracture in other disease, ankle
M84.674A – M84.675S	Pathological fracture in other disease, foot
M84.861 – M84.864	Other disorders of continuity of bone, tibia or fibula
M84.871 – M84.872	Other disorders of continuity of bone, ankle and foot
M85.061 – M85.072	Fibrous dysplasia (monostotic), lower leg, ankle or foot (Unspecified diagnosis codes are not covered)
M85.161 – M85.172	Skeletal fluorosis, lower leg, ankle or foot (Unspecified diagnosis codes are not covered)
M85.461 – M85.472	Solitary bone cyst, tibia, fibula or ankle and foot (Unspecified diagnosis codes are not covered)
M85.561 – M85.572	Aneurysmal bone cyst, lower leg, ankle or foot (Unspecified diagnosis codes are not covered)
M85.661 – M85.672	Other cyst of bone, leg or ankle and foot (Unspecified diagnosis codes are not covered)
M85.861 – M85.872	Other specified disorders of bone density and structure, lower leg or ankle and foot (Unspecified diagnosis codes are not covered)
M86.061 – M86.072	Acute hematogenous osteomyelitis, tibia and fibula, ankle and foot (Unspecified diagnosis codes are not covered)
M86.161 – M86.172	Other acute osteomyelitis, tibia and fibula, ankle and foot (Unspecified diagnosis codes are not covered)
M86.261 – M86.272	Subacute osteomyelitis, tibia and fibula, ankle and foot (Unspecified diagnosis codes are not covered)
M86.361 – M86.372	Chronic multifocal osteomyelitis, tibia and fibula, ankle and foot (Unspecified diagnosis codes are not covered)
M86.461 – M86.472	Chronic osteomyelitis with draining sinus, tibia and fibula, ankle and foot (Unspecified diagnosis codes are not covered)
M86.561 – M86.572	Other chronic hematogenous osteomyelitis, tibia and fibula, ankle and foot (Unspecified diagnosis codes are not covered)
M86.661 – M86.672	Other chronic osteomyelitis, tibia and fibula, ankle and foot (Unspecified diagnosis codes are not covered)
M86.8X6 – M86.8X7	Other osteomyelitis, lower leg, or ankle and foot
M89.160 – M89.168	Physeal arrest, lower leg
M89.261 – M89.272	Other disorders of bone development and growth, tibia or fibula, ankle and foot (Unspecified diagnosis codes are not covered)
M89.361 – M89.372	Hypertrophy of bone, tibia or fibula, ankle and foot (Unspecified diagnosis codes are not covered)
M89.461 – M89.472	Other hypertrophic osteoarthropathy, lower leg, ankle and foot (Unspecified diagnosis codes are not covered)
M89.561 – M89.572	Osteolysis, lower leg, ankle and foot (Unspecified diagnosis codes are not covered)
M89.661 – M89.672	Osteopathy after poliomyelitis, lower leg, ankle and foot (Unspecified diagnosis codes are not covered)
M89.761 – M89.772	Major osseous defect, lower leg, ankle and foot (Unspecified diagnosis codes are not covered)
M89.8X6 – M89.8X7	Other specified disorders of bone, lower leg, or ankle and foot
M92.51 – M92.8	Juvenile osteochondrosis (Unspecified diagnosis codes are not covered)
M93.271 – M93.272	Osteochondritis dissecans of ankle and joints of foot

M93.861 – M93.872	Other specified osteochondropathies lower leg, ankle and foot (Unspecified diagnosis codes are not covered)
M94.271 – M94.272	Chondromalacia, ankle and joints of foot
M94.8X6 – M94.8X7	Other specified disorders of cartilage, lower leg, or ankle and foot
N18.1 – N18.6	Chronic kidney disease (CKD)
N25.1	Nephrogenic diabetes insipidus
Q66.0 – Q66.4	Congenital deformities of feet
Q66.6 – Q66.89	Other congenital deformities of feet (Unspecified diagnosis codes are not covered)
Q72.21 – Q72.23	Congenital absence of both lower leg and foot
Q72.31 – Q72.33	Congenital absence of foot and toe(s)
Q72.51 – Q72.73	Longitudinal reduction defect of tibia or fibula, Split foot (Unspecified diagnosis codes are not covered)
Q81.0 – Q81.8	Epidermolysis bullosa
Q82.8	Other specified congenital malformations of skin
R20.0 – R20.8	Disturbances of skin sensation
R22.41 – R22.43	Localized swelling, mass and lump, lower limb
R60.0 – R60.1	Edema, not elsewhere classified
S81.811A – S81.852S	Open wound of lower leg (Unspecified diagnosis codes are not covered)
S82.221A – S82.292S	Fracture of lower leg, including ankle (Unspecified diagnosis codes are not covered)
S82.311A – S82.312S	Torus fracture of lower end of tibia
S82.391A – S82.392S	Other fracture of lower end of tibia
S82.421A – S82.65XS	Fracture of lower leg, including ankle (Unspecified diagnosis codes are not covered)
S82.821A – S82.892S	Fracture of lower leg, including ankle (Unspecified diagnosis codes are not covered)
S84.01XA – S84.802S	Injury of nerves at lower leg level (Unspecified diagnosis codes are not covered)
S85.141A – S85.492S	Injury of blood vessels at lower leg level (Unspecified diagnosis codes are not covered)
S85.811A – S85.892S	Injury of blood vessels at lower leg level (Unspecified diagnosis codes are not covered)
S86.021A – S86.092S	Injury of Achilles tendon (Unspecified diagnosis codes are not covered)
S86.121A – S86.192S	Injury of other muscle(s) and tendon(s) of posterior muscle group at lower leg level (Unspecified diagnosis codes are not covered)
S86.221A – S86.292S	Injury of muscle(s) and tendon(s) of anterior muscle group at lower leg level (Unspecified diagnosis codes are not covered)
S86.321A – S86.392S	Injury of muscle(s) and tendon(s) of peroneal muscle group at lower leg level (Unspecified diagnosis codes are not covered)
S86.821A – S86.892S	Injury of other muscle(s) and tendon(s) at lower leg level (Unspecified diagnosis codes are not covered)
S87.81XA – S87.82XS	Crushing injury of lower leg
S89.111A – S89.192S	Salter-Harris Type or other physal fracture of lower end of tibia (Unspecified diagnosis codes are not covered)

S89.311A – S89.392S	Salter-Harris Type and other physeal fracture of lower end of fibula
S89.81XA – S89.82XS	Other specified injuries of lower leg
S90.01XA – S90.872S	Superficial injury of ankle, foot and toes (Unspecified diagnosis codes are not covered)
S91.011A – S91.352S	Open wound of ankle, foot and toes (Unspecified diagnosis codes are not covered)
S92.011A – S92.812S	Fracture of foot and toe, except ankle (Unspecified diagnosis codes are not covered)
S93.04XA – S93.05XS	Dislocation of ankle joint
S93.111A – S93.125S	Dislocation of interphalangeal or metatarsophalangeal joint of toe(s) (Unspecified diagnosis codes are not covered)
S93.314A – S93.315S	Dislocation of tarsal joint of foot
S93.324A – S93.325S	Dislocation of tarsometatarsal joint of foot
S93.334A – S93.335S	Other dislocation of foot
S96.021A – S96.022S	Laceration of muscle and tendon of long flexor muscle of toe at ankle and foot level, foot
S96.091A – S96.092S	Other injury of muscle and tendon of long flexor muscle of toe at ankle and foot level, foot
S96.121A – S96.122S	Laceration of muscle and tendon of long extensor muscle of toe at ankle and foot level, foot
S96.191A – S96.192S	Other specified injury of muscle and tendon of long extensor muscle of toe at ankle and foot level, foot
S96.221A – S96.222S	Laceration of intrinsic muscle and tendon at ankle and foot level, foot
S96.291A – S96.292S	Other specified injury of intrinsic muscle and tendon at ankle and foot level, foot
S96.821A – S96.822S	Laceration of other specified muscles and tendons at ankle and foot level, foot
S96.891A – S96.892S	Other specified injury of other specified muscles and tendons at ankle and foot level, foot
S97.01XA – S97.02XS	Crushing injury of ankle
S97.111A – S97.112S	Crushing injury of great toe
S97.121A – S97.122S	Crushing injury of lesser toe(s)
S97.81XA – S97.82XS	Crushing injury of foot
S98.011A – S98.322S	Traumatic amputation of ankle and foot (Unspecified diagnosis codes are not covered)
S99.011A – S99.092S	Salter-Harris Type or other physeal fracture of calcaneus (Unspecified diagnosis codes are not covered)
S99.111A – S99.192S	Salter-Harris Type or other physeal fracture of metatarsal (Unspecified diagnosis codes are not covered)
S99.211A – S99.292S	Salter-Harris Type or other physeal fracture of phalanx of toe (Unspecified diagnosis codes are not covered)
S99.811A – S99.812S	Other specified injuries of ankle
S99.821A – S99.822S	Other specified injuries of foot
T25.111A – T25.392S	Burn of ankle and foot (Unspecified diagnosis codes are not covered)
T25.511A – T25.792S	Corrosion of ankle and foot (Unspecified diagnosis codes are not covered)
T33.811A – T33.832S	Superficial frostbite of ankle and foot (Unspecified diagnosis codes are not covered)
T34.811A – T34.832S	Frostbite with tissue necrosis of ankle and foot (Unspecified diagnosis codes are not covered)
T69.021A – T69.022S	Immersion foot

T69.1XXA – T69.1XXS	Chilblains
T81.31XA – T81.4XXS	Disruption or infection of operation (surgical) wound, not elsewhere classified (Unspecified diagnosis codes are not covered)
T81.718A – T81.718S	Complication of other artery following a procedure, not elsewhere classified
T81.72XA – T81.72XS	Complication of vein following a procedure, not elsewhere classified
T81.89XA – T81.89XS	Other complications of procedures, not elsewhere classified
T84.018A – T84.018S	Broken internal joint prosthesis, other site
T84.028A – T84.028S	Dislocation of other internal joint prosthesis
T84.038A – T84.038S	Mechanical loosening of other internal prosthetic joint
T84.058A – T84.058S	Periprosthetic osteolysis of other internal prosthetic joint
T84.068A – T84.068S	Wear of articular bearing surface of other internal prosthetic joint
T84.098A – T84.098S	Other mechanical complication of other internal joint prosthesis
T84.116A – T84.117S	Breakdown (mechanical) of internal fixation device of bone of lower leg
T84.126A – T84.127S	Displacement of internal fixation device of bone of lower leg
T84.196A – T84.197S	Other mechanical complication of internal fixation device of bone of lower leg
T84.213A – T84.213S	Breakdown (mechanical) of internal fixation device of bones of foot and toes
T84.223A – T84.223S	Displacement of internal fixation device of bones of foot and toes
T84.293A – T84.293S	Other mechanical complication of internal fixation device of bones of foot and toes
T84.310A – T84.310S	Breakdown (mechanical) of electronic bone stimulator
T84.318A – T84.318S	Breakdown (mechanical) of other bone devices, implants and grafts
T84.320A – T84.320S	Displacement of electronic bone stimulator
T84.328A – T84.328S	Displacement of other bone devices, implants and grafts
T84.390A – T84.390S	Other mechanical complication of electronic bone stimulator
T84.398A – T84.398S	Other mechanical complication of other bone devices, implants and grafts
T84.410A – T84.410S	Breakdown (mechanical) of muscle and tendon graft
T84.418A – T84.418S	Breakdown (mechanical) of other internal orthopedic devices, implants and grafts
T84.420A – T84.420S	Displacement of muscle and tendon graft
T84.428A – T84.428S	Displacement of other internal orthopedic devices, implants and grafts
T84.490A – T84.490S	Other mechanical complication of muscle and tendon graft
T84.498A – T84.498S	Other mechanical complication of other internal orthopedic devices, implants and grafts
T84.622A – T84.625S	Infection and inflammatory reaction due to internal fixation device of tibia or fibula
T84.69XA – T84.69XS	Infection and inflammatory reaction due to internal fixation device of other site
T84.7XXA – T84.7XXS	Infection and inflammatory reaction due to other internal orthopedic prosthetic devices, implants and grafts
T84.86XA – T84.86XS	Thrombosis due to internal orthopedic prosthetic devices, implants and grafts
T87.1X1 – T87.1X2	Complications of reattached (part of) lower extremity
T87.33 – T87.34	Neuroma of amputation stump, lower extremity

T87.43 – T87.44	Infection of amputation stump, lower extremity
T87.53 – T87.54	Necrosis of amputation stump, lower extremity
T87.81	Dehiscence of amputation stump
T87.89	Other complications of amputation stump
Z47.2	Encounter for removal of internal fixation device
Z48.00 – Z48.1	Encounter for attention to dressings, sutures and drains
Z48.3	Aftercare following surgery for neoplasm
Z48.89	Encounter for other specified surgical aftercare
Z51.89	Encounter for other specified aftercare
Z89.411 – Z89.442	Acquired absence of toe, foot or ankle (Unspecified diagnosis codes are not covered)