Plan of Care for Urinary Incontinence in Women Aged 65 Years and Older

Coding Specifications

Codes required to document patient has urinary incontinence and a visit occurred:

An ICD-9-CM diagnosis code for urinary incontinence and a CPT code are required to identify patients to be included in this measure.

All measure specific coding should be reported on the claim(s) representing the eligible encounter.

Urinary incontinence ICD-9-CM diagnosis codes

- 307.6 (nonorganic origin)
- 625.6 (stress, female)
- 788.30, 788.31, 788.33, 788.34, 788.35, 788.36, 788.37, 788.38, 788.39 (urinary incontinence)

AND

CPT codes

- **99201, 99202, 99203, 99204, 99205**
- 99212, 99213, 99214, 99215
- 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337
- 99341, 99342, 99343, 99344, 99345, 99347, 33948, 33949, 99350

Quality codes for this measure:

CPT II Code descriptors

(Data collection sheet should be used to determine appropriate code.)

- *CPT II 0509F*: Urinary incontinence plan of care documented
- *CPT II 0509F-8P*: Urinary incontinence plan of care not documented, reason not otherwise specified

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