PATHOLOGY CONSULTANTS
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FOCUSED ON PRECISION

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MOLECULAR MICROBIOLOGY ICD-9 CODES - MEDICARE & ALL INSURANCES

Medicare has established the following limited coverage for Chlamydia trachomatis (87491)/Neisseria gonorrhoeae (87591) and BD Affirm VPIII (87480, 87510, 87660). C. trachomatis/N. gonorrhoeae and BD Affirm VPIII test(s) will only be covered by Medicare when it is ordered due to the following conditions. An approved ICD-9 code(s) from the following list must be provided on the requisition form for Medicare.

If the testing is ordered in the absence of any of the following conditions, please check off the screening ICD-9 code (V74.5) provided on the PCNM requisition. Also, if the patient's primary insurance is Medicare and the only ICD-9 code that can be provided is the V74.5 code, the patient must sign an ABN form indicating that she/he understands that Medicare may not pay for the test. If one of the ICD-9 codes from this list is provided, the screening ICD-9 code (V74.5) is not needed.

Code	Description
076.0–076.1	Trachoma.
076.9	Trachoma, unspecified.
077.0	Inclusion conjunctivitis.
077.98–077.99	Unspecified diseases of conjunctiva due to viruses and Chlamydia.
098.0	Gonococcal infection (acute) of lower genitourinary tract.
098.10–098.17	Acute of upper genitourinary tract.
098.19	Other gonococcal infection (acute) of upper genitourinary tract.
098.2	Gonococcal infection, chronic, of lower genitourinary tract.
098.30–098.37	Chronic, of upper genitourinary tract.
098.39	Other chronic gonococcal infection of upper genitourinary tract.
098.40–098.43	Gonococcal infection of eye.
098.49	Other gonococcal infection of eye.
098.50–098.53	Gonococcal infection of joint.
098.59	Other gonococcal infection of joint.
098.6–098.7	Gonococcal infections.
098.81–098.86	Gonococcal infection of other specified sites.
098.89	Gonococcal infection of other specified sites, other.
099.1	Lymphogranuloma venereum.
099.3	Reiter's disease.
099.41	Venereal urethritis due to Chlamydia trachomatis.
099.50–099.56	Other venereal diseases due to Chlamydia trachomatis.
099.59	Chlamydia trachomatis infection of other specified site.
112.1–112.2	Candidiasis.
131.00–131.03	Urogenital trichomoniasis.
131.09	Other urogenital trichomoniasis.
131.8–131.9	Trichomoniasis.
288.00–288.04	Neutropenia.
288.09	Other neutropenia.
288.66	Bandemia.
288.8	Other specified disease of white blood cells.
289.1	Chronic lymphadenitis.
289.53	Neutropenic splenomegaly.
289.83	Myelofibrosis.
372.00	Acute conjunctivitis, unspecified.
372.02–372.03	Acute conjunctivitis.
372.10–372.12	Chronic conjunctivitis.
595.4	Cystitis in diseases classified elsewhere.
597.80–597.81	Other urethritis.
601.0	Acute prostatitis.
601.8–601.9	Inflammatory diseases of prostate.
604.0	Orchitis, epididymitis, and epididymo-orchitis, with abscess.
604.90–604.91	Other orchitis, epididymitis, and epididymitis-orchitis, without mention of abscess.
608.89	Other specified disorders of male genital organs, other.
614.0	Acute salpingitis and oophoritis.
614.2–614.4	Inflammatory disease of ovary, fallopian tube, pelvic cellular tissue, and peritoneum.
614.6	Pelvic peritoneal adhesions, female.
616.0	Cervicitis and endocervicitis.
616.10–616.11	Vaginitis and vulvovaginitis.
616.81	Mucositis (ulcerative) of cervix, vagina, and vulva.
616.89	Other inflammatory disease of cervix, vagina, and vulva.
616.9	Unspecified inflammatory diseases of cervix, vagina, and vulva.
628.2	Infertility, female, or tubal origin.
629.89	Other specified disorders of female genital organs.
683	Acute lymphadenitis.
711.90–711.99	Unspecified infective arthritis.
716.50–716.59	Unspecified polyarthropathy or polyarthritis.
716.60–716.68	Unspecified monoarthritis.
716.90–716.99	Arthropathy, unspecified.
719.40–719.49	Pain in joint.
727.00	Synovitis and tenosynovitis, unspecified.
727.05–727.06	Synovitis and tenosynovitis, unspecified.
727.09	Other synovitis and tenosynovitis.
771.6	Neonatal conjunctivitis and dacryocystitis.
780.6	Fever.
782.1	Symptom, rash and other nonspecific skin eruption.
785.6	Enlargement of lymph nodes.
788.1	Dysuria.
788.64–788.65	Other abnormality of urination.
788.7	Urethral discharge.
789.00–789.07	Abdominal pain.
789.09	Abdominal pain, other specified site.
789.1–789.2	Other symptoms involving abdominal and pelvic.
789.30–789.37	Abdominal or pelvic swelling, mass, or lump.
789.39	Abdominal or pelvic swelling, mass, or lump, other specified site.
789.40–789.47	Abdominal rigidity.
789.49	Abdominal rigidity, other specified site.
789.51	Malignant ascites.
789.59	Other ascites.
789.60–789.67	Abdominal tenderness.
789.69	Abdominal tenderness, other specified site.
789.9	Other symptoms involving abdomen and pelvis.
790.4–790.5	Nonspecific findings on examination of blood.
790.7	Bacteremia.
791.0–791.7	Nonspecific findings on examination of urine.
791.9	Other nonspecific findings on examination of urine.

Medicare has established the following limited coverage for human papillomavirus (87621). Human papillomavirus (HPV) testing will only be covered by Medicare when it is ordered due to the following conditions. An appropriate ICD-9 code from the following list must be provided on the requisition form for Medicare.

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If the testing is ordered in the absence of any of the following conditions, please check off the screening ICD-9 code (V73.81) provided on the PCNM requisition. Also, if the patient's primary insurance is Medicare and the only ICD-9 code that can be provided is the V73.81 code, the patient must sign an ABN form indicating that she/he understands that Medicare may not pay for the test. If one of these ICD-9 codes from this list is provided, the screening ICD-9 code (V73.81) is not needed.

Code	Description
622.10–622.12	Dysplasia of cervix (uteri).
795.00–795.01	Abnormal Papanicolaou smear of cervix and cervix HPV.
795.03	Papanicolaou smear of cervix with low-grade squamous intraepithelial lesion (LSIL).