



SEPTEMBER 30, 2020

2021 ICD-10 Update Part 2: ICD-10-PCS & IPPS Updates

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Total 2020 Codes	2021 Deletions			Code Description Revisions for 2021
77,559	0	556	78,103	(



New Codes & Tables

*	Stony Brook Medicine
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COVID-19 PROCEDURE CODES

Effective August 1	Previous code(s) assignment	Predecessor code title
2020	3E013GC	Introduction of Other Therapeutic Substance into Subcutaneous Tissue, Percutaneous Approach
2020	3E03329	Introduction of Other Anti-infective into Peripheral Vein, Percutaneous Approach
2020	3E033GC	Introduction of Other Therapeutic Substance into Peripheral Vein, Percutaneous Approach
2020	3E033GC	Introduction of Other Therapeutic Substance into Peripheral Vein, Percutaneous Approach
2020	3E033GC	Introduction of Other Therapeutic Substance into Peripheral Vein, Percutaneous Approach
2020	3E04329	Introduction of Other Anti-infective into Central Vein, Percutaneous Approach
2020	3E043GC	Introduction of Other Therapeutic Substance into Central Vein, Percutaneous Approach
2020	3E043GC	Introduction of Other Therapeutic Substance into Central Vein, Percutaneous Approach
2020	3E043GC	Introduction of Other Therapeutic Substance into Central Vein, Percutaneous Approach
2020	3E0DXGC	Introduction of Other Therapeutic Substance into Mouth and Pharynx, External Approach
2020	30233K1	Transfusion of Nonautologous Frozen Plasma into Peripheral Vein, Percutaneous Approach
2020	30233L1	Transfusion of Nonautologous Fresh Plasma into Peripheral Vein, Percutaneous Approach
2020	30243K1	Transfusion of Nonautologous Frozen Plasma into Central Vein, Percutaneous Approach
2020	30243L1	Transfusion of Nonautologous Fresh Plasma into Central Vein, Percutaneous Approach



RADIOACTIVE ELEMENT

• A device value for radioactive element (1) has been added to the Tables below.

Table	Root Operation/Body System
00H	Insertion of Central Nervous System and Cranial Nerves
01H	Insertion of Peripheral Nervous System
07H	Insertion of Lymphatic and Hemic Systems
09H	Insertion of Ear, Nose, Sinus
0CH	Insertion of Mouth and Throat
0DH	Insertion of Gastrointestinal System
0FH	Insertion of Hepatobiliary System and Pancreas
0GH	Insertion of Endocrine System
0TH	Insertion of Urinary System
0UH	Insertion of Female Reproductive System
0VH	Insertion of Male Reproductive System



RIGHT ATRIUM QUALIFIER



 Enables capture of procedures such as unidirectional left to right atrial shunt performed for treatment of congestive heart failure.



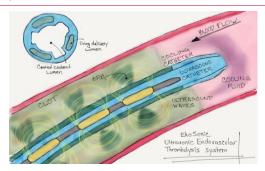
INTRAVASCULAR ASSISTED THROMBOLYSIS

- · Describes intravascular ultrasound assisted thrombolysis with TPA
- While thrombolytics can be administered systemically, the risk of an adverse bleeding reaction may be minimized by delivering a lower dose of the thrombolytic directly to the clot through catheterdirected thrombolysis (CDT).
- The ultrasound does not itself dissolve the thrombus, but pulses of ultrasonic energy temporarily make the fibrin in the thrombus more porous and increase fluid flow within the thrombus. High frequency, low-intensity ultrasonic waves create a pressure gradient that drives the thrombolytic into the thrombus and keeps it in close proximity to the binding sites.
- Facilities may choose to report the administration of the thrombolytic agent separately using the appropriate codes.

ICD-10 Coordination & Maintenance Committee September 2019 pgs. 25-29

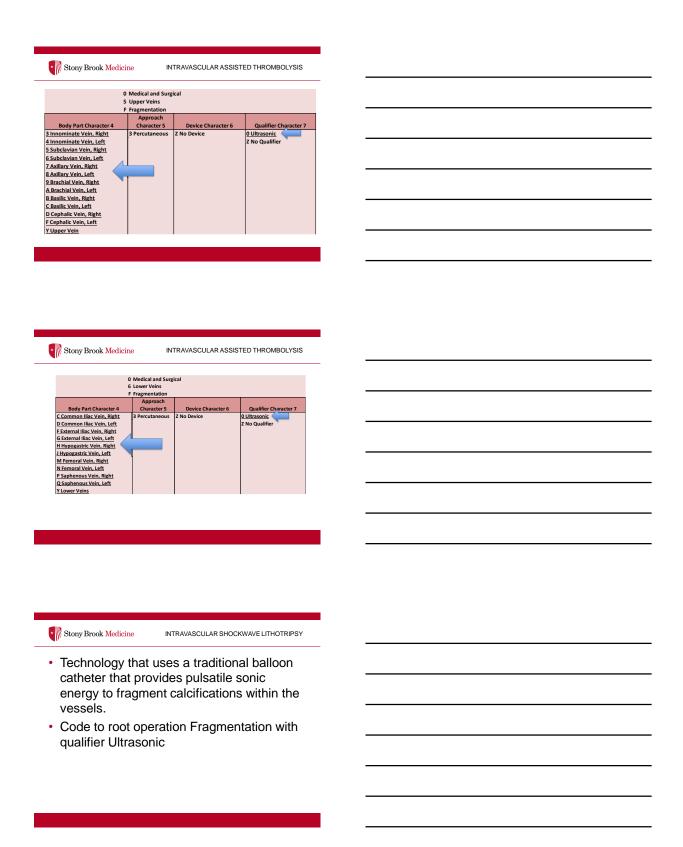


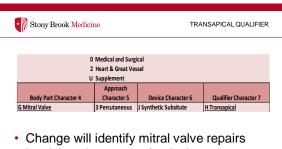
INTRAVASCULAR ASSISTED THROMBOLYSIS



https://images.nursinganswers.net/1/0655238.004.jpg

Stony Brook Medicine INTRAVASCULAR ASSISTED THRO	MBOLYSIS
0 Madisulas d Gariani	
0 Medical and Surgical 2 Heart & Great Vessels F Fragmentation	
Approach Body Part Character 4 Character 5 Device Character 6 Qualifier Character 6 Qualifier Character 6 Characte	7
P Pulmonary Trunk 3 Percutaneous Z No Device 0 Ultrasonic Q Pulmonary Artery, Right Z No Qaulifier	
R Pulmonary Artery, Left S Pulmonary Vein, Right	
T Pulmonary Vein, Left	
Stony Brook Medicine INTRAVASCULAR ASSISTED THRO	OMBOLYSIS
0 Medical and Surgical 3 Upper Arteries F Fragmentation	
Approach Body Part Character 4 Character 5 Device Character 6 Qualifier Character	er 7
2 Innoninate Artery 3 Percutaneous 2 No Device 0 Ultrasonic 2 No Quilfier 4 Subclavian Artery, Left	
S Axillary Artery, Right 6 Axillary Artery, Left	
7 Brachial Artery, Right S Brachial Artery, Left 9 Ulnar Artery, Right	
A Ulnar Artery, Left B Radial Artery, Right C Radial Artery, Left	
Y Upper Artery	
Stony Brook Medicine INTRAVASCULAR ASSISTED THRO	DMBOLYSIS
0 Medical and Surgical 4 Lower Arteries F Fragmentation	
Approach Device Character 6 Qualifier Character 5 Device Character 6 Qualifier Character 5 Device Character 6 Qualifier	vacter 7
D Common Iliac Artery, Left E Internal Iliac Artery, Right	
F Internal Iliac Artery, Left H External Iliac Artery, Right J External Iliac Artery, Left	
K Femoral Artery, Right L Femoral Artery, Left M Popliteal Artery, Left N Popliteal Artery, Left	
P Anterior Tibial Artery, Right Q Anterior Tibial Artery, Left	
R Posterior Tibial Artery, Right S Posterior Tibial Artery, Left I Peroneal Artery, Light	
U Peroneal Artery, Left Y Lower Artery	

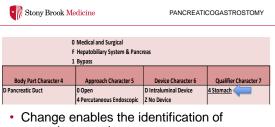




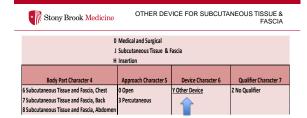
involving placement of a device to augment or reinforce valve function and using a transapical approach.



- Change supports coding for:
 - Brachytherapy procedures where a radioactive element is left in the body at the end of the procedure
 - Insertion of intraosseous infusion device



procedures such as pancreaticogastrostomy performed for the decompression of the pancreatic ductal system.



 Device value Other Device already exists for the subcutaneous tissue and fascia for the head and neck, upper and lower extremities, and trunk.

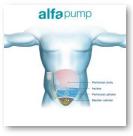


INSERTION OF SUBCUTANEOUS PUMP SYSTEM FOR ASCITES DRAINAGE

- Percutaneous implantation of a new type of pump for ascites drainage
- Implanted subcutaneous device that allows fluid be moved from peritoneal cavity to the urinary bladder
- · System is wireless charged
- One catheter implanted in peritoneal cavity and another in the urinary bladder
- Pump placed in a subcutaneous pocket in the abdomen



INSERTION OF SUBCUTANEOUS PUMP SYSTEM FOR ASCITES DRAINAGE





https://www.alfapump.com/wp-content/uploads/2020/01/torso-pump-catheter-

https://www.allapump.com/wp-content/uploads/2020/01/alla-pump-log

ICD-10 Coordination & Maintenance Committee March 2020 pg. 19



INSERTION OF SUBCUTANEOUS PUMP SYSTEM FOR ASCITES DRAINAGE

- Requires two codes:
 - 0W1G3J6, Bypass peritoneal cavity to bladder with synthetic substitute, percutaneous approach, for the procedure to alter the route of passage of the ascitic fluid from the peritoneal cavity to the bladder.
 - 0JH80YZ, Insertion of other device into abdomen subcutaneous tissue and fascia, open approach, for the insertion of the pump in the abdominal subcutaneous pocket.



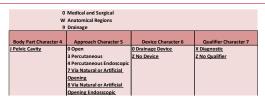
INSERTION OF SUBCUTANEOUS PUMP SYSTEM FOR ASCITES DRAINAGE

0 Medical and Surgical W Anatomical Regions 1 Bypass						
Body Part Character 4	Approach Character 5 Device Character 6 Qualifier Character 7					
,	0 Open 3 Percutaneous 4 Percutaneous Endoscopic	.,	6 Bladder			

 Change will identify the procedures, in which a fully internal route of passage for the fluid from the peritoneal cavity to the bladder is created.



TRANSVAGINAL DRAINAGE OF PELVIS



 Change enables the identification of pelvic drainage performed using a transvaginal approach.



REMOVAL OF EXTERNAL FIXATION DEVICE

0 Medical and Surgical Q Lower Bones P Removal				
Body Part Character 4 0 Lumbar Vertebra	Approach Character 5 0 Open	Device Character 6 5 External Fixation Device	Qualifier Character 7 Z No Qualifier	
	3 Percutaneous 4 Percutaneous Endoscopic X External			

 Change enables the identification of removal of external fixation device from these body parts.



NEW INTERNAL FIXATION DEVICE FOR "SUSTAINED COMPRESSION"

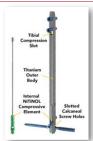
- New Device value (3) for Internal Fixation Device, Sustained Compression added to the following tables:
 ORG Upper Joints, Fusion
 - OSG Lower Joints, Fusion
- Current internal fixation devices used in upper and lower joint fusion procedures include screws, plates, and intramedullary nails offering "passive compression."
- This newer technology applies sustained compression using Nitinol, an alloy of nickel and titanium.
- Nitinol devices can exert a sustained force if they are stretched and prevented from returning to their original shape.



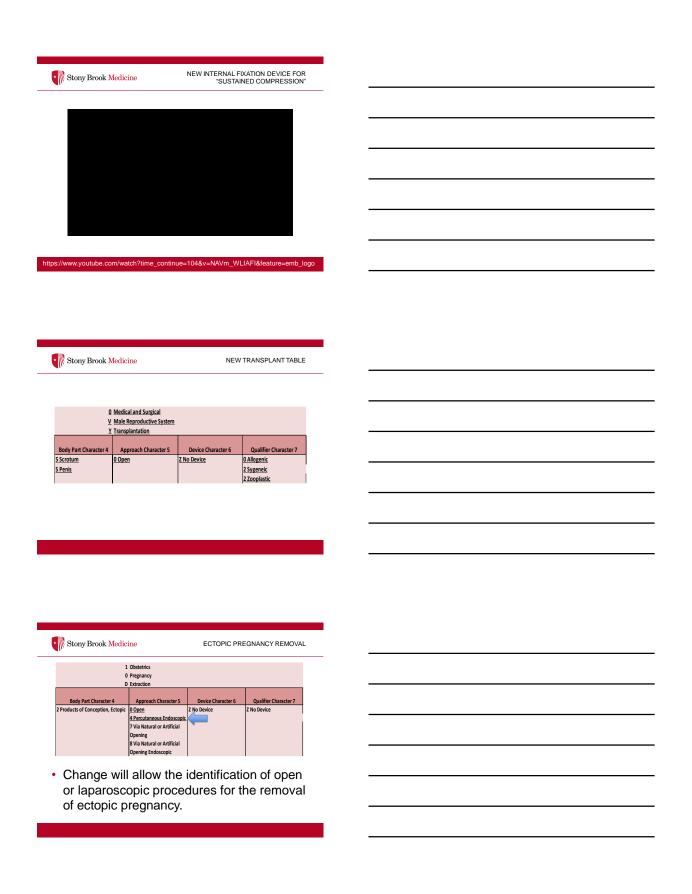
NEW INTERNAL FIXATION DEVICE FOR "SUSTAINED COMPRESSION"

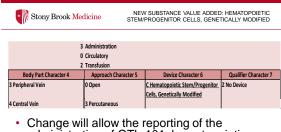


https://www.medshape.com/wp-content/uploads/2018/03/DyneNeil-TT-fusion-dystem-video.jpg

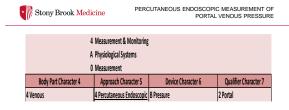


https://www.medshape.com/wp-content/uploads/2018/03/Dynsh

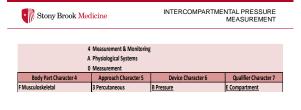




 Change will allow the reporting of the administration of OTL-101, hematopoietic stem cell progenitor cells based gene therapy for treatment of patients with adenosine deaminase severe combined immunodeficiency.



 Change will allow the capture of measurements of venous portal pressure using a percutaneous endoscopic approach.



 Change will allow the identification of percutaneous intercompartmental pressure measurement.



VENTILATORY ASSISTANCE BY HIGH FLOW OR HIGH VELOCITY NASAL CANNULA DEVICES

5 Extracorporeal or Systemic Assistance and Performance A Physiological Systems O Assistance						
Body Part Character 4	Approach Character 5	Approach Character 5 Device Character 6 Qualifier Character 7				
,	3 Less than 24 Consecutive Hours 4 24-96 Consecutive Hours 5 Greater than 96 Consecutive Hours	5 Ventilation	A High Nasal Flow/Velocity			

 Change to identify ventilatory assistance provided by high flow or high velocity nasal cannula devices and allow the reporting of this service for three duration values.



NEAR INFRARED SPECTROSCOPY FOR TISSUE VIABILITY ASSESSMENT

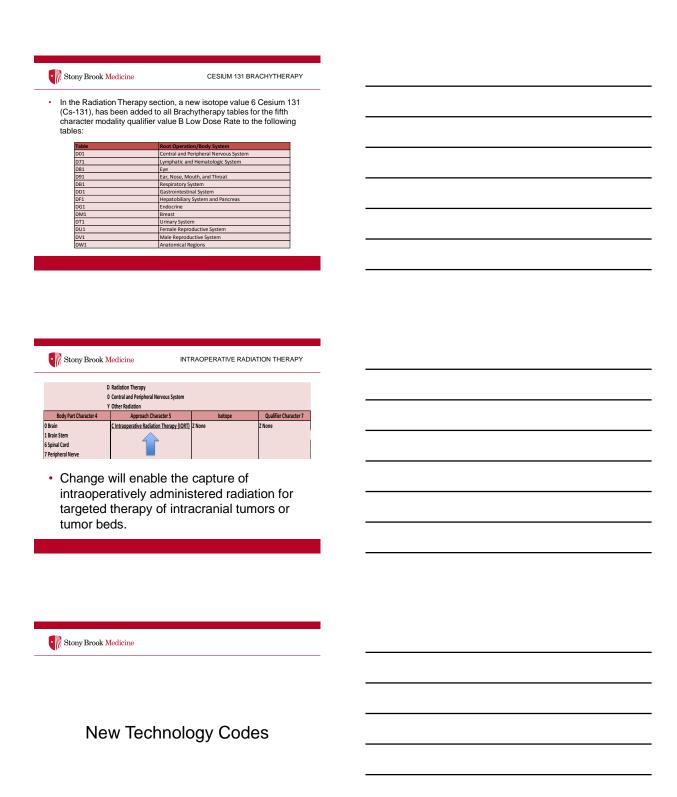
8 Other Procedures					
E Physiological Systems and Anatomical Regions					
	0 Other Procedures				
Body Part Character 4 Approach Character 5 Device Character 6 Qualifier Character 7					
2 Circulatory 3 Percutaneous <u>D Near Infrared Spectroscopy</u> Z No Qualifier					
	X External				

- Change created to describe the utilization of Near Infrared Spectroscopy (NIRS) tissue oxygenation imaging.
- Used to measure or monitor tissue oxygen saturation levels when assessing tissue viability during surgical procedures or during the postoperative management period.



NEW IMAGING TYPE ADDED

- In section B Imaging, a new third-character imaging type "Other Imaging" has been created to classify imaging modalities "not elsewhere classified".
- Created New Tables:
 - BF5 Other Imaging of the Hepatobiliary System and Pancreas
 - o BW5 Other Imaging of Anatomical Regions





INTRODUCTION OF NEW THERAPEUTIC SUBSTANCES

Device/Substance/Technology	Maximum NTAP
Brexanolone (Zulresso)	
Eladocagene Exuparvovec	
Nerinitide	
Durvalumab Antineoplastic (Imfinzi)	\$6,875.90
Lefamulin Anti-Infective (Xenleta)	\$1,275.75
Mineral-based Topical Hemostatic Agent (Hemospray)	\$1,625.00
Ceftolozane/Tazobactam Anti-infective (Zebraxa)	\$1,836.98
Cefiderocol Anti-infective (Fetroja)	\$7,919.86
Omadacycline Anti-infective (Nuzyra)	\$1,552.50
Eculizumab (Soliris)	\$21,199.75
Atezolizumab Antineoplastic (Tecentriq)	\$6,875.90



INTRODUCTION OF NEW THERAPEUTIC

- Brexanolone (ZULRESSO™): Continuous IV infusion for postpartum depression in adults.
 - o XW0[3,4]306
- Eladocagene Exuparvovec: Gene therapy injected directly into the putamen (the large dark lateral part of the basal ganglion within the brain) for Aromatic L-amino acid decarboxylase deficiency.
 - XW0Q316
- Nerinitide: Single intravenous dose to reduce ischemic damage after the onset of acute stroke.
 - o XW0[3,4]326



INTRODUCTION OF NEW THERAPEUTIC

- Durvalumab (IMFINZI®): IV for extensivestage small cell lung cancer.
 - o XW0[3,4]336 NTAP \$6,875.90
- Lefamulin (XENLETATM): An oral or IV antibacterial for adult patients with communityacquired bacterial pneumonia caused by several microorganisms.
 - XW0[3,4,X]366 NTAP \$1,275.75
- **Mineral-based Topical Hemostatic Agent** (Hemospray®): Delivered endoscopically for nonvariceal gastrointestinal bleeding.
 - XW0[G,H]886 NTAP \$1,625



INTRODUCTION OF NEW THERAPEUTIC SUBSTANCES

- Ceftolozane/Tazobactam (ZERBAXA®): IV antibacterial to treat adult patients with complicated intra-abdominal infections (cIAI), complicated urinary tract infections (cUTI), including pyelonephritis, and hospital-acquired bacterial pneumonia and ventilator-associated bacterial pneumonia (HABP/VABP).
 XW0[3,4]396 NTAP \$1,836.98
- Cefiderocol (FETROJA®): IV antibacterial for adult patients with complicated urinary tract infections (cUTI), including pyelonephritis, with limited or no alternative treatment options.
 - o XW0[3,4]3A6 NTAP \$7,919.86



INTRODUCTION OF NEW THERAPEUTIC SUBSTANCES

- Omadacycline (NUZYRA™): IV antibacterial for adult patients with community-acquired bacterial pneumonia or acute bacterial skin and skin structure infections.
 - o XW0[3,4]3B6 NTAP \$1,552.50
- Eculizumab (Soliris®) IV infusion for adults with neuromyelitis optica spectrum disorder, a rare autoimmune disorder of the central nervous system.
 XW0[3,4]3C6 NTAP \$21,999.75
- Atezolizumab (TECENTRIQ®): IV infusion for adult patients with extensive-stage small cell lung cancer,urothelial carcinoma, metastatic non-small cell lung cancer, and breast cancer.
 - o XW0[3,4]3D6 NTAP \$6,875.90



CEREBRAL EMBOLIC FILTRATION EXTRACORPOREAL FLOW REVERSAL CIRCUIT

X New Technology 2 Cardiovascular System				
A	Assistance			
	Approach			
Body Part Character 4	Character 5	Device/Substance Technology Character 6	Qualifier Character 7	
H Common Carotid Artery, Right	3 Percutaneous	3 Cerebral Embolic Filtration, Extracorporeal Flow Reversal Circuit	6 New Technology Group 6	
J Common Carotid Artery, Left				

- A new code has been created at table X2A, Cardiovascular System, Assistance, to describe the use of reverse flow embolic neuroprotection during transcarotid arterial revascularization (TCAR), an intraoperative filtration procedure that utilizes an extracorporeal flow reversal circuit
- A separate code is assigned for the TCAR procedure from table 037, Dilation of Upper Arteries.

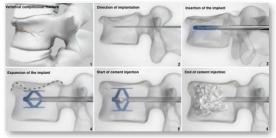


THE SPINEJACK SYSTEM

- The SpineJack® system is an implantable fracture reduction system, which is indicated for use in the reduction of painful osteoporotic vertebral compression fractures (VCFs) and is intended to be used in combination with Stryker VertaPlex and VertaPlex High Viscosity (HV) bone cement.
- The system is designed to be implanted into a collapsed vertebral body (VB) via a percutaneous transpedicular approach under fluoroscopic guidance.
- Once in place, the intravertebral implants are expanded to mechanically restore VB height and maintain the restoration.
- The implants remain within the VB and, together with the delivered bone cement, stabilize the restoration, provide pain relief and improve patient mobility.



THE SPINEJACK SYSTEM



NTAP \$3.654.72 XNUI0.41356

https://globetechcdn.com/hospimedica/images/stories/articles/article_images/2018-10-08/DJB-495.jpg



TRANSFUSION OF CHIMERIC ANTIGEN RECEPTOR (CAR) T CELL IMMUNOTHERAPY

X New Technology W Anatomical Regions 2 Transfusion			
	Approach		
Body Part Character 4	Character 5	Device/Substance Technology Character 6	Qualifier Character 7
3 Peripheral Vein	3 Percutaneous	4 Brexucabtagene Autoleucel Immunotherapy	6 New Technology Group 6
4 Central Vein		7 Lisocabtagene Maraleucel Immunotherapy	

 Unlike prior chimeric antigen receptor (CAR) T-cell therapy products which are classified in table XW0, Anatomical Regions, Introduction.



MEASUREMENT OF INFECTION

X New Technology			
X Physiological Systems			
E Measurement			
	Approach		
Body Part Character 4	Character 5	Device/Substance Technology Character 6	Qualifier Character 7
5 Circulatory	3 Percutaneous	N Infection , Positive Blood Culture Fluorescence	6 New Technology Group 6
		Hybridization for Organism Identification,	
		Concenttration and Susceptibility	
	3 Percutaneous	Q Infection, Lower Respiratory Fluid Necleic Acid-base	6 New Technology Group 6
B Respiratory		Microbial Detection	

- Accelerate PhenoTest™ Blood Culture (BC) Kit
- The BioFire FilmArray Pneumonia panel (performed via BAL)



PREVIOUSLY APPROVED NTAP

	Continued for	
Device/Substance/Technology	FFY 2021	Maximum NTAP
Kymriah/Yescarta	No	
Vyxeos	No	
Vabomere	No	
Remede System	No	
Zemdri	Yes	\$4,083.75
Giapreza	No	
Sentinel Cerebral Protection System	No	
The AquaBeam Aquaablation System	No	
Andexxa	Yes	\$18,281.25
Azedra	Yes	\$98,150.00
Cablivi	Yes	\$33,215.00
Elzonris	Yes	\$125,448.05
Balversa	Yes	\$3,563.23
Erleada	No	
Spravato	Yes	\$1,014.79
Xospata	Yes	\$7,312.50
Jakafi	Yes	\$4,096.21
T2Bacteria Panel	Yes	\$97.50



ELUVIA DRUG ELUTING STENT SYSTEM

- The EluviaTM system is a sustained release drugeluting stent indicated for the treatment of lesions in the femoropopliteal arteries and is designed to restore blood flow in the peripheral arteries above the knee—specifically the superficial femoral artery (SFA) and proximal popliteal artery (PPA).
- NTAP \$3,646.50

Code

Distance of gain formed array with maximed formed drug-relating intralaminal devices.

ST20188 Distance of gain formed stray, with new sources of trace drug-relating intralaminal devices.

ST20188 Section processions or greatery. As Exchanging Georg 3.

ST20188 Section of gain formed stray, with new sources of raises drug-relating intralaminal devices.

ST20188 Section of gain formed stray that new sources of relating from gain devices, processions or greatery. As Technology Georg 3.

ST20188 Section of gain formed stray that for a rown reasonated relating drug-relating intralaminal devices. Proceedings of the formed stray with student devices drug-relating intralaminal devices. Proceedings of the formed stray with student devices drug-relating intralaminal devices, processions or generals. New Technology Georg 3.

ST20188 Distance of the fitnessed stray with flow students of traces drug-relating intralaminal devices, processions or generals. New Technology Georg 3.

ST20188 Distance of the fitnessed stray with flow students of traces drug-relating intralaminal devices, processions or generals. New Technology Georg 3.

ST20188 Distance of the fitnessed stray with flow students of traces drug-relating intralaminal control of the fitnessed stray with flow students of traces drug-relating intralaminal devices, processions or generals. New Technology Georg 3.

ST20188 Distance of promoting drug-predictal stray with two measured strates drug-relating intralaminal devices, processions or generals. New Technology Georg 3.

ST20188 Distance of promoting drug-predictal stray with two measured relations drug-relating intralaminal devices, processions or generals. New Technology Georg 3.

ST20188 Distance of promoting drug-predictal stray with two measured relations drug-relating intralaminal devices, processions or generals. New Technology Georg 3.

ST20188 Distance of promoting drug-predictal stray with two measured relations drug-relating intralaminal devices, processions or generals. New Technology Georg 3.

ST2

https://www.federalregister.gov/documents/2020/09/18/2020-19637/medicare-program-hospital-inpatientprospective-payment-systems-for-acute-care-hospitals-and-the#h-144



CONTACT

- The individual components of ContaCT are currently marketed by Viz.ai, Inc. under the tradenames "Viz LVO" (for the algorithm), "Viz Hub" (for the text messaging and calling platform), and "Viz View" (for the mobile image viewer).
- The applicant asserted that ContaCT analyzes computed tomography angiogram (CTA) images of the brain acquired in the acute setting, sends notifications to a neurovascular specialist(s) that a suspected large vessel occlusion (LVO) has been identified, and recommends review of those images decreasing time to treatment.
- Eligible for NTAP \$1,040 by assigning 4A03XD5



MEASUREMENT OF INTRACRANIAL ARTERIAL FLOW



https://www.viz.ai/solutions/



THE BAROSTIM NEO SYSTEM

- The BAROSTIM NEO® System is indicated for the improvement of symptoms of heart failure for patients who are not eligible for a CRT device.
- The following ICD-10-PCS procedure codes can be used to uniquely identify the BAROSTIM NEO® System:
 - 0JH60MZ (Insertion of stimulator generator into chest subcutaneous tissue and fascia, open approach)
- in combination with
 - 03HK0MZ (Insertion of stimulator lead into right internal carotid artery, open approach)
 - OR 03HL0MZ (Insertion of stimulator lead into left internal carotid artery, open approach)
- NTAP \$22,750



THE BAROSTIM NEO SYSTEM







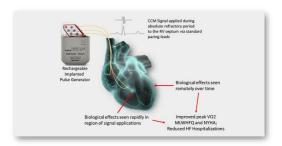
THE OPTIMIZER SYSTEM

- The Optimizer® System is intended for the treatment of chronic heart failure in patients with advanced symptoms that have normal QRS duration and are not indicated for cardiac resynchronization therapy.
- One of the following current ICD-10-PCS codes should be assigned:
 - OJH60AZ (Insertion of contractility modulation device into chest subcutaneous tissue and fascia, open approach),
 OJH63AZ (Insertion of contractility modulation device into chest subcutaneous tissue and fascia, percutaneous approach),

 - OJH80AZ (Insertion of contractility modulation device into abdomen subcutaneous tissue and fascia, open approach) and
 - OJH83AZ (Insertion of contractility modulation device into abdomen subcutaneous tissue and fascia, percutaneous approach)
- NTAP \$14,950

Stony Brook Medicine

THE OPTIMIZER SYSTEM



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Stony Brook Medicine	SECTION X: NEW TECHNOLOGY NEW DEVICES/SUBSTANCES/TECHNOLOGY 2021	
ICD-10-PCS Value	Definition	
Atezolizumab Antineoplastic Brexanolone	TECENTRIQ(R) ZULRESSO(tm)	
	Brexucabtagene Autoleucel	
Cefiderocol Anti-infective	FETROJA(R)	
Ceftolozane/Tazobactam Anti- infective	ZERBAXA(R)	
Durvalumab Antineoplastic	IMFINZI(R)	
Eculizumab Esketamine Hydrochloride	Soliris(R) SPRAVATO(tm)	
Lefamulin Anti-infective	XENLETA(tm)	
Lisocabtagene Maraleucel Immunotherapy	Lisocabtagene Maraleucel	
Mineral-based Topical	Hemospray(R) Endoscopic Hemostat	
Hemostatic Agent Nerinitide	NA-1 (Nerinitide)	
	NUZYRA(tm)	
Synthetic Substitute, Mechanically Expandable	SpineJack(R) system	
Mechanically Expandable (Paired) in New Technology		
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Stony Brook Medicine		
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Stony Proof Medicine	CHIDELINE AND CONVENTIONS	
Stony Brook Medicine	GUIDELINE AND CONVENTIONS	
oot Operations		
-		
B3.10c		
It an interbody fusion	on device is used to	
render the joint imr	nohile (alone or	
	aterial like bone graft or	
	tute), the procedure is	
Done grant Substit	· · · · · · ·	
	ice value Interbody	
Fusion Device	-	
I GOIOII DOVICO		



GUIDELINE AND CONVENTIONS

Root Operations

- New Guideline B3.18: Excision/Resection Followed By Replacement
- If an excision or resection of a body part is followed by a replacement procedure, <u>code</u> <u>both procedures to identify each distinct</u> <u>objective</u>, except when the excision or resection is considered integral and preparatory for the replacement procedure.



GUIDELINE AND CONVENTIONS

Root Operations

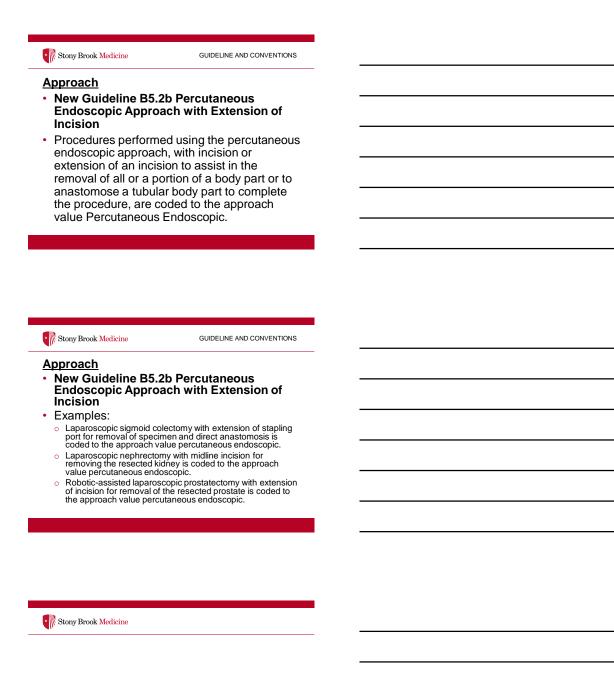
- New Guideline B3.18: Excision/Resection Followed By Replacement
- Examples (code both procedures to identify each distinct objective):
 - Mastectomy followed by reconstruction
 - Maxillectomy with obturator reconstruction
 - o Excisional debridement of tendon with skin graft
 - Esophagectomy followed by reconstruction with colonic interposition



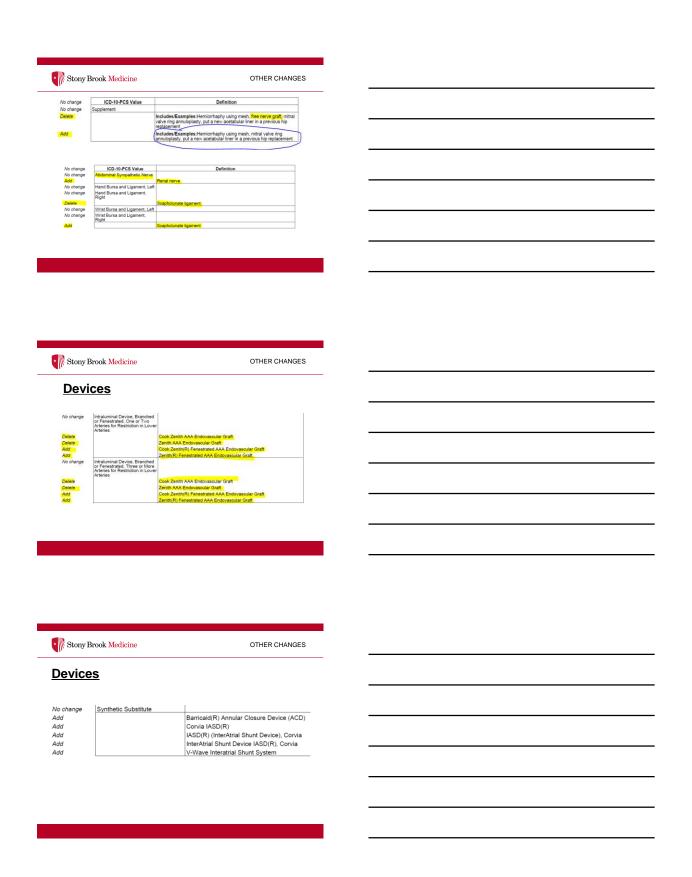
GUIDELINE AND CONVENTIONS

Root Operations

- New Guideline B3.18: Excision/Resection Followed By Replacement
- Examples (except when excision or resection is considered integral and preparatory for the replacement procedure):
 - o Resection of a joint as part of a joint replacement procedure
 - Resection of a valve as part of a valve replacement procedure



Other Changes





DRG Changes



- A new MS-DRG (MS-DRG 018) was created specifically for Chimeric Antigen Receptor (CAR) T-cell immunotherapies.
- This MS-DRG includes cases that report ICD-10-PCS procedure codes:
 - o XW033C3
 - XW043C3
 - o XW23346
 - o XW23376
 - o XW24346
 - o XW24376



CAR T-Cell Therapies		
	FFY 2020	FFY 2021
DRG	MS-DRG 016	MS-DRG 18
	Autologous Bone Marrow Transplant	Chimeric Antigen Receptor (CAR) T-
Description	with CC/MCC or T-cell Immunotherapy	Cell Immunotherapy
Weight	6.8852	37.3290



- MS-DRGs 014, 016, and 017 have been redesignated from surgical to medical MS-DRGs.
- Bone marrow transplant procedure codes have been re-designated from OR to non-OR procedures.

Bone Marrow Transplants		
	FFY 2020	FFY 2021
MS DRG 014	12.7548	12.7788
MS DRG 016	6.8852	6.7262
MS DRG 017	4.4474	4.8302



DRG CHANGES

 Procedures describing dilation of carotid artery with insertion of intraluminal device were reassigned to MS-DRGs 034, 035, and 036 (Carotid Artery Stent Procedures with MCC, with CC, and without CC/MCC, respectively) in order to ensure the consistent classification of similar procedures.



- MS-DRGs 129, 130, 131, 132, 133, and 134 have been deleted and six new MS-DRGs have been created.
- The new MS-DRGs are 140, 141, and 142 (Major Head and Neck Procedures with MCC, with CC, and without CC/MCC, respectively) and MS-DRGs 143, 144, and 145 (Other Ear, Nose, Mouth And Throat OR Procedures with MCC, with CC, and without CC/MCC, respectively).
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 After a comprehensive review of all the procedures currently assigned to MS-DRGs 129, 130, 131, 132, 133, and 134 and an analysis of the cases classified to these MS-DRGs, CMS concluded that a restructuring of these MS-DRGs was appropriate in order to better distinguish the procedures assigned to those MS-DRGs by clinical intensity, complexity of service, and resource utilization.

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DRG CHANGES

Head/Neck/ENT DRGs		
	FFY 2020	FFY 2021
MS DRG 129	2.2893	0
MS DRG 130	1.4456	0
MS DRG 131	2.6893	0
MS DRG 132	1.5895	0
MS DRG 133	2.1469	0
MS DRG 134	1.2091	0
MS DRG 140	0	3.9806
MS DRG 141	0	2.2075
MS DRG 142	0	1.6088
MS DRG 143	0	2.9638
MS DRG 144	0	1.7505
MS DRG 145	0	1.2135

 We went from 3 groups of 2 tiered DRGs to 2 Groups of 3 tiered DRGs



DRG CHANGES

- ICD-10-PCS procedure codes for left atrial appendage closure (LAAC) via an open approach have been reassigned from MS-DRGs 250 and 251 (Percutaneous Cardiovascular Procedures without Coronary Artery Stent with and without MCC, respectively) to MS-DRGs 273 and 274.
- MS-DRGs 273 and 274 have been retitled "Percutaneous and Other Intracardiac Procedures with and without MCC," respectively.



Left Atrial Appendage Closure (LAAC)		
FFY 2020	FFY 2021	
2.5501	NA	
1.6830	NA	
NA	3.8372	
NA	3.2854	
	2.5501 1.6830	



 Twelve clinically invalid code combinations that describe the insertion of contractility modulation device and the insertion of a cardiac lead into the left ventricle were deleted from the GROUPER logic of MS-DRGs 222, 223, 224, 225, 226 and 227 (Cardiac Defibrillator Implant with and without Cardiac Catheterization with and without AMI/HF/Shock with and without MCC, respectively).



DRG CHANGES

- The 24 ICD-10-PCS procedure code combinations describing the insertion of contractility modulation device and the insertion of a cardiac lead into right ventricle or right atrium were added to MS-DRGs 222-227.
- Since the insertion of a rechargeable CCM system always involves placement of a right-sided lead, the code combinations describing the insertion of a rechargeable CCM device and the insertion of left ventricular lead that previously existed in the MS-DRG GROUPER logic are considered clinically invalid procedures.



DRG CHANGES

 New MS-DRGs 521 (Hip Replacement with Principal Diagnosis of Hip Fracture with MCC) and 522 (Hip Replacement with Principal Diagnosis of Hip Fracture without MCC) were created to differentiate cases reporting a total hip replacement procedure with a principal diagnosis of hip fracture from those cases without a hip fracture.



Hip Replacements for Treatment of Fracture			
	FFY 2020	FFY 2021	
MS DRG 469	3.1399	NA	
MS DRG 470	1.9684	NA	
MS DRG 521	NA	3.0634	
MS DRG 522	NA	2.1891	



DRG CHANGES

- The GROUPER logic for MS-DRG 652 (Kidney Transplant) has been modified by allowing the presence of a procedure code describing transplantation of the kidney to determine the MS-DRG assignment independent of the MDC of the principal diagnosis in most instances.
- The two exceptions are that the logic for MDC 24 (Multiple Significant Trauma) and MDC 25 (Human Immunodeficiency Virus Infections) will remain unchanged



- New MS-DRGs 019 (Simultaneous Pancreas/Kidney Transplant with Hemodialysis), 650 (Kidney Transplant with Hemodialysis with MCC), and 651 (Kidney Transplant with Hemodialysis without MCC) have been created for cases describing the performance of hemodialysis during an admission where the patient received a kidney transplant or simultaneous pancreas/kidney transplant.
- ICD-10-PCS procedure codes describing hemodialysis were designated as non-OR procedures affecting the MS-DRG.



Kidney Transplant with Dialysis		
	FFY 2020	FFY 2021
MS DRG 650	NA	4.5131
MS DRG 651	NA	3.6936
MS DRG 652	3.3849	3.1819



DRG CHANGES

 ICD-10-CM diagnosis codes for mechanical complication of vascular access catheter were reassigned from MS-DRGs 314, 315, and 316 (Other Circulatory System Diagnoses with MCC, with CC, and without CC/MCC, respectively) to MS-DRGs 673, 674, and 675 (Other Kidney and Urinary Tract Procedures with MCC, with CC, and without CC/MCC, respectively) and 698, 699, and 700 (Other Kidney and Urinary Tract Diagnoses with MCC, with CC, and without CC/MCC, respectively).



- ICD-10-CM diagnosis codes for diabetes mellitus with diabetic chronic kidney disease in conjunction with a secondary diagnosis of chronic kidney disease, stage 5 or end-stage renal disease were added to the list of principal diagnosis codes in the subset of GROUPER logic in MS-DRGs 673, 674, and 675 that recognizes the insertion of totally implantable vascular access devices or tunneled vascular access devices as an inpatient procedure for the purposes of hemodialysis.
- ID-10-CM codes for kidney transplant complications were also added to the special logic for these MS-DRGs, since these diagnoses are also indications for hemodialysis. ICD-10-CM diagnosis codes I12.9, I13.10, N18.1, N18.2, N18.3, N18.4, and N18.9 were removed from the special logic in MS-DRGs 673, 674, and 675.
 - O Vi) (17, and 07).
 While these codes describe chronic kidney disease, they do not describe renal failure, and thus do not describe indications that would generally require the insertion of a totally implantable vascular access device or tunneled vascular access device for the purposes of hemodialysis.



 Cases involving diagnoses that identify multiple significant trauma combined with internal fixation of joint procedures have been reassigned from MS-DRGs 981, 982, and 983 (Extensive OR Procedure Unrelated to Principal Diagnosis with MCC, with CC, and without CC/MCC, respectively) to MS-DRGs 957, 958, and 959 (Other OR Procedures for Multiple Significant Trauma with MCC, with CC, and without CC/MCC, respectively) in MDC 24 (Multiple Significant Trauma).



DRG CHANGES

- Endoscopic revision of feeding device was redesignated as a non-OR procedure.
- The following procedures were re-designated as OR procedures:
 - o Percutaneous/Endoscopic Biopsy of Mediastinum
 - Introduction of other therapeutic substance into pleural cavity, percutaneous endoscopic approach
 - Percutaneous endoscopic excision and biopsy of stomach
 - Laparoscopic drainage of peritoneum, peritoneal cavity, and gallbladder
 - o Control bleeding in peritoneal cavity, open approach
 - Inspection of penis, open approach



QUESTIONS



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