

# Local Coverage Article: Billing and Coding: Anorectal Manometry, Anal Electromyography, and Biofeedback Training for Perineal Muscles and Anorectal or Urethral Sphincters (A56530)

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## Contractor Information

CONTRACTOR NAME	CONTRACT TYPE	CONTRACT NUMBER	JURISDICTION	STATE(S)
Novitas Solutions, Inc.	A and B MAC	04111 - MAC A	J - H	Colorado
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

CONTRACTOR NAME	CONTRACT TYPE	CONTRACT NUMBER	JURISDICTION	STATE(S)
Novitas Solutions, Inc.	A and B MAC	12502 - MAC B	J - L	Pennsylvania
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**

A56530

**Original Effective Date**

05/16/2019

**Article Title**

Billing and Coding: Anorectal Manometry, Anal Electromyography, and Biofeedback Training for Perineal Muscles and Anorectal or Urethral Sphincters

**Revision Effective Date**

01/01/2020

**Revision Ending Date**

N/A

**Article Type**

Billing and Coding

**Retirement Date**

N/A

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## **CMS National Coverage Policy**

Please refer to the Local Coverage Determination (LCD), L34977, Anorectal Manometry, Anal Electromyography, and Biofeedback Training for Perineal Muscles and Anorectal or Urethral Sphincters.

## **Article Guidance**

### **Article Text:**

Refer to the Novitas Local Coverage Determination (LCD) L34977, Anorectal Manometry, Anal Electromyography, and Biofeedback Training for Perineal Muscles and Anorectal or Urethral Sphincters, 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 91122 or 51784/51785 should be billed during the initial diagnostic evaluation only when the cause of the fecal incontinence or urinary incontinence cannot be determined from the physicians' evaluation and that the physician has determined that diagnostic testing is needed to make a diagnosis.

CPT code 91122 should not be billed when the physician is trying to evaluate urinary incontinence.

Consistent with the direction in the Utilization Guidelines of L34977, CPT codes 51784, 51785 and 91122 should not be reported more than once per year. CPT codes 90901, 90912 and 90913 may be reported up to 4 times per year.

# Coding Information

## CPT/HCPCS Codes

### Group 1 Paragraph:

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

### Group 1 Codes:

CODE	DESCRIPTION
51784	Anal/urinary muscle study
51785	Anal/urinary muscle study
90901	Biofeedback train any meth
90912	Bfb training 1st 15 min
90913	Bfb training ea addl 15 min
91117	Colon motility 6 hr study
91122	Anal pressure record

## 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.

Medicare is establishing the following limited coverage for **CPT codes 51784, 51785, 90901, 90912, 90913, 91117, and 91122:**

### Group 1 Codes:

ICD-10 CODE	DESCRIPTION
G83.4	Cauda equina syndrome
K59.00	Constipation, unspecified
K59.01	Slow transit constipation
K59.02	Outlet dysfunction constipation
K59.04	Chronic idiopathic constipation

ICD-10 CODE	DESCRIPTION
K59.09	Other constipation
K59.4	Anal spasm
N31.2	Flaccid neuropathic bladder, not elsewhere classified
N31.9	Neuromuscular dysfunction of bladder, unspecified
N36.42	Intrinsic sphincter deficiency (ISD)
N36.43	Combined hypermobility of urethra and intrinsic sphincter deficiency
N36.44	Muscular disorders of urethra
N39.3	Stress incontinence (female) (male)
N39.41	Urge incontinence
N39.42	Incontinence without sensory awareness
N39.43	Post-void dribbling
N39.44	Nocturnal enuresis
N39.45	Continuous leakage
N39.46	Mixed incontinence
R15.0	Incomplete defecation
R15.1	Fecal smearing
R15.2	Fecal urgency
R15.9	Full incontinence of feces
R33.0	Drug induced retention of urine
R33.8	Other retention of urine
R33.9	Retention of urine, unspecified
R35.0	Frequency of micturition
R39.14	Feeling of incomplete bladder emptying
R39.15	Urgency of urination
R39.191	Need to immediately re-void

### 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:

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 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
999x	Not Applicable

### Revenue Codes:

Contractors may specify Revenue Codes to help providers identify those Revenue Codes typically used to report this service. In most instances Revenue Codes are purely advisory. Unless specified in the policy, services reported under other Revenue Codes are equally subject to this coverage determination. Complete absence of all Revenue Codes indicates that coverage is not influenced by Revenue Code and the policy should be assumed to apply equally to all Revenue Codes.

CODE	DESCRIPTION
99999	Not Applicable

### 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 updates. The following CPT/HCPCS code(s) have been added to the Group 1 Codes and the Group 1 Paragraph: 90912 and 90913. The following CPT/HCPCS code(s) have been deleted from the Group 1 Codes and the Group 1 Paragraph: 90911. The following CPT/HCPCS code(s) have either a short description and/or long description change. Depending on which description is used in this article, there may not be any change in how the code displays in the document: 91117.
11/14/2019	R1	Article revised and published on 11/14/2019. System changes have been made to our

REVISION HISTORY DATE	REVISION HISTORY NUMBER	REVISION HISTORY EXPLANATION
		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.

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## Associated Documents

### Related Local Coverage Document(s)

LCD(s)

L34977 - Anorectal Manometry, Anal Electromyography, and Biofeedback Training for Perineal Muscles and Anorectal or Urethral Sphincters

### Related National Coverage Document(s)

NCD(s)

30.1 - Biofeedback Therapy

30.1.1 - Biofeedback Therapy for the Treatment of Urinary Incontinence

### 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.

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## Keywords

N/A