FIRST COAST SERVICE OPTIONS
MAC - PART A/B
LOCAL COVERAGE DETERMINATION

LCD Database ID Number
L36356

Contractor Name
First Coast Service Options, Inc.

Contractor Number
09101 - Florida
09201 – PR/USVI
09102 – Florida
09202 – Puerto Rico
09302 – Virgin Islands

Contractor Type
MAC – Part A/ B

LCD Title
Bone mineral density studies

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CMS National Coverage Policy
Language quoted from CMS National Coverage Determination (NCDs) and coverage provisions in interpretive manuals are italicized throughout the Local Coverage Determination (LCD). NCDs and coverage provisions in interpretive manuals are not subject to the LCD Review Process (42 CFR 405.860[b] and 42 CFR 426 [Subpart D]). In addition, an administrative law judge may not review an NCD. See §1869(f)(1)(A)(i) of the Social Security Act.

Unless otherwise specified, italicized text represents quotation from one or more of the following CMS sources:

CMS Manual System, Medicare Claims Processing Manual, Pub 100-04, Chapter 13, Section 140
CMS Manual System, Medicare National Coverage Determinations Manual, Pub 100-03, Chapter 1, Section 150.3
CR 3719, Transmittal 501, dated 03/11/2005
42 CFR 410.31, Bone Mass Measurement: Conditions for Coverage and Frequency Standards
Bone mineral density studies

Primary Geographic Jurisdiction
Florida
Puerto Rico/Virgin Islands

Oversight Region
Region IV

Original Determination Effective Date
10/01/2015

Original Determination Ending Date
N/A

Revision Effective Date
10/01/2016

Revision Ending Date
09/30/2016

Indications and Limitations of Coverage and/or Medical Necessity

Bone (mineral) density studies are used to evaluate diseases of bone and/or the responses of bone diseases to treatment. The studies access bone mass or density associated with such diseases as osteoporosis, osteomalacia, and renal osteodystrophy. Various single or combined methods of measurement may be required to: (a) diagnose bone disease, (b) monitor the course of bone changes with disease progression, or (c) monitor the course of bone changes with therapy.

Covered methods for measuring bone mineral density include:

- Single energy x-ray absorptiometry (SEXA)
- Dual energy x-ray absorptiometry (DXA)
- Quantitative computed tomography (QCT)
- Bone ultrasound densitometry (BUD)
- Photodensitometry
- Radiographic absorptiometry (RA)

The following bone mass measurements are NOT covered under Medicare because they are not considered reasonable and necessary under section 1862(a)(1)(A) of the Act:

- Single photon absorptiometry (SPA), CPT code 78350 (effective 01/01/2007)
- Dual photon absorptiometry (DPA), CPT code 78351
Bone mineral density studies  

Bone density can be measured at the wrist, spine, hip or calcaneus. The medical literature is divided on the accuracy of predicting osteoporosis of the spine or hip by measuring peripheral sites (wrist, calcaneus). It does appear, however, that measurement of bone density of the bone involved gives a better measurement of osteoporosis than measurement of another bone not known to be involved.

Precise calibration of the equipment is required for accuracy and to reduce variation of test results and risk of misclassification of the degree of bone density. Lack of standardization in bone mineral measurement remains an issue, and tests are best done on the same suitably precise instrument to ensure accuracy. It is important to use results obtained with the same scanner when comparing a patient to a control population, as systematic differences among scanners have been found. To ensure reliability of bone mass measurements, the densitometry technologist must have proper training in performing this procedure. Malpositioning of a patient or analyzing a scan incorrectly can lead to great errors in bone mineral density studies.

**Indications:**

Medicare considers a bone mineral density study to be medically reasonable and necessary for the following indications: In addition, all coverage criteria listed below must be met.

1. A patient with vertebral abnormalities as demonstrated by an x-ray to be indicative of osteoporosis, osteopenia (low bone mass), or vertebral fracture.
2. A patient being monitored to assess the response to or efficacy of an FDA-approved osteoporosis drug therapy. This service must be performed using dual energy x-ray absorptiometry system (axial skeleton) – CPT codes 77080 and 77085.
3. A patient with known primary hyperparathyroidism.
4. A patient receiving (or expecting to receive) glucocorticoid (steroid) therapy equivalent to an average of 5.0 mg of prednisone or greater, per day, for more than 3 months.
5. A woman who has been determined by the physician or a qualified non physician practitioner treating her to be estrogen-deficient and at clinical risk for osteoporosis, based on her medical history and other findings.

**NOTE:** Since not every woman who has been prescribed estrogen replacement therapy (ERT) may receive an “adequate” dose of the therapy, the fact that a woman is receiving ERT should not preclude her treating physician or other qualified treating nonphysician practitioner from ordering a bone mass measurement for her. If a bone mass measurement is ordered for a woman following a careful evaluation of her medical need, however, it is expected that the ordering/treating physician (or other qualified treating nonphysician practitioner) will document in her medical record why he or she believes that the woman is estrogen-deficient and at clinical risk for osteoporosis.

An estrogen-deficient woman qualifies if she is at clinical risk for osteoporosis, based on her medical history and other findings. Unless this applies and is documented in the medical record, the service is not payable.

In addition to gender and estrogen-deficiency, pertinent factors acceptable as documentation for the clinical risk include, but are not limited to: age, family history and personal history of fractures as an adult, race, bone structure and body weight, premature menopause, lifestyle, medications, chronic diseases, and other genetic and environmental factors. Symptoms and findings of osteoporosis include, but are not limited to: back pain, loss of height, curving spine, and chest x-ray showing osteopenia.

Bone density measurement is not a covered Medicare benefit when utilized for osteoporosis screening in an estrogen-deficient woman, who has not been determined by the physician or a qualified nonphysician practitioner treating her to be at clinical risk for osteoporosis, based on her medical history and other findings.

If - in addition to gender and estrogen-deficiency - a woman has been determined to be at clinical risk for osteoporosis, based on her history and other findings, and this has been appropriately documented in the medical record, this Carrier will interpret the menopausal state as symptomatic.

**COVERAGE CRITERIA FOR BONE MASS MEASUREMENTS:**

1. There must be an order by the individual’s physician or qualified nonphysician practitioner treating the patient following an evaluation of the need for a measurement, including a determination as to the medically appropriate measurement to be used for the individual. A physician or qualified nonphysician practitioner treating the beneficiary for purposes of this provision is one who furnishes a consultation or treats a beneficiary for a specific medical problem and who uses the results in the management of
Bone mineral density studies

the patient. For the purpose of the bone mass measurement benefit, qualified nonphysician practitioners include physician assistants, nurse practitioners, clinical nurse specialists and certified nurse midwives.

2. This service must be furnished by a qualified supplier or provider of such services under the appropriate level of physician supervision as defined in CFR 410.32(b);

3. This service must be reasonable and necessary for diagnosing, treating, or monitoring a qualified individual as defined above; and

4. This service is a radiologic or radioisotopic procedure which must be performed with a bone densitometer or a bone sonometer system cleared for marketing by the FDA, under 21 CFR part 807 or approved for marketing under 21 CFR part 814 for identifying bone mass or detecting bone loss or determining bone quality, with the exception of dual photon absorptiometry devices.

FREQUENCY STANDARDS

Medicare may cover a bone mass measurement for a patient once every 2 years. However, if medically necessary, Medicare may cover a bone mass measurement for a patient more frequently than every 2 years. Examples of situations where more frequent bone mass measurements procedures may be medically necessary include, but are not limited to, the following medical circumstances:

- Monitoring patients on long-term glucocorticoid (steroid) therapy of more than 3 months; and
- In the case of any individual who meets the conditions as defined above, and who has a confirmatory BMM, is performed by a dual-energy x-ray absorptiometry system (axial skeleton) if the initial BMM was not performed by a dual-energy x-ray absorptiometry system (axial skeleton). A confirmatory baseline BMM is not covered if the initial BMM was performed by a dual-energy x-ray absorptiometry system (axial skeleton).
- Monitoring a patient to assess the response to or efficacy of an FDA-approved osteoporosis drug therapy if the result is being used to determine the need for continued treatment of osteoporosis. Agents approved by the FDA for osteoporosis prevention and/or treatment include:
  - estrogen therapy (for purposes of this policy, the estrogen must be specifically used for treatment of osteoporosis)
  - alendronate (Fosamax)
  - calcitonin-salmon (Miacalcin-nasal spray or injection)
  - raloxifene (Evista)
  - risedronate sodium (Actonel/Atelevia)
  - teriparatide (Forteo) injection
  - ibandronate (Boniva)
  - zoledronic acid (Reclast) injection
  - denosumab (Prolia)
- To determine a patient’s response to pharmacologic therapy when the therapy has been changed to another family of therapeutic agents

Limitations

Vertebral fracture assessment (CPT code 77086) is not within the scope of this LCD and is, therefore, subject to individual consideration.

Type of Bill Code

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.

Hospital – 12x, 13x
Skilled Nursing Facility – 22x, 23x
Rural Health Clinic (Outpatient – Provider-based and independent) – 71x
End Stage Renal Disease – 72x
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.

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0320</td>
<td>Radiology Diagnostic (General Classification)</td>
</tr>
<tr>
<td>0521</td>
<td>Clinic visit by member to RHC/FQHC</td>
</tr>
<tr>
<td>0524</td>
<td>Visit by RHC/FQHC practitioner to a member in a covered Part A stay at the SNF</td>
</tr>
</tbody>
</table>

CPT/HCPCS Codes

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>G0130</td>
<td>Single energy x-ray absorptiometry (SEXA) bone density study, one or more sites, appendicular skeleton (peripheral) (e.g., radius, wrist, heel)</td>
</tr>
<tr>
<td>77078</td>
<td>Computed tomography, bone mineral density study, 1 or more sites; axial skeleton (eg, hips, pelvis, spine)</td>
</tr>
<tr>
<td>77080*</td>
<td>Dual-energy X-ray absorptiometry (DXA), bone density study, 1 or more sites; axial skeleton (eg, hips, pelvis, spine)</td>
</tr>
<tr>
<td>77081</td>
<td>Dual-energy X-ray absorptiometry (DXA), bone density study, 1 or more sites; appendicular skeleton (peripheral) (eg, radius, wrist, heel)</td>
</tr>
<tr>
<td>77085*</td>
<td>Dual-energy X-ray absorptiometry (DXA), bone density study, 1 or more sites; axial skeleton (eg, hips, pelvis, spine), including vertebral fracture assessment</td>
</tr>
<tr>
<td>76977</td>
<td>Ultrasound bone density measurement and interpretation, peripheral site(s), any method</td>
</tr>
</tbody>
</table>

* Effective for dates of service on or after 01/01/2007, dual-energy x-ray absorptiometry (CPT code 77080) must be performed when monitoring osteoporosis drug therapy.

* Effective for dates of service on or after 07/01/2015, dual-energy x-ray absorptiometry (CPT code 77085) must be performed when monitoring osteoporosis drug therapy.

ICD-10 Codes

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>E21.0-E21.3</td>
<td>Hyperparathyroidism and other disorders of parathyroid gland</td>
</tr>
<tr>
<td>E23.0</td>
<td>Hypopituitarism</td>
</tr>
<tr>
<td>E24.0*</td>
<td>Pituitary-dependent Cushing’s disease</td>
</tr>
<tr>
<td>E24.2-E24.9*</td>
<td>Cushing’s syndrome</td>
</tr>
<tr>
<td>E28.310-E28.39</td>
<td>Primary ovarian failure</td>
</tr>
<tr>
<td>E89.40-E89.41</td>
<td>Postprocedural ovarian failure</td>
</tr>
<tr>
<td>M48.40xA</td>
<td>Fatigue fracture of vertebra</td>
</tr>
<tr>
<td>M48.41xA</td>
<td>Fatigue fracture of vertebra, occipito-atlanto-axial region, initial encounter for fracture</td>
</tr>
</tbody>
</table>
M48.42xA  Fatigue fracture of vertebra, cervical region, initial encounter for fracture
M48.43xA  Fatigue fracture of vertebra, cervicothoracic region, initial encounter for fracture
M48.44xA  Fatigue fracture of vertebra, thoracic region, initial encounter for fracture
M48.45xA  Fatigue fracture of vertebra, thoracolumbar region, initial encounter for fracture
M48.46xA  Fatigue fracture of vertebra, lumbar region, initial encounter for fracture
M48.47xA  Fatigue fracture of vertebra, lumbosacral region, initial encounter for fracture
M48.48xA  Fatigue fracture of vertebra, sacral and sacroccocygeal region, initial encounter for fracture
M48.50xA  Collapsed vertebra, not elsewhere classified, site unspecified, initial encounter for fracture
M48.51xA  Collapsed vertebra, not elsewhere classified, occipito-atlanto-axial region, initial encounter for fracture
M48.52xA  Collapsed vertebra, not elsewhere classified, cervical region, initial encounter for fracture
M48.53xA  Collapsed vertebra, not elsewhere classified, cervicothoracic region, initial encounter for fracture
M48.54xA  Collapsed vertebra, not elsewhere classified, thoracic region, initial encounter for fracture
M48.55xA  Collapsed vertebra, not elsewhere classified, thoracolumbar region, initial encounter for fracture
M48.56xA  Collapsed vertebra, not elsewhere classified, lumbar region, initial encounter for fracture
M48.57xA  Collapsed vertebra, not elsewhere classified, lumbosacral region, initial encounter for fracture
M48.58xA  Collapsed vertebra, not elsewhere classified, sacral and sacroccocygeal region, initial encounter for fracture
M80.08xA  Age-related osteoporosis with current pathological fracture, vertebra(e), initial encounter for fracture
M80.88xA  Other osteoporosis with current pathological fracture, vertebra(e), initial encounter for fracture
M81.0-M81.8* Osteoporosis without current pathological fracture
M84.58xA  Pathological fracture in neoplastic disease, vertebrae, initial encounter for fracture
M84.68xA  Pathological fracture in other disease, other site, initial encounter for fracture
M84.751A – M84.752S Incomplete atypical femoral fracture, right leg, initial encounter for fracture—Incomplete
atypical femoral fracture, left leg, sequela

M84.754A – M84.755S  Complete transverse atypical femoral fracture, right leg, initial encounter for fracture—Complete transverse atypical femoral fracture, left leg, sequela

M84.757A – M84.758S  Complete oblique atypical femoral fracture, right leg, initial encounter for fracture—Complete oblique atypical femoral fracture, left leg, sequela

M85.811* Other specified disorders of bone density and structure, right shoulder
M85.812* Other specified disorders of bone density and structure, left shoulder
M85.821* Other specified disorders of bone density and structure, right upper arm
M85.822* Other specified disorders of bone density and structure, left upper arm
M85.831* Other specified disorders of bone density and structure, right forearm
M85.832* Other specified disorders of bone density and structure, left forearm
M85.841* Other specified disorders of bone density and structure, right hand
M85.842* Other specified disorders of bone density and structure, left hand
M85.851* Other specified disorders of bone density and structure, right thigh
M85.852* Other specified disorders of bone density and structure, left thigh
M85.861* Other specified disorders of bone density and structure, right lower leg
M85.862* Other specified disorders of bone density and structure, left lower leg
M85.871* Other specified disorders of bone density and structure, right ankle and foot
M85.872* Other specified disorders of bone density and structure, left ankle and foot
M85.88* Other specified disorders of bone density and structure, other site
M85.89* Other specified disorders of bone density and structure, multiple sites
M85.9 Disorder of bone density and structure, unspecified
M89.9* Disorder of bone, unspecified
M94.9* Disorder of cartilage, unspecified
N95.1 Menopausal and female climacteric states
N95.8 Other specified menopausal and perimenopausal disorders
<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q55.4</td>
<td>Other congenital malformations of vas deferens, epididymis, seminal vesicles and prostate</td>
</tr>
<tr>
<td>Q78.0</td>
<td>Osteogenesis imperfecta</td>
</tr>
<tr>
<td>Q96.0-Q96.9</td>
<td>Turner's syndrome</td>
</tr>
<tr>
<td>S12.000A</td>
<td>Unspecified displaced fracture of first cervical vertebra, initial encounter for closed fracture</td>
</tr>
<tr>
<td>S12.000B</td>
<td>Unspecified displaced fracture of first cervical vertebra, initial encounter for open fracture</td>
</tr>
<tr>
<td>S12.001A</td>
<td>Unspecified nondisplaced fracture of first cervical vertebra, initial encounter for closed fracture</td>
</tr>
<tr>
<td>S12.001B</td>
<td>Unspecified nondisplaced fracture of first cervical vertebra, initial encounter for open fracture</td>
</tr>
<tr>
<td>S12.01XA-S12.01XS</td>
<td>Stable burst fracture of first cervical vertebra</td>
</tr>
<tr>
<td>S12.02XA-S12.02XS</td>
<td>Unstable burst fracture of first cervical vertebra</td>
</tr>
<tr>
<td>S12.030A-S12.030S</td>
<td>Displaced posterior arch fracture of first cervical vertebra</td>
</tr>
<tr>
<td>S12.031A-S12.031S</td>
<td>Nondisplaced posterior arch fracture of first cervical vertebra</td>
</tr>
<tr>
<td>S12.040A-S12.040S</td>
<td>Displaced lateral mass fracture of first cervical vertebra</td>
</tr>
<tr>
<td>S12.041A-S12.041S</td>
<td>Nondisplaced lateral mass fracture of first cervical vertebra</td>
</tr>
<tr>
<td>S12.090A-S12.090S</td>
<td>Other displaced fracture of first cervical vertebra</td>
</tr>
<tr>
<td>S12.091A-S12.091S</td>
<td>Other nondisplaced fracture of first cervical vertebra</td>
</tr>
<tr>
<td>S12.100A</td>
<td>Unspecified displaced fracture of second cervical vertebra, initial encounter for closed fracture</td>
</tr>
<tr>
<td>S12.100B</td>
<td>Unspecified displaced fracture of second cervical vertebra, initial encounter for open fracture</td>
</tr>
<tr>
<td>S12.101A</td>
<td>Unspecified nondisplaced fracture of second cervical vertebra, initial encounter for closed fracture</td>
</tr>
<tr>
<td>S12.101B</td>
<td>Unspecified nondisplaced fracture of second cervical vertebra, initial encounter for open fracture</td>
</tr>
<tr>
<td>S12.110A-S12.110S</td>
<td>Anterior displaced Type II dens fracture</td>
</tr>
<tr>
<td>S12.111A-S12.111S</td>
<td>Posterior displaced Type II dens fracture</td>
</tr>
<tr>
<td>S12.112A-S12.112S</td>
<td>Nondisplaced Type II dens fracture</td>
</tr>
<tr>
<td>S12.120A-S12.120S</td>
<td>Other displaced dens fracture</td>
</tr>
<tr>
<td>S12.121A-S12.121S</td>
<td>Other nondisplaced dens fracture</td>
</tr>
</tbody>
</table>
Unspecified traumatic displaced spondylolisthesis of second cervical vertebra, initial encounter for closed fracture

Unspecified traumatic displaced spondylolisthesis of second cervical vertebra, initial encounter for open fracture

Unspecified traumatic nondisplaced spondylolisthesis of second cervical vertebra, initial encounter for closed fracture

Unspecified traumatic nondisplaced spondylolisthesis of second cervical vertebra, initial encounter for open fracture

Type III traumatic spondylolisthesis of second cervical vertebra

Other traumatic displaced spondylolisthesis of second cervical vertebra

Other traumatic nondisplaced spondylolisthesis of second cervical vertebra

Other displaced fracture of second cervical vertebra

Other nondisplaced fracture of second cervical vertebra

Unspecified displaced fracture of third cervical vertebra, initial encounter for closed fracture

Unspecified displaced fracture of third cervical vertebra, initial encounter for open fracture

Unspecified nondisplaced fracture of third cervical vertebra, initial encounter for closed fracture

Unspecified nondisplaced fracture of third cervical vertebra, initial encounter for open fracture

Unspecified traumatic displaced spondylolisthesis of third cervical vertebra, initial encounter for closed fracture

Unspecified traumatic displaced spondylolisthesis of third cervical vertebra, initial encounter for open fracture

Unspecified traumatic nondisplaced spondylolisthesis of third cervical vertebra, initial encounter for closed fracture

Unspecified traumatic nondisplaced spondylolisthesis of third cervical vertebra, initial encounter for open fracture

Type III traumatic spondylolisthesis of third cervical vertebra

Other traumatic displaced spondylolisthesis of third cervical vertebra

Other traumatic nondisplaced spondylolisthesis of third cervical vertebra

Other displaced fracture of third cervical vertebra
Other nondisplaced fracture of third cervical vertebra

Unspecified displaced fracture of fourth cervical vertebra, initial encounter for closed fracture

Unspecified displaced fracture of fourth cervical vertebra, initial encounter for open fracture

Unspecified nondisplaced fracture of fourth cervical vertebra, initial encounter for closed fracture

Unspecified nondisplaced fracture of fourth cervical vertebra, initial encounter for open fracture

Unspecified traumatic displaced spondylolisthesis of fourth cervical vertebra, initial encounter for closed fracture

Unspecified traumatic displaced spondylolisthesis of fourth cervical vertebra, initial encounter for open fracture

Unspecified traumatic nondisplaced spondylolisthesis of fourth cervical vertebra, initial encounter for closed fracture

Unspecified traumatic nondisplaced spondylolisthesis of fourth cervical vertebra, initial encounter for open fracture

Type III traumatic spondylolisthesis of fourth cervical vertebra

Other traumatic displaced spondylolisthesis of fourth cervical vertebra

Other traumatic nondisplaced spondylolisthesis of fourth cervical vertebra

Other displaced fracture of fourth cervical vertebra

Other nondisplaced fracture of fourth cervical vertebra

Unspecified displaced fracture of fifth cervical vertebra, initial encounter for closed fracture

Unspecified displaced fracture of fifth cervical vertebra, initial encounter for open fracture

Unspecified nondisplaced fracture of fifth cervical vertebra, initial encounter for closed fracture

Unspecified nondisplaced fracture of fifth cervical vertebra, initial encounter for open fracture

Unspecified traumatic displaced spondylolisthesis of fifth cervical vertebra, initial encounter for closed fracture

Unspecified traumatic displaced spondylolisthesis of fifth cervical vertebra, initial encounter for open fracture

Unspecified traumatic nondisplaced spondylolisthesis of fifth cervical vertebra, initial encounter for closed fracture
Bone mineral density studies

S12.431B  Unspecified traumatic nondisplaced spondylolisthesis of fifth cervical vertebra, initial encounter for open fracture

S12.44XA-S12.44XS  Type III traumatic spondylolisthesis of fifth cervical vertebra

S12.450A-S12.450S  Other traumatic displaced spondylolisthesis of fifth cervical vertebra

S12.451A-S12.451S  Other traumatic nondisplaced spondylolisthesis of fifth cervical vertebra

S12.490A-S12.490S  Other displaced fracture of fifth cervical vertebra

S12.491A-S12.491S  Other nondisplaced fracture of fifth cervical vertebra

S12.500A  Unspecified displaced fracture of sixth cervical vertebra, initial encounter for closed fracture

S12.500B  Unspecified displaced fracture of sixth cervical vertebra, initial encounter for open fracture

S12.501A  Unspecified nondisplaced fracture of sixth cervical vertebra, initial encounter for closed fracture

S12.501B  Unspecified nondisplaced fracture of sixth cervical vertebra, initial encounter for open fracture

S12.530A  Unspecified traumatic displaced spondylolisthesis of sixth cervical vertebra, initial encounter for closed fracture

S12.530B  Unspecified traumatic displaced spondylolisthesis of sixth cervical vertebra, initial encounter for open fracture

S12.531A  Unspecified traumatic nondisplaced spondylolisthesis of sixth cervical vertebra, initial encounter for closed fracture

S12.531B  Unspecified traumatic nondisplaced spondylolisthesis of sixth cervical vertebra, initial encounter for open fracture

S12.54XA-S12.54XS  Type III traumatic spondylolisthesis of sixth cervical vertebra

S12.550A-S12.550S  Other traumatic displaced spondylolisthesis of sixth cervical vertebra

S12.551A-S12.551S  Other traumatic nondisplaced spondylolisthesis of sixth cervical vertebra

S12.590A-S12.590S  Other displaced fracture of sixth cervical vertebra

S12.591A-S12.591S  Other nondisplaced fracture of sixth cervical vertebra

S12.600A  Unspecified displaced fracture of seventh cervical vertebra, initial encounter for closed fracture

S12.600B  Unspecified displaced fracture of seventh cervical vertebra, initial encounter for open fracture

S12.601A  Unspecified nondisplaced fracture of seventh cervical vertebra, initial encounter for closed fracture
S12.601B  Unspecified nondisplaced fracture of seventh cervical vertebra, initial encounter for open fracture
S12.630A  Unspecified traumatic displaced spondylolisthesis of seventh cervical vertebra, initial encounter for closed fracture
S12.630B  Unspecified traumatic displaced spondylolisthesis of seventh cervical vertebra, initial encounter for open fracture
S12.631A  Unspecified traumatic nondisplaced spondylolisthesis of seventh cervical vertebra, initial encounter for closed fracture
S12.631B  Unspecified traumatic nondisplaced spondylolisthesis of seventh cervical vertebra, initial encounter for open fracture
S12.64XA-S12.64XS Type III traumatic spondylolisthesis of seventh cervical vertebra
S12.650A-S12.650S Other traumatic displaced spondylolisthesis of seventh cervical vertebra
S12.651A-S12.651S Other traumatic nondisplaced spondylolisthesis of seventh cervical vertebra
S12.690A-S12.690S Other displaced fracture of seventh cervical vertebra
S12.691A-S12.691S Other nondisplaced fracture of seventh cervical vertebra
S12.9xxA  Fracture of neck, unspecified, initial encounter
S14.101A  Unspecified injury at C1 level of cervical spinal cord, initial encounter
S14.102A  Unspecified injury at C2 level of cervical spinal cord, initial encounter
S14.103A  Unspecified injury at C3 level of cervical spinal cord, initial encounter
S14.104A  Unspecified injury at C4 level of cervical spinal cord, initial encounter
S14.105A  Unspecified injury at C5 level of cervical spinal cord, initial encounter
S14.106A  Unspecified injury at C6 level of cervical spinal cord, initial encounter
S14.107A  Unspecified injury at C7 level of cervical spinal cord, initial encounter
S14.109A  Unspecified injury at unspecified level of cervical spinal cord, initial encounter
S14.111A  Complete lesion at C1 level of cervical spinal cord, initial encounter
S14.112A  Complete lesion at C2 level of cervical spinal cord, initial encounter
S14.113A  Complete lesion at C3 level of cervical spinal cord, initial encounter
Complete lesion at C4 level of cervical spinal cord, initial encounter
Complete lesion at C5 level of cervical spinal cord, initial encounter
Complete lesion at C6 level of cervical spinal cord, initial encounter
Complete lesion at C7 level of cervical spinal cord, initial encounter
Central cord syndrome at C1 level of cervical spinal cord, initial encounter
Central cord syndrome at C2 level of cervical spinal cord, initial encounter
Central cord syndrome at C3 level of cervical spinal cord, initial encounter
Central cord syndrome at C4 level of cervical spinal cord, initial encounter
Central cord syndrome at C5 level of cervical spinal cord, initial encounter
Central cord syndrome at C6 level of cervical spinal cord, initial encounter
Central cord syndrome at C7 level of cervical spinal cord, initial encounter
Anterior cord syndrome at C1 level of cervical spinal cord, initial encounter
Anterior cord syndrome at C2 level of cervical spinal cord, initial encounter
Anterior cord syndrome at C3 level of cervical spinal cord, initial encounter
Anterior cord syndrome at C4 level of cervical spinal cord, initial encounter
Anterior cord syndrome at C5 level of cervical spinal cord, initial encounter
Anterior cord syndrome at C6 level of cervical spinal cord, initial encounter
Anterior cord syndrome at C7 level of cervical spinal cord, initial encounter
Other incomplete lesion at C1 level of cervical spinal cord, initial encounter
Other incomplete lesion at C2 level of cervical spinal cord, initial encounter
Other incomplete lesion at C3 level of cervical spinal cord, initial encounter
Other incomplete lesion at C4 level of cervical spinal cord, initial encounter
Other incomplete lesion at C5 level of cervical spinal cord, initial encounter
Other incomplete lesion at C6 level of cervical spinal cord, initial encounter
Other incomplete lesion at C7 level of cervical spinal cord, initial encounter
Wedge compression fracture of unspecified thoracic vertebra, initial encounter for closed
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fracture

S22.000B Wedge compression fracture of unspecified thoracic vertebra, initial encounter for open fracture

S22.001A Stable burst fracture of unspecified thoracic vertebra, initial encounter for closed fracture

S22.001B Stable burst fracture of unspecified thoracic vertebra, initial encounter for open fracture

S22.002A Unstable burst fracture of unspecified thoracic vertebra, initial encounter for closed fracture

S22.002B Unstable burst fracture of unspecified thoracic vertebra, initial encounter for open fracture

S22.008A Other fracture of unspecified thoracic vertebra, initial encounter for closed fracture

S22.008B Other fracture of unspecified thoracic vertebra, initial encounter for open fracture

S22.009A Unspecified fracture of unspecified thoracic vertebra, initial encounter for closed fracture

S22.009B Unspecified fracture of unspecified thoracic vertebra, initial encounter for open fracture

S22.010A-S22.010S Wedge compression fracture of first thoracic vertebra

S22.011A-S22.011S Stable burst fracture of first thoracic vertebra

S22.012A-S22.012S Unstable burst fracture of first thoracic vertebra

S22.018A-S22.018S Other fracture of first thoracic vertebra

S22.019A Unspecified fracture of first thoracic vertebra, initial encounter for closed fracture

S22.019B Unspecified fracture of first thoracic vertebra, initial encounter for open fracture

S22.020A-S22.020S Wedge compression fracture of second thoracic vertebra

S22.021A-S22.021S Stable burst fracture of second thoracic vertebra

S22.022A-S22.022S Unstable burst fracture of second thoracic vertebra

S22.028A-S22.028S Other fracture of second thoracic vertebra

S22.029A Unspecified fracture of second thoracic vertebra, initial encounter for closed fracture

S22.029B Unspecified fracture of second thoracic vertebra, initial encounter for open fracture

S22.030A-S22.030S Wedge compression fracture of third thoracic vertebra

S22.031A-S22.031S Stable burst fracture of third thoracic vertebra

S22.032A-S22.032S Unstable burst fracture of third thoracic vertebra
S22.038A-S22.038S Other fracture of third thoracic vertebra
S22.039A Unspecified fracture of third thoracic vertebra, initial encounter for closed fracture
S22.039B Unspecified fracture of third thoracic vertebra, initial encounter for open fracture
S22.040A-S22.040S Wedge compression fracture of fourth thoracic vertebra
S22.041A-S22.041S Stable burst fracture of fourth thoracic vertebra
S22.042A-S22.042S Unstable burst fracture of fourth thoracic vertebra
S22.048A-S22.048S Other fracture of fourth thoracic vertebra
S22.049A Unspecified fracture of fourth thoracic vertebra, initial encounter for closed fracture
S22.049B Unspecified fracture of fourth thoracic vertebra, initial encounter for open fracture
S22.050A-S22.050S Wedge compression fracture of T5-T6 vertebra
S22.051A-S22.051S Stable burst fracture of T5-T6 vertebra
S22.052A-S22.052S Unstable burst fracture of T5-T6 vertebra
S22.058A-S22.058S Other fracture of T5-T6 vertebra
S22.059A Unspecified fracture of T5-T6 vertebra, initial encounter for closed fracture
S22.059B Unspecified fracture of T5-T6 vertebra, initial encounter for open fracture
S22.060A-S22.060S Wedge compression fracture of T7-T8 vertebra
S22.061A-S22.061S Stable burst fracture of T7-T8 vertebra
S22.062A-S22.062S Unstable burst fracture of T7-T8 vertebra
S22.068A-S22.068S Other fracture of T7-T8 thoracic vertebra
S22.069A Unspecified fracture of T7-T8 vertebra, initial encounter for closed fracture
S22.069B Unspecified fracture of T7-T8 vertebra, initial encounter for open fracture
S22.070A-S22.070S Wedge compression fracture of T9-T10 vertebra
S22.071A-S22.071S Stable burst fracture of T9-T10 vertebra
S22.072A-S22.072S Unstable burst fracture of T9-T10 vertebra
S22.078A-S22.078S Other fracture of T9-T10 vertebra
S22.079A Unspecified fracture of T9-T10 vertebra, initial encounter for closed fracture
<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>S22.079B</td>
<td>Unspecified fracture of T9-T10 vertebra, initial encounter for open fracture</td>
</tr>
<tr>
<td>S22.080A-S22.080S</td>
<td>Wedge compression fracture of T11-T12 vertebra</td>
</tr>
<tr>
<td>S22.081A-S22.081S</td>
<td>Stable burst fracture of T11-T12 vertebra</td>
</tr>
<tr>
<td>S22.082A-S22.082S</td>
<td>Unstable burst fracture of T11-T12 vertebra</td>
</tr>
<tr>
<td>S22.088A-S22.088S</td>
<td>Other fracture of T11-T12 vertebra</td>
</tr>
<tr>
<td>S22.089A</td>
<td>Unspecified fracture of T11-T12 vertebra, initial encounter for closed fracture</td>
</tr>
<tr>
<td>S24.101A</td>
<td>Unspecified injury at T1 level of thoracic spinal cord, initial encounter</td>
</tr>
<tr>
<td>S24.102A</td>
<td>Unspecified injury at T2-T6 level of thoracic spinal cord, initial encounter</td>
</tr>
<tr>
<td>S24.103A</td>
<td>Unspecified injury at T7-T10 level of thoracic spinal cord, initial encounter</td>
</tr>
<tr>
<td>S24.104A</td>
<td>Unspecified injury at T11-T12 level of thoracic spinal cord, initial encounter</td>
</tr>
<tr>
<td>S24.109A</td>
<td>Unspecified injury at unspecified level of thoracic spinal cord, initial encounter</td>
</tr>
<tr>
<td>S24.111A</td>
<td>Complete lesion at T1 level of thoracic spinal cord, initial encounter</td>
</tr>
<tr>
<td>S24.112A</td>
<td>Complete lesion at T2-T6 level of thoracic spinal cord, initial encounter</td>
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<tr>
<td>S24.113A</td>
<td>Complete lesion at T7-T10 level of thoracic spinal cord, initial encounter</td>
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<tr>
<td>S24.114A</td>
<td>Complete lesion at T11-T12 level of thoracic spinal cord, initial encounter</td>
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<tr>
<td>S24.131A</td>
<td>Anterior cord syndrome at T1 level of thoracic spinal cord, initial encounter</td>
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<tr>
<td>S24.132A</td>
<td>Anterior cord syndrome at T2-T6 level of thoracic spinal cord, initial encounter</td>
</tr>
<tr>
<td>S24.133A</td>
<td>Anterior cord syndrome at T7-T10 level of thoracic spinal cord, initial encounter</td>
</tr>
<tr>
<td>S24.134A</td>
<td>Anterior cord syndrome at T11-T12 level of thoracic spinal cord, initial encounter</td>
</tr>
<tr>
<td>S24.151A</td>
<td>Other incomplete lesion at T1 level of thoracic spinal cord, initial encounter</td>
</tr>
<tr>
<td>S24.152A</td>
<td>Other incomplete lesion at T2-T6 level of thoracic spinal cord, initial encounter</td>
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<td>S24.153A</td>
<td>Other incomplete lesion at T7-T10 level of thoracic spinal cord, initial encounter</td>
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<tr>
<td>S24.154A</td>
<td>Other incomplete lesion at T11-T12 level of thoracic spinal cord, initial encounter</td>
</tr>
<tr>
<td>S32.000A</td>
<td>Wedge compression fracture of unspecified lumbar vertebra, initial encounter for closed fracture</td>
</tr>
</tbody>
</table>
Wedge compression fracture of unspecified lumbar vertebra, initial encounter for open fracture

Stable burst fracture of unspecified lumbar vertebra, initial encounter for closed fracture

Stable burst fracture of unspecified lumbar vertebra, initial encounter for open fracture

Unstable burst fracture of unspecified lumbar vertebra, initial encounter for closed fracture

Unstable burst fracture of unspecified lumbar vertebra, initial encounter for open fracture

Other fracture of unspecified lumbar vertebra, initial encounter for closed fracture

Other fracture of unspecified lumbar vertebra, initial encounter for open fracture

Unspecified fracture of unspecified lumbar vertebra, initial encounter for closed fracture

Unspecified fracture of unspecified lumbar vertebra, initial encounter for open fracture

Wedge compression fracture of first lumbar vertebra

Stable burst fracture of first lumbar vertebra

Unstable burst fracture of first lumbar vertebra

Other fracture of first lumbar vertebra

Unspecified fracture of first lumbar vertebra, initial encounter for closed fracture

Unspecified fracture of first lumbar vertebra, initial encounter for open fracture

Wedge compression fracture of second lumbar vertebra

Stable burst fracture of second lumbar vertebra

Unstable burst fracture of second lumbar vertebra

Other fracture of second lumbar vertebra

Unspecified fracture of second lumbar vertebra, initial encounter for closed fracture

Unspecified fracture of second lumbar vertebra, initial encounter for open fracture

Wedge compression fracture of third lumbar vertebra

Stable burst fracture of third lumbar vertebra

Unstable burst fracture of third lumbar vertebra

Other fracture of third lumbar vertebra
S32.039A  Unspecified fracture of third lumbar vertebra, initial encounter for closed fracture
S32.039B  Unspecified fracture of third lumbar vertebra, initial encounter for open fracture
S32.040A-S32.040S  Wedge compression fracture of fourth lumbar vertebra
S32.041A-S32.041S  Stable burst fracture of fourth lumbar vertebra
S32.042A-S32.042S  Unstable burst fracture of fourth lumbar vertebra
S32.048A-S32.048S  Other fracture of fourth lumbar vertebra
S32.049A  Unspecified fracture of fourth lumbar vertebra, initial encounter for closed fracture
S32.049B  Unspecified fracture of fourth lumbar vertebra, initial encounter for open fracture
S32.050A-S32.050S  Wedge compression fracture of fifth lumbar vertebra
S32.051A-S32.051S  Stable burst fracture of fifth lumbar vertebra
S32.052A-S32.052S  Unstable burst fracture of fifth lumbar vertebra
S32.058A-S32.058S  Other fracture of fifth lumbar vertebra
S32.059A  Unspecified fracture of fifth lumbar vertebra, initial encounter for closed fracture
S32.059B  Unspecified fracture of fifth lumbar vertebra, initial encounter for open fracture
S32.10xA  Unspecified fracture of sacrum, initial encounter for closed fracture
S32.10xB  Unspecified fracture of sacrum, initial encounter for open fracture
S32.110A-S32.110S  Nondisplaced Zone I fracture of sacrum
S32.111A-S32.111S  Minimally displaced Zone I fracture of sacrum
S32.112A-S32.112S  Severely displaced Zone I fracture of sacrum
S32.119A  Unspecified Zone I fracture of sacrum, initial encounter for closed fracture
S32.119B  Unspecified Zone I fracture of sacrum, initial encounter for open fracture
S32.120A-S32.120S  Nondisplaced Zone II fracture of sacrum
S32.121A-S32.121S  Minimally displaced Zone II fracture of sacrum
S32.122A-S32.122S  Severely displaced Zone II fracture of sacrum
S32.129A  Unspecified Zone II fracture of sacrum, initial encounter for closed fracture
S32.129B  Unspecified Zone II fracture of sacrum, initial encounter for open fracture
S32.130A-S32.130S  Nondisplaced Zone III fracture of sacrum
S32.131A-S32.131S  Minimally displaced Zone III fracture of sacrum
S32.132A-S32.132S  Severely displaced Zone III fracture of sacrum
S32.139A  Unspecified Zone III fracture of sacrum, initial encounter for closed fracture
S32.139B  Unspecified Zone III fracture of sacrum, initial encounter for open fracture
S32.14XA-S32.14XS  Type 1 fracture of sacrum
S32.15XA-S32.15XS  Type 2 fracture of sacrum
S32.16XA-S32.16XS  Type 3 fracture of sacrum
S32.17XA-S32.17XS  Type 4 fracture of sacrum
S32.19XA-S32.19XS  Other fracture of sacrum
S32.2XXA-S32.2XXS  Fracture of coccyx
S34.101A  Unspecified injury to L1 level of lumbar spinal cord, initial encounter
S34.102A  Unspecified injury to L2 level of lumbar spinal cord, initial encounter
S34.103A  Unspecified injury to L3 level of lumbar spinal cord, initial encounter
S34.104A  Unspecified injury to L4 level of lumbar spinal cord, initial encounter
S34.105A  Unspecified injury to L5 level of lumbar spinal cord, initial encounter
S34.109A  Unspecified injury to unspecified level of lumbar spinal cord, initial encounter
S34.111A  Complete lesion of L1 level of lumbar spinal cord, initial encounter
S34.112A  Complete lesion of L2 level of lumbar spinal cord, initial encounter
S34.113A  Complete lesion of L3 level of lumbar spinal cord, initial encounter
S34.114A  Complete lesion of L4 level of lumbar spinal cord, initial encounter
S34.115A  Complete lesion of L5 level of lumbar spinal cord, initial encounter
S34.119A  Complete lesion of unspecified level of lumbar spinal cord, initial encounter
S34.121A  Incomplete lesion of L1 level of lumbar spinal cord, initial encounter
S34.122A  Incomplete lesion of L2 level of lumbar spinal cord, initial encounter
S34.123A  Incomplete lesion of L3 level of lumbar spinal cord, initial encounter
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S34.124A  Incomplete lesion of L4 level of lumbar spinal cord, initial encounter
S34.125A  Incomplete lesion of L5 level of lumbar spinal cord, initial encounter
S34.129A  Incomplete lesion of unspecified level of lumbar spinal cord, initial encounter
S34.131A  Complete lesion of sacral spinal cord, initial encounter
S34.132A  Incomplete lesion of sacral spinal cord, initial encounter
S34.139A  Unspecified injury to sacral spinal cord, initial encounter
S34.3XXA  Injury of cauda equina, initial encounter
Z78.0    Asymptomatic menopausal state
Z79.3    Long term (current) use of hormonal contraceptives
Z79.51-79.52  Long term (current) use of steroids
Z79.83    Long term (current) use of bisphosphonates
Z87.310  Personal history of (healed) osteoporosis fracture

* Effective for dates of service on or after 01/01/07, procedure codes G0130, 77078, 77081, and 76977 will be denied when billed with these ICD-10-CM codes.

Diagnoses that Support Medical Necessity

N/A

ICD-10 Codes that DO NOT Support Medical Necessity

N/A

Diagnoses that DO NOT Support Medical Necessity

N/A

Associated Information

Documentation Requirements

Medical record documentation maintained by the performing physician/qualified nonphysician practitioner must clearly indicate the medical necessity of the service being billed. In addition, documentation that the service was performed must be included in the patient’s medical record. If the service exceeds the frequency parameter listed in this policy, documentation of medical necessity must be submitted. This information is normally found in the office/progress notes, hospital notes, and/or procedure report.

If the provider of the service is other than the ordering/referring physician/nonphysician practitioner, that provider must maintain a copy of test results and interpretation, along with copies of the ordering/referring physician/nonphysician practitioner’s order for the studies. The clinical indication/medical necessity for the study must be indicated in the order for the test.
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Documentation should support the criteria for coverage as set forth in the “Indications and Limitations of Coverage and/or Medical Necessity” section of this policy and should reflect how the results of this test will be used in the patient’s plan of care.

**Utilization Guidelines**

*Medicare may cover a bone mass measurement for a patient once every 2 years (after 23 months have elapsed since the last test). However, if medically necessary, Medicare may cover a bone mass measurement for a patient more frequently than every 2 years.*

Examples of situations where more frequent (once a year/after 11 months have elapsed since the last test) bone mass measurements procedures may be medically necessary include, but are not limited to, the following medical circumstances:

- Monitoring patients receiving glucocorticoid (steroid) therapy equivalent to an average of 5.0 mg of prednisone or greater, per day, for more than 3 months
- In the case of any individual who meets the conditions as defined above, and who has a confirmatory BMM, is performed by a dual-energy x-ray absorptiometry system (axial skeleton) if the initial BMM was not performed by a dual-energy x-ray absorptiometry system (axial skeleton). A confirmatory baseline BMM is not covered if the initial BMM was performed by a dual-energy x-ray absorptiometry system.
- Monitoring a patient to assess the response to or efficacy of an FDA-approved osteoporosis drug therapy if the result is being used to determine the need for continued treatment of osteoporosis. This service must be performed using dual-energy x-ray absorptiometry. Agents approved by the FDA for osteoporosis prevention and/or treatment include:
  - estrogen therapy (for purposes of this policy, the estrogen must be specifically used for treatment of osteoporosis)
  - alendronate (Fosamax)
  - calcitonin-salmon (Miacalcin-nasal spray or injection)
  - raloxifene (Evista)
  - risendronate sodium (Actonel/Atelvia)
  - teriparatide (Forteo) injection
  - ibandronate (Boniva)
  - zoledronic acid (Reclast) injection
  - denosumab (Prolia)
- To determine a patient’s response to pharmacologic therapy when the therapy has been changed to another family of therapeutic agents.

Note: A bone mineral density study code should be billed only once regardless of the number of sites being tested or included in the study (i.e., if the spine and hip are performed as part of the same study only one can be billed).

**Sources of Information and Basis for Decision**


**Start Date of Comment Period**
Bone mineral density studies  AB

N/A

End Date of Comment Period

N/A

Start Date of Notice Period

04/10/2014

Revision History

Revision History Number:  R4

Revision Number: 4  
Publication: October 2016 Connection  
LCR A/B2016-097

Explanation of Revision: Based on CR 9677 (Annual 2017 ICD-10-CM Update), this LCD was revised to add ICD-10-CM diagnosis code ranges M84.751A – M84.752S, M84.754A - M84.755S, and M84.757A – M84.758S. The effective date of this revision is based on date of service.

Revision History Number:  R3

Revision Number: 3  
Publication: July 2016 Connection  
LCR A/B2016-079

Explanation of revision: Based on the Centers for Medicare & Medicaid Services (CMS) MLN Matters article SE1525, the LCD was revised to remove ICD-10-CM diagnosis code M85.80. The effective date of this revision is for claims processed on or after 06/02/16 for dates of service on or after 10/01/15 for Part A and for claims processed on or after 06/06/16, or dates of service on or after 10/01/15 for Part B.

Revision History Number:  R2

Revision Number: 2  
Publication: December 2015 Connection  
LCR A/B2015-035

Explanation of revision: This LCD was revised to add ICD-10-CM diagnosis codes Z79.3, Z79.83, and Z87.310 based on Change Request 9252. The effective date of this revision is for claims processed on or after 01/04/16, or dates of service on or after 10/01/15.

Revision History Number:  R1

Revision Number: 1  
Publication: November 2015 Connection  
LCR A/B2015-025

Explanation of revision: This LCD was revised to add ICD-10-CM diagnosis codes M85.80*, M85.811*, M85.812*, M85.821*, M85.822*, M85.831*, M85.832*, M85.841*, M85.842*, M85.851*, M85.852*, M85.861*, M85.862*, M85.871*, M85.872*, M85.88*, and M85.89* to the “ICD-10 Codes that Support Medical Necessity” section of the LCD, for CPT codes 77080 and 77085, based on CMS direction. The effective date of this revision is for claims processed on or after 11/02/2015 for Part B and 11/04/2015 for Part A, for dates of service on or after 10/01/15.
Bone mineral density studies  AB

**Revision Number:** Original

This LCD replaces all previous LCD versions (refer to “Sources of Information and Basis for Decision” section of the LCD) and publications on this subject to comply with ICD-10-CM based on Change Request 8112. The effective date of this LCD is based on date of service.

**Related Documents**

N/A

**LCD Attachments**

N/A

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Document formatted 9/8/16 (RA/et)