

Long Island Health Information Management Association

2010 ICD-9-CM Code Revisions

Medicare MS-DRG Revisions

October 14, 2009

presented by

John W. Ruth, MBA, RHIA

Director, Health Industries Advisory

PricewaterhouseCoopers LLP

Slide 1

2010 ICD-9-CM Code Revisions
2010 Medicare PPS Revisions
LIHIMA

ICD-9-CM Code Changes

110+ New Diagnosis Codes

14 New Procedure Codes

45 Revised Diagnosis Codes, E-Codes, V-Codes

16 Revised Procedure Codes

170 New E-Codes

32 New V-Codes

Slide 2

New Codes

- Neoplasms-Neuroendocrine Tumors
 - 209.31-209.36 Merkel Cell Carcinoma
 - Face; scalp & neck; upper limb; lower limb; trunk; other sites
 - Malignant skin cancer with >33% mortality
 - Found in the lower part of the epidermis, the exact function of Merkel cells is unknown. Neuroendocrine cells, similar to nerve cells and to hormone-secreting (endocrine) cells.
 - 209.70-209.79 Metastatic Neuroendocrine tumors: distant lymph nodes; liver; bone; peritoneum; other sites. (CC except 209.75)
- Neoplasms of Unspecified Nature
 - 239.81 Neoplasm unspecified nature, retina & choroid
 - 239.89 Other specified sites

Slide 3

New Codes, continued

- Endocrine System
 - 274.00 Gouty arthropathy, unspecified
 - 274.01 Acute gouty arthropathy
 - 274.02 Chronic gouty arthropathy without mention of tophus (tophi)
 - 274.03 Chronic gouty arthropathy with tophus (tophi)
 - Tophus is a deposit of uric acid crystals forming a chalky mass on the bones at the joint, usually seen on the toes or other small joints
 - 277.88 Tumor lysis syndrome (MCC)
 - Metabolic complications that can occur after treatment of malignancies, usually lymphoma and leukemia, caused by breakdown of dying cancer cells

Slide 4

New Codes, continued

- Endocrine System (continued)
 - 279.41 Autoimmune lymphoproliferative syndrome (ALPS)
 - Inherited disorder. Unusually high numbers of white blood cells accumulate in lymph nodes, liver and spleen which causes anemia, thrombocytopenia, neutropenia.
 - 279.49 Autoimmune disease NEC

Slide 5

New Codes, continued

- Blood & Blood Forming Organs
 - 285.3 Antineoplastic chemotherapy Induced anemia
 - Anemia acquired as the result of the administration of antineoplastic chemotherapy (No E code for drug is required)
 - Common side effect of cancer treatment; not a true “aplastic” anemia

Slide 6

New Codes, continued

- Nervous System and Sense Organs
 - 348.81 Temporal sclerosis
 - Caused by loss of neurons and scarring of the temporal lobe associated with certain brain injuries resulting in partial or temporal lobe epilepsy (code specific epilepsy separately)
 - Seizure disorder which can produce behavioral or emotional changes, muscle spasms or convulsions
 - 348.89 Other conditions of brain
 - 359.71 Inclusion Body Myositis
 - Included in a group of muscle disorders known as inflammatory myopathies, symptoms include chronic muscle inflammation and muscle weakness. Gradual onset over months or years.
 - Characterized by muscle weakness which may affect only one side of the body; occurs frequently in males >50, no known cure.

Slide 7

New Codes, continued

- Nervous System and Sense Organs (continued)
 - 359.79 Other inflammatory and immune myopathies, NEC
- Disorders of Eye and Ocular Adnexa
 - 372.06 Acute chemical conjunctivitis
 - Inflammation of the conjunctiva caused by irritants entering the eye
 - Includes household cleaners, sprays, smoke, smog, industrial pollutants, or chlorine from swimming pools or hot tubs
 - Significant risk of vision damage if not treated
 - Use E code to identify the chemical or toxic agent

Slide 8

New Codes, continued

- Circulatory System

- 416.2 Chronic pulmonary embolism (CC)
 - Pulmonary embolism documented as chronic by the physician
 - Use additional code V58.61 if patient is receiving long term anticoagulant therapy
- 438.13-438.14 Late effect of cerebrovascular disease: dysarthria; fluency disorder
- Venous embolism & thrombosis (all are CC's):
- 453.50 Chronic deep (unspecified) lower extremity
- 453.51 Chronic deep proximal lower extremity
- 453.52 Chronic deep distal lower extremity
- 453.6 Superficial lower extremity (Lesser saphenous vein, Greater saphenous vein)

Slide 9

New Codes, continued

- Circulatory System (continued)

- Venous embolism & thrombosis (all are CC's) (continued)
- 453.71 Chronic superficial veins upper extremity (Antecubital, Basilic, Cephalic)
- 453.72 Chronic deep veins upper extremity (Brachial, Radial, Ulnar)
- 453.73 Chronic unspecified upper extremity
- 453.74 Chronic axillary veins
- 453.75 Chronic subclavian veins
- 453.76 Chronic internal jugular veins
- 453.77 Chronic other thoracic veins (Brachiocephalic (innominate), Superior vena cava)
- 453.79 Chronic other specified
- Use V58.61 with all codes for associated long-term (current) use of anticoagulant therapy

Slide 10

New Codes, continued

- Circulatory System (continued)
 - Acute venous embolism & thrombosis (all are CC's):
 - 453.81 Acute superficial upper extremity (Antecubital, Basilic, Cephalic)
 - 453.82 Acute deep veins upper extremity (Brachial, Radial, Ulnar)
 - 453.83 Acute upper extremity unspecified
 - 453.84 Acute axillary veins
 - 453.85 Acute subclavian veins
 - 453.86 Acute internal jugular veins
 - 453.87 Acute other thoracic veins
 - 453.89 Acute other specified veins

Slide 11

New Codes, continued

- Circulatory System (continued)
 - Venous embolism & thrombosis definitions:
 - Acute:
 - New thrombosis that requires the initiation of anticoagulant therapy
 - Chronic:
 - Diagnosed condition that requires continuation of established anticoagulation therapy
 - History:
 - Condition no longer under treatment (V12.51)

Slide 12

New Codes, continued

- Respiratory System
 - H1N1 Influenza
 - 488.0 Influenza due to identified avian influenza virus
 - 488.1 Influenza due to identified novel H1N1 influenza virus

New Codes, continued

- Digestive System
 - 569.71 Pouchitis (CC)
 - Nonspecific inflammation of internal ileoanal pouch surgically created following proctocolectomy with ileal pouch and anal anastomosis.
 - Treated with antibiotics
 - 569.79 Other complications of intestinal pouch (CC)
 - 569.87 Vomiting of fecal material

New Codes, continued

- Genitourinary System-Female Pelvic Organ Diseases
 - 621.34 Benign endometrial hyperplasia
 - Can be caused due to hormonal effects of estrogen on the uterus which results in abnormal bleeding. Endometrial malignancy must be ruled out especially in patients >35 years. Diagnosis is confirmed via endometrial aspiration or biopsy
 - 621.35 Endometrial intraepithelial neoplasia (EIN)
 - Considered to be a “pre-malignant” condition of the uterine lining. High risk of developing endometrial adenocarcinoma. Treatment includes surgery or hormonal therapy.

Slide 15

New Codes, continued

- Complications of Pregnancy, Childbirth and the Puerperium
 - Category 670 –Major Puerperal Infections
 - No longer require the addition of fourth digit of 0 before adding the fifth digit
 - Fourth digits were added to specify different types of postpartum infections
 - Category 670 codes require a fifth digit of 0, 2, or 4 to identify the episode of care
 - 670.1x Puerperal endometritis, delivered (CC)
 - 670.2x Puerperal sepsis (.x0-CC; .x2 or .x4-MCC)
 - 670.3x Puerperal septic thrombophlebitis (.x0-CC; .x2 or .x4-MCC)
 - 670.8x Other major puerperal infection (.x0, .x2, .x4 – MCC)

Slide 16

New Codes, continued

- **Congenital Anomalies**
 - 756.72 Omphalocele (MCC)
 - Intestine protrudes through the umbilicus at birth. Intestines are covered by a membranous sac with possible exposure of the intestines if the sac ruptures.
 - Occurs 1-2 per 10,000 births with higher incidence in >35 age mothers
 - 756.73 Gastroschisis (MCC)
 - Abdominal wall fissure with intestine protrusion present at birth. Congenital ventral wall defect, to the right of the umbilical cord with infection. Caused by failure of the developing abdominal wall to completely close. Fetal intestines protrude through the defect and are exposed to amniotic fluid to produce inflamed intestine.
 - Can be identified prior to birth, Surgical treatment required to place bowel back into abdomen and close defect.
 - Occurs 2-5 per 10,000 births with higher incidence in young mothers

Slide 17

New Codes, continued

- **Conditions Originating in the Perinatal Period**
- **Hypoxic-Ischemic Encephalopathy (HIE)**
 - 768.70 Hypoxic-ischemic encephalopathy, unspecified (CC)
 - 768.71 Mild Hypoxic-ischemic encephalopathy (CC)
 - 768.72 Moderate Hypoxic-ischemic encephalopathy (CC)
 - 768.73 Severe Hypoxic-ischemic encephalopathy (MCC)
 - There are defined clinical definitions of mild, moderate and severe HIE
 - Newborn conditions diagnosed based on clinical presentations and imaging findings. Code assignment based on physician documentation.
 - Stages I, II, & III correlate to mild, moderate and severe HIE

Slide 18

New Codes, continued

- **Conditions Originating in the Perinatal Period (continued)**
 - 779.31 Feeding problems in newborn
 - 779.32 Bilious vomiting in newborn (MCC)
 - 779.33 Other vomiting in newborn
 - 779.34 Failure to thrive in newborn

Slide 19

New Codes, continued

- **Symptoms, Signs & Ill-defined Conditions**
 - Symptoms of head and neck
 - 784.42 Dysphonia
 - Hoarseness
 - 784.43 Hypernasality
 - Increase in nasal sound of voice
 - 784.44 Hyponasality
 - Decrease in nasal sound of voice
 - 784.51 Dysarthria
 - Difficult word articulation
 - Exclude: Late effect of CVA (438.13)
 - 784.59 Other speech disturbance
 - Includes dysphagia, slurred speech, or other speech disturbance

Slide 20

New Codes, continued

- Symptoms, Signs & Ill-defined Conditions
 - Symptoms of Digestive System
 - 787.04 Bilious vomiting
 - Vomiting stomach contents with bile; Exclude: Newborn
 - 789.7 Colic
 - Used for newborn through age 17
 - For colic in adults over age 17 see Category 789.0x
 - Excludes: Renal colic, 788.0

Slide 21

New Codes, continued

- Symptoms, Signs & Ill-defined Conditions
 - Non-specific findings
 - 793.82 Inconclusive mammogram
 - Mammogram without specific abnormality, but requires additional testing to rule out an abnormal condition
 - Other and Ill-defined Conditions-Emotional State Signs/Symptoms
 - 799.21 Nervousness
 - 799.22 Irritability
 - 799.23 Impulsiveness
 - 799.24 Emotional lability
 - 799.25 Demoralization and apathy
 - 799.29 Other signs & symptoms involving emotional state

Slide 22

New Codes, continued

- Symptoms, Signs & Ill-defined Conditions (continued)
 - Non-specific findings (continued)
 - 799.82 Apparent life threatening even in infant
 - Defined as an episode that is frightening to the observer and characterized by a combination of apnea, color change, marked change in muscle tone, choking or gagging. In some cases, the observer fears the infant has died
 - Also known as “aborted crib death” or “near-miss SIDS”; no proven relationship between crib death and SIDS
 - Use additional code(s) for any associated signs/symptoms
 - Occurs in infants born at greater than 37 weeks
 - Can occur during sleep, wakefulness or feeding
 - Cyanosis and apnea are predominant presenting symptoms
 - True incidence is unknown

Slide 23

New Codes, continued

- Injury & Poisoning
 - Fractures:
 - 813.46 Torus fracture of ulna (alone) (CC)
 - 813.47 Torus fracture of radius and ulna (CC)
 - Most common in children and occurs after a fall on an outstretched arm
 - Revised code for torus fracture radius (alone): 813.45 (CC)
 - Existing code for torus fracture of humerus: 812.49 (CC)
 - 832.2 Nursemaid’s elbow
 - Subluxation of the radial head, also called a radial head dislocation. A partial dislocation of elbow most commonly seen in children under age 5. This injury occurs as the result of a child being pulled up too hard by one hand or wrist

Slide 24

New Codes, continued

- Injury & Poisoning (continued)
 - Poisoning:
 - 969.00-969.09 Poisoning by antidepressants
 - Expanded to fifth digit to provide code for the seven classes of antidepressants:
 - Antidepressant, unspecified
 - Monoamine oxidase inhibitor (MAOI)
 - Selective serotonin and norepinephrine reuptake inhibitors
 - Selective serotonin reuptake inhibitors (SSRI)
 - Tetracyclic antidepressants
 - Tricyclic antidepressants
 - Other specified types

Slide 25

New Codes, continued

- Injury & Poisoning (continued)
 - Poisoning (continued)
 - 969.70-969.79 Poisoning by psychostimulants
 - New codes to identify specific types of psychostimulants:
 - Unspecified type
 - Caffeine
 - Amphetamines
 - Methamphetamines
 - Methylphenidate
 - Other psychostimulants

Slide 26

New Codes, continued

- Injury & Poisoning (continued)
 - Certain Adverse Effects Not Elsewhere Classified:
 - 995.24 Failed moderate sedation during procedure
 - Occurs when conscious sedation is not effective. Can include too little sedation, too much sedation or other related conditions which require an anesthesiologist to assist.

New Codes, continued

- V-Codes, Supplementary Classifications
 - Personal History V-codes:
 - V10.90 Unspecified malignant neoplasm
 - V10.91 Malignant neuroendocrine tumor
 - V15.52 Traumatic brain injury
 - V15.80 Failed moderate sedation
 - If failure of moderate sedation has occurred this code should be used for subsequent encounters. Use of this code with subsequent encounters may provide rationale for administering moderate sedation with an anesthesiologist present
 - V15.83 Underimmunization status
 - Indicates the status of a person who is at risk of disease due to being behind the recommended immunization schedule

New Codes, continued

- V-Codes, Supplementary Classifications (continued)
 - Health Supervision of Infant or Child
 - V20.31 Health supervision for newborn under 8 days old
 - V20.32 Health supervision for newborn 8 to 28 days old
 - Since most normal newborn infants are discharged from hospital less than 48 hours after birth, the American Academy of Pediatrics recommends these infants be examined within 2 days of discharge
 - Procreative Management
 - V26.42 Encounter for fertility preservation counseling
 - V26.82 Encounter for fertility preservation procedure

Slide 29

New Codes, continued

- V-Codes, Supplementary Classifications (continued)
 - Fitting & Adjustment
 - V53.50 Fitting & adjustment of intestinal appliance & device
 - V53.51 Fitting & adjustment of gastric lap band
 - V53.59 Fitting & adjustment of other gastrointestinal appliance/device
 - Other Circumstances
 - V60.81 Foster care (status)
 - V60.89 Other specified housing or economic circumstances
 - V61.07 Family disruption due to death in family
 - V61.08 Family disruption due to other extended absence family member
 - V61.23 Counseling for parent-biological child problem
 - V61.24 Counseling for parent-adopted child problem
 - V61.25 Counseling for parent (guardian)-foster child problem
 - V61.42 Substance abuse in family

Slide 30

New Codes, continued

- V-Codes, Supplementary Classifications (continued)
 - Special Investigations & Examinations
 - V72.60-V72.69 Laboratory Examination:
 - Unspecified
 - Antibody response examination
 - Pre-procedural laboratory examination
 - Other laboratory examination
 - V80.01 Special screening for traumatic brain injury
 - V80.09 Special screening other neurological conditions

Slide 31

New Codes, continued

- V-Codes, Supplementary Classifications (continued)
 - Other Personal Exposures
 - V87.32 Contact with and exposure to algae bloom
 - V87.43-V87.46 Personal history of therapy:
 - Estrogen
 - Inhaled steroid
 - Systemic steroid
 - Immunosuppressive

Slide 32

Surgery Code Additions

(O.R. = May affect MS-DRG or DRG assignment)

- 17.51 Implantation rechargeable cardiac contractility modulation (CCM), total system (O.R.)
- 17.52 Implantation rechargeable cardiac contractility modulation (CCM), rechargeable pulse generator only (O.R.)
 - Cardiac Contractility Modulation (CCM): Impulse Dynamics is the manufacturer of OPTIMIZER III
 - The device generates CCM therapy signals through three standard pacemaker leads, providing therapy for patients with moderate-to-severe heart failure due to ischemic or non-ischemic cardiomyopathy with left ventricular dysfunction and a normal QRS duration
 - The CCM device may be used alone as therapy or can be used in the presence of a pre-existing AICD
 - Can be implanted at the same time as the implantation of an AICD
 - Device plus 3 leads, 2 placed in right ventricular septum, 1 placed in right atrium
 - Code also any concurrent device placement (AICD); Device testing is included in the code for the procedure

Slide 33

Surgery Code Additions (continued)

- 17.61 Laser interstitial thermal therapy (LITT) of lesion or tissue of brain under guidance (O.R.)
- 17.62 Laser interstitial thermal therapy (LITT) of lesion or tissue of head & neck under guidance (O.R.)
- 17.63 Laser interstitial thermal therapy (LITT) of lesion or tissue of liver under guidance (O.R.)
- 17.69 Laser interstitial thermal therapy (LITT) of lesion or tissue of other/unspecified site under guidance (O.R.)
 - LITT uses real time imaging guidance, such as MRI, for malignant tumor ablation. Can be used to ablate tumors of the brain, head and neck and liver as well as for ablation of lesions of other sites and benign lesions.
- 17.70 Intravenous infusion of clofarabine (aka CLOLAR)
 - Used to treat relapsed or refractory acute lymphoblastic leukemia in pediatric patients, elderly patients with AML.

Slide 34

Surgery Code Additions (continued)

- 33.73 Endoscopic insertion or replacement of bronchial valve(s), multiple lobes
 - Minimally invasive endoscopic insertion of a small umbrella shaped valve in the bronchial tree. Indications are for treatment of severe emphysema and control of air leaks. Valve restricts airflow to the areas of the lung distal to the valve, but allows mucus and movement of air proximal to the valve. Manufactured by Spiration, Inc.
- Revised 33.71 to: Endoscopic insertion or replacement of bronchial valve(s), **single** lobe

Slide 35

Surgery Code Additions (continued)

- 38.24 Intravascular imaging of coronary vessel(s) by optical coherence tomography (OCT)
- 38.25 Intravascular imaging of non-coronary vessel(s) by optical coherence tomography (OCT)
 - OCT allows physicians to determine the proper lumen size for stent placement by visualizing and evaluating the coronary and peripheral vessels to provide images of the vessel lumen and wall structures.
 - Images able to detect intraluminal thrombus, fibroatheroma, vessel plaques.

Slide 36

Surgery Code Additions (continued)

- 39.75 Endovascular embolization or occlusion of vessel(s) of head or neck using bare coils (O.R.)
- 39.76 Endovascular embolization or occlusion of vessel(s) of head or neck using bioactive coils (O.R.)
 - New coils used to treat cerebral aneurysms. Inserting microcoils into an aneurysm disrupts the blood flow into the aneurysm
 - Coils may contain polyglycolic acid (PGA) which initiates healing response in the aneurysm
 - Operative report may describe bare coils bare platinum coils (BPC) which are primarily bare metal
 - Bioactive coils are manufactured with biodegradable polymers which enhance rates of occlusion and formation of thrombus
 - Trade name: "Cerecyte Microcoils"

Slide 37

Surgery Code Additions (continued)

- 46.86 Endoscopic insertion of colonic stent(s)
- 46.87 Other insertion of colonic stent(s)
 - Used as palliative treatment, these expandable stents are used for the relief of pain from colonic obstruction due to malignant or benign neoplasm
 - Code 46.87 describes non-endoscopic stent insertion
 - Examples of stent brands:
 - Colonic Z-Stent
 - Enteral Wallsten
 - Ultraflex Precision Colonic Stent

Slide 38

Significant Surgery Code Revisions

- “Code Also” Note
 - Added to 34.1, Incision of mediastinum
 - “Code also any biopsy, if performed”
 - Added to 34.22, Mediastinoscopy
 - “Code also any biopsy, if performed”
 - Previously note under code 34.22 only referred to lymph node biopsy
- Inclusion notes added:
 - 33.24, Closed [endoscopic] biopsy of bronchus
 - Includes transbronchial needle aspiration [TBNA]
 - Includes Wang needle aspiration biopsy of bronchus
- Code description revised:
 - 80.0x Arthrotomy for removal of prosthesis, added: **without replacement**

Slide 39

E-Code Additions

- E Codes –Activity Status
- E000.0-E000.9
- New E codes to identify the activity status of the patient at the time of an event or injury
 - E000.0: Civilian activity done for income or pay
 - E000.1: Military activity
 - E000.8: Other external cause status
 - Includes leisure, recreation, sport, student or volunteer
 - E000.9: Unspecified external cause status

Slide 40

E-Code Additions

- E Codes –Activity Status
- E001-E030 Activity
 - **New E codes identify activity status of patient at the time of an event or injury**
 - **Examples include activities involving**
 - **Walking & running**
 - **Water & water craft**
 - **Ice & snow**
 - **Climbing, rappelling & jumping off**
 - **Dancing and other rhythmic movement**
 - **Individually played sports & athletics**
 - **Team or group sports & athletics**
 - **Personal hygiene and household maintenance**
 - **Person providing care-giving**
 - **Food preparation, cooking, grilling**

Slide 41

E-Code Additions

- E Codes
 - Added 5th digit "7" for water transport accidents to identify an occupant of a military watercraft
 - –E830, E831, E832, E833, E834, E835, E836, E837, E838
- Added:
 - E928.7 Mechanical malfunction of a firearm or air gun
- Added:
 - E990-E998 Injuries Due To Operations of War
 - Injuries to military personnel & civilians caused by war and civil insurrections, occurring at time of war, insurrection, and peacekeeping missions

Slide 42

E-Code Additions

- E Codes for Never Events
- Revised & New E codes
 - Identify 3 of the 28 “never events” on the National Quality Forum’s list of adverse events.
 - Revised:
 - E876.5 Performance of wrong operation (procedure) on correct patient; wrong device, correct site
 - New:
 - E876.6 Performance of operation (procedure) on patient not scheduled for surgery; wrong patient
 - E876.7 Performance of correct operation (procedure) on wrong side/wrong body part

Slide 43

2010 Medicare P.P.S. Changes

- New MS-DRG’s:
 - There are no new MS-DRG’s
- MS-DRG Revisions:
 - 80.0x Arthrotomy for removal of prosthesis without replacement
 - 80.05 Hip-relocated from MS-DRG 480-481-482 to MS-DRG 463-464-465
 - 80.06 Knee-relocated from MS-DRG 495-496-497 to MS-DRG 463-464-465
- New Technology Add-on Payments:
 - Cardiowest Temporary Total Artificial Heart will continue for 2010
 - Use 37.52 for procedure, V70.7 must be in submitted diagnoses
 - Up to \$53,000 add-on payment

Slide 44

2010 Medicare P.P.S. Changes (continued)

- New Technology Add-on Payments (continued):
 - 33.71 or 33.73, Insertion/replacement Spiration IBV Valve System

 - Must be reported with one of the following procedure codes:
 - 32.22 Lung volume reduction
 - 32.30 Thoracoscopic segmental resection of lung
 - 32.39 Other/unspecified segmental resection of lung
 - 32.41 Thoracoscopic lobectomy of lung

 - And MS-DRG must be:
 - 163-164-165, Major chest procedures w/MCC; CC; w/o CC/MCC

Slide 45

Helpful Web Sites:

- Federal Register, August 27, 2009 Final Rule
 - www.gpoaccess.gov/fr/index.html

- ICD-9-CM Codes, Table 6A-6F:
 - www.cms.hhs.gov/ICD9ProviderDiagnosisCodes/07summarytables.asp

- NCHC Classification of Diseases & Functioning Disability with Diagnosis addenda:
 - www.cdc.gov/nchs/icd9.htm

Slide 46

For questions:
John.W.Ruth@us.pwc.com
312-298-3190

The intent of this educational material is for use only as a supplement to the actual live training session and is in no way a substitute for authoritative coding references. PricewaterhouseCoopers, its employees, agents and staff make no representation or guarantee that the use of this educational material will prevent differences of opinion or disputes with Medicare or other third-party payers as to the amount that will be paid to providers of service.

This presentation and educational material is intended for informational purposes only. This presentation and educational material is not intended for reliance by any third party.

Slide 47