

IPA Podiatry Reimbursement Methodology

IPA par Podiatrists are reimbursed at a per visit maximum fee arrangement. Specific procedure codes, mostly surgical procedures and orthopedic supplies, are excluded from the per visit fee methodology and will be paid fee for service. A listing of these procedures appears in the chart below.

Procedure Code(s)	Description
11426	Exc., Benign Lesion Scalp, Neck, Hand and Face, over 4.0 cm
11626	Exc., Malignant Lesion Scalp, Neck, Hand and Face, over 4.0 cm
14040	Adjacent Transfer Chin/Axillae/Foot, 10 sq. cm
14041	Adjacent Transfer Chin/Axillae/Foot, 10.1 – 30.0 sq. cm
15004, 15005	Surg. Preparation Recipient site, 1 st 100 sq cm; each additional
20525	Removal Foreign Body Muscle/Tendon, deep, complicated
20670	Removal Implant, superficial (separate procedure)
20680	Removal Implant, deep
28001 – 28899	Foot and Toe Surgical Procedures
29891 – 29999	Endoscopy and Arthroscopy
64640	Destruction, other peripheral nerve
64722	Decompression, unspecified nerve (specify)
64776	Excision Neuroma, digit nerve 1/Both same
73720	MRI, Lower Extremity other than joint
73725	MRI, Angiography, Lower Extremity w/wo Contrast
A5500 – A5511	Diabetic Shoes, fitting and modifc
A5512-A5513	For Diabetics only, multiple density inserts
L1900 – L1990	Ankle Foot Orthoses
L2820 – L2999	Addition to lower extremity orthosis
L3000 – L3649	Orthopedic Shoes
L4205 – L4360, L4386 – L4398	Repair/replace orthotic device or soft interface material; Ankle control orthosis; Walking boot; ankle-foot orthosis; foot drop splint
L5000	Prosthetic, Partial foot, shoe insert with longitudinal arch, toe filler
L5010	Prosthetic, Partial foot, molded socket, ankle height, with toe filler
L5020	Prosthetic, Partial foot, molded socket, tibial tubercle height, with toe filler