Fiscal Year 2008
ICD-9-CM Update

Audio Seminar/Webinar
September 18, and September 20, 2007

Practical Tools for Seminar Learning
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Goals

- Review ICD-9-CM maintenance process
- Highlight October 1, 2007 diagnosis and procedure code changes
- Give examples of code use
- Provide further resources

ICD-9-CM Maintenance Cycle

- ICD-9-CM Coordination and Maintenance Committee
  - Joint chair by NCHS and CMS
  - Open public meetings twice per year
  - Proposals and summaries posted online
- Public comment periods following meetings
- Changes published in Federal Register
  - Proposed Rule - May
  - Final Rule - August
- Complete addenda posted
Highlights of ICD-9-CM Diagnosis Code Changes
Summary of Diagnosis Changes

Effective October 1, 2007

• 142 New diagnosis codes, 17 invalidated, 5 revised titles
  • Many additional tabular changes
  • Includes, excludes and other coding notes
• 3 New external cause of injury codes (E codes)
• About 800 index changes
  • Most are new codes added to index
  • Existing entries revised
  • Additions to table of drugs and chemicals
• Important to review entire addenda even though coding software and books may do the updating for you and even flag changes for you
• Important to review for changes in areas other than “your clinical chapter”

Infectious and Parasitic Diseases

• Botulism - Clostridium botulinum toxin
  • Foodborne (existing code 005.1)

• Infant botulism (new code 040.41)
  • Infants <6 months old ingestion of spores

• Wound botulism (new code 040.42)
  • From traumatic injury or deep puncture wound
  • Use additional code for complicated wound
  • Non-foodborne botulism
Infectious and Parasitic Diseases

Changes to botulism codes

Revised:
005 Other food poisoning (bacterial)
   005.1 Botulism food poisoning
       Botulism NOS

New:
040 Other bacterial diseases
   040.4 Other specified botulism
       Non-foodborne intoxication
due to toxins of Clostridium botulinum
       [C. botulinum]
   040.41 Infant botulism
   040.42 Wound botulism
       Non-foodborne botulism NOS

Infectious and Parasitic Diseases

Human herpesvirus infections and encephalitis

058.1x Roseola infantum
   Exanthema subitum (sixth disease)
   Subdivided by that caused by HHV-6 or HHV-7

058.2x Other human herpesvirus encephalitis
   Subdivided by that caused by HHV-6 or HHV-7

058.8x Other human herpesvirus infections
   Subdivided by that caused by HHV-6 or HHV-7
   HHV-8, also known as Kaposi’s sarcoma associated herpesvirus

079.83 Parvovirus B19
   B19 was serum sample in which virus was originally discovered.
   Causes erythema infectiosum (fifth disease)
Neoplasms

Non-Hodgkin’s lymphoma

- More widespread than Hodgkin’s lymphoma
- Lymphocyte (infection fighting WBC) main cell found in lymphoid tissue
- Two types: B cell and T cell
- B cell more common (85% of non-Hodgkin’s lymphomas are B cell)
- Over 30 subtypes of non-Hodgkin’s lymphoma
- Indolent - slow growing, most incurable even with intense chemotherapy and radiation therapy
- Aggressive - rapid growth, curable with chemotherapy
- Very aggressive - grow very rapidly, unless treated rapidly and early they can be life threatening

Neoplasms

54 new lymphoma codes due to common 5th digits for use with this category (for lymph node site)

200 Lymphosarcoma and reticulosarcoma and other specified malignant tumors of lymphatic tissue
New 200.3 Marginal zone lymphoma
New 200.4 Mantle cell lymphoma
New 200.5 Primary central nervous system lymphoma
New 200.6 Anaplastic large cell lymphoma
New 200.7 Large cell lymphoma

202 Other malignant neoplasms of lymphoid and histiocytic tissue
New 202.7 Peripheral T-cell lymphoma
Endocrine, Nutritional and Metabolic Diseases, and Immunity Disorders

Corticoadrenal insufficiency including hypoaldosteronism:
- Decreased function of adrenal cortex
- Results in a glucocorticoid deficiency, includes Addison's disease
- If aldosterone is also affected, hyperkalemia results
- Mineralocorticoid deficiency results in hyponatremia, hyperkalemia, and mild metabolic acidosis

New codes expanding 255.4 Corticoadrenal insufficiency
255.41 Glucocorticoid deficiency
   Addison's disease NOS
255.42 Mineralocorticoid deficiency
   Hypoaldosteronism

Endocrine, Nutritional and Metabolic Diseases, and Immunity Disorders

Multiple endocrine neoplasia [MEN] syndromes
- Genetically distinct familial diseases
- Adenomatous hyperplasia and malignant tumor formation in several endocrine glands

New subcategory and codes:
258.0 Polyglandular activity in multiple endocrine adenomatosis
   258.01 Multiple endocrine neoplasia [MEN] type I
   Wermer's syndrome
   258.02 Multiple endocrine neoplasia [MEN] type IIA
   Sipple's syndrome
   258.03 Multiple endocrine neoplasia [MEN] type IIB

Related new V codes:
V18.11 Multiple endocrine neoplasia [MEN] syndrome
V84.81 Genetic susceptibility to multiple endocrine neoplasia [MEN]
Neurology

- Idiopathic normal pressure hydrocephalus (INPH)
  - Treatable disorder, 2/3 cases of NPH with no known etiology
  - Triad of symptoms:
    - Gait impairment
    - Subcortical dementia
    - Urinary symptoms (urgency and incontinence)
    - Associated with impaired cerebrospinal fluid (CSF) circulation and ventriculomegaly
  - Treat with surgical diversion of CSF (shunt to drain CSF)

New code:
331.5  Idiopathic normal pressure hydrocephalus (INPH)
Normal pressure hydrocephalus NOS

Neurology - Hearing Loss

Speech, Language, Hearing loss

New code: 315.34  Speech and language developmental delay due to hearing loss

Auditory processing disorder:
- Difficult processing auditory information in CNS
- Can be acquired as result of brain tumor, head injury, stroke or other neurological conditions

New code: 388.45  Acquired auditory processing disorder
Auditory processing disorder NOS
Excludes: central auditory processing disorder (315.32)
Neurology - Hearing Loss (cont)

389.0 Conductive hearing loss
New  389.05 Conductive hearing loss, unilateral
New  389.06 Conductive hearing loss, bilateral

389.1 Sensorineural hearing loss
New  389.13 Neural hearing loss, unilateral
Revised  389.14 Central hearing loss
New  389.17 Sensory hearing loss, unilateral
Revised  389.18 Sensorineural hearing loss bilateral

389.2 Mixed conductive and sensorineural hearing loss
New  389.20 Mixed hearing loss, unspecified
New  389.21 Mixed hearing loss, unilateral
New  389.22 Mixed hearing loss, bilateral
Revised  389.7 Deaf, nonspeaking, not elsewhere classifiable
The term deaf mutism, though outdated terminology, remains indexed to this code

Related new V codes:
V49.85 Dual sensory impairment
Blindness with deafness

A unique combination of two sensory losses that creates a severe communication and learning condition
V72.12 Encounter for hearing conservation and treatment
**Neurology - Myotonic Disorders**

- Myotonia - very slow relaxation of muscle after it contracts
- Myotonic muscular dystrophy (Steinart disease)
  - 2nd most common muscular dystrophy in North America
  - A leading cause of myotonia
  - More severe, chronic progressive compared with myotonic congenita

359.2 Myotonic disorders
New codes:
- 359.21 Myotonic muscular dystrophy
- 359.22 Myotonia congenita
- 359.23 Myotonic chondrodystrophy
- 359.24 Drug-induced myotonia
  - Use additional E code to identify drug
- 359.29 Other specified myotonic disorder

**Neurology - Floppy Iris Syndrome**

- Intraoperative complication in cataract surgery in patients taking alpha-blockers (usually given for urinary retention in BPH)
- Iris does not stay properly dilated, but instead may flap or billow.
- Potential injury to the iris or other complications
- Can occur as long as 5 years after discontinuing medication
- Important to let surgeon know of history of taking these meds
- Surgeon can plan to use stronger dilating meds or pupil expansion devices if made aware of this medication history

New code 364.81 Floppy iris syndrome
  - Intraoperative floppy iris syndrome (IFIS)
  - Use additional E code to identify cause, such as: sympatholytics [antiadrenergics] causing adverse effect in therapeutic use (E941.3)

New code 364.89 Other disorders of iris and ciliary body
Case Study

Q: During a nuclear cataract phacoemulsification procedure the surgeon noted a floppy iris which began to prolapse with loss of rigidity. High retention viscoelastic agents were used to restrain the iris. When questioned after surgery, the patient related use of an alpha-1 blocker for the past year for urinary retention due to benign prostatic hypertrophy. This information confirmed the surgeon’s diagnosis of intraoperative floppy iris syndrome (IFIS) related to alpha-1 blocker medication. What are the appropriate diagnosis code assignments?

A: Assign code 366.16, Nuclear sclerosis, as the first-listed diagnosis. Assign 364.81, Intraoperative floppy iris syndrome, V58.69, Long-term (current) use of other medications, and E941.3, Adverse effects in therapeutic use, Sympatholytics [antiadrenergics], as additional codes. You can also assign code 600.01, Hypertrophy (benign) of prostate with urinary obstruction and other lower urinary tract symptoms (LUTS) for the BPH with urinary retention and code 788.20, Retention of urine, unspecified.

[Note: Code 364.81 is excluded from category 996, Complications peculiar to certain specified procedures]
Cardiovascular – Chronic total occlusion

Coronary:
- Complete blockage of coronary artery present for an extended duration
- Increased risk of MI
- Can be treated with angioplasty or drug eluting stent

Extremity:
- Occlusion develops over long period of time
- Intermittent claudication at first then eventual rest pain as it worsens
- Typically composed of hard fibrotic proximal cap, which may be calcified
- Treated with anticoagulants, thrombolytics, sometimes surgically (thrombectomy, angioplasty or bypass surgery)

Cardiovascular – Chronic total occlusion (cont)

New 414.2 Chronic total occlusion of coronary artery
- Complete occlusion of coronary artery
- Total occlusion of coronary artery
- Code first coronary atherosclerosis (414.00-414.07)

Excludes: acute coronary occlusion with myocardial infarction
(410.00-410.92)
acute coronary occlusion without myocardial infarction
(411.81)

New 440.4 Chronic total occlusion of artery of the extremities
- Complete occlusion of artery of the extremities
- Total occlusion of artery of the extremities
- Code first atherosclerosis of arteries of the extremities
(440.20-440.29, 440.30-440.32)

Excludes: acute occlusion of artery of extremity (444.21-444.22)
Cardiovascular – Septic embolism

Two types:

**Pulmonary**
- Originates from localized infection
- Embolic material travels through venous system
- Travels to pulmonary arterial system and lodges
- May cause subsequent lung abscess or necrotizing pneumonia

**Arterial**
- Originates from infection in heart or lungs
- Travels through systemic arterial system
- Lodges in small vessels anywhere (brain, retina, digits, etc)

Cardiovascular – Septic embolism (cont)

New codes:

415.12 Septic pulmonary embolism  
Septic embolism NOS  
Code first underlying infection, such as:  
septicemia (038.0-038.9)  
Excludes: septic arterial embolism (449)

449 Septic arterial embolism  
Code first underlying infection, such as:  
infective endocarditis (421.0)  
lung abscess (513.0)  
Use additional code to identify the site of the embolism  
(433.0-433.9, 444.0-444.9)  
Excludes: septic pulmonary embolism (415.12)
Case Study

Q: Patient is admitted with dyspnea, fever, and cough with blood-tinged sputum. Following diagnostic testing the physician records acute URI with pulmonary septic emboli as the principal diagnosis. He also documents that sputum cultures isolated necrobacillosis. What are the diagnosis code assignments for the admission?

A: Assign code 465.8, Acute upper respiratory infections of other multiple sites, as principal diagnosis. Assign additional diagnosis codes 415.12, Septic pulmonary embolism, and 040.3, Other bacterial diseases, Necrobacillosis

Respiratory - Avian influenza

Pneumonia and Influenza (480 - 488)

488 Influenza due to identified avian influenza virus
   Note: Influenza caused by influenza viruses that normally infect only birds and, less commonly, other animals
   Excludes: influenza caused by other influenza viruses (487)

- Code only confirmed cases of avian influenza based on the provider’s diagnostic statement of the patient having avian influenza
- If “suspected”, “possible” or “probable” is used with this diagnosis code 488 should NOT be assigned (like the HIV coding guidelines)
- As of the date of this seminar there have been no confirmed cases of avian influenza in the United States

CDC avian influenza website: http://www.cdc.gov/flu/avian/ provides continued updates on this disease.
Digestive System -  
Anal sphincter tear

565  Anal fissure and fistula  
   565.0  Anal fissure  
       Excludes:  anal sphincter tear (healed) (non-traumatic)(old)(569.43)

569  Other disorders of intestine  
   569.4  Other specified disorders of rectum and anus  
   569.43  Anal sphincter tear (healed) (old)  
       Tear of anus, nontraumatic  
       Use additional code for any associated fecal incontinence (787.6)  
       Excludes:  anal fissure (565.0)  
       anal sphincter tear (healed) (old) complicating delivery (654.8)

Pregnancy, Childbirth, and The Puerperium

654  Abnormality of organs and soft tissues of pelvis  
   Excludes: trauma to perineum and vulva complicating current delivery (664.0-664.9)  
   654.8  Congenital or acquired abnormality of vulva  
       Anal sphincter tear (healed) (old) complicating delivery  
       Excludes:  anal sphincter tear (healed) (old) not associated with delivery (569.43)

664  Trauma to perineum and vulva during delivery  
   664.2  Third-degree perineal laceration  
       Excludes:  anal sphincter tear during delivery not associated with third-degree perineal laceration (664.6)

New  664.6  Anal sphincter tear complicating delivery, not associated with third-degree perineal laceration  
       Excludes:  third-degree perineal laceration (664.2)  
       Valid 5th digits:  [0,1,4]
**Intraepithelia Neoplasia**

Vaginal intraepithelial neoplasia (VAIN)
Vulvar intraepithelial neoplasia (VIN)
  • Mild dysplasia (type I)
  • Moderate dysplasia (type II)
  • Severe dysplasia (type III) – carcinoma in situ

New codes:
623.0 Dysplasia of vagina
  Vaginal intraepithelial neoplasia I and II [VAIN I and II]
624.01 Vulvar intraepithelial neoplasia I [VIN I]
624.02 Vulvar intraepithelial neoplasia II [VIN II]

233.31 [Carcinoma in situ of] Vagina (VAIN III)
233.32 [Carcinoma in situ of] Vulva (VIN III)

**Musculoskeletal System**

**Osteonecrosis of jaw**

• Aseptic necrosis of bone
• Suspected increase in the incidence of bisphosphonate related is being studied
  • Bisphosphonates used to treat osteoporosis as well as cancer
• American Association of Oral and Maxillofacial Surgeons’ case definition
  “Any patient who has not received radiation therapy to the oral cavity or neck, and who has exposed bone in the maxillofacial area that occurred spontaneously or following dental surgery and has no evidence of healing for more than 3-6 weeks after appropriate care.”
Musculoskeletal System

733 Other disorders of bone and cartilage
    733.4 Aseptic necrosis of bone
        733.45 Jaw
            Use additional E code to identify
drug, if drug-induced
            Excludes: osteoradionecrosis of jaw (526.89)

Related New E codes:

E933 Primarily systemic agents causing adverse effects in
    therapeutic use
    E933.6 Oral bisphosphonates
    E933.7 Intravenous bisphosphonates

Signs and Symptoms

Dysphagia - disorder of swallowing
    Swallowing occurs in dynamic phases with symptoms varying
    significantly depending on affected phase

787 Symptoms involving digestive system
    787.2 Dysphagia
        Code first, if applicable, dysphagia due to late effect of
cerebrovascular accident (438.82)
    787.20 Dysphagia, unspecified
        Difficulty in swallowing NOS
    787.21 Dysphagia, oral phase
    787.22 Dysphagia, oropharyngeal phase
    787.23 Dysphagia, pharyngeal phase
    787.24 Dysphagia, pharyngoesophageal phase
    787.29 Other dysphagia
        Cervical dysphagia
        Neurogenic dysphagia
**Signs and Symptoms (cont)**

**Malignant ascites:**
- Previously defaulted to secondary malignancy code (197.6, secondary malignant neoplasm of retroperitoneum and peritoneum)
- Can also be due to other malignancies such as primary ovarian malignancy

**New codes:**

789.51 Malignant ascites
    Code first malignancy, such as:
    - malignant neoplasm of ovary (183.0)
    - secondary malignant neoplasm of retroperitoneum and peritoneum (197.6)

789.59 Other ascites

**Injury and Poisoning**

996 Complications peculiar to certain specified procedures

- **Excludes:** endosseous dental implant failures (525.71 - 525.79)
  - Intraoperative floppy iris syndrome (IFIS) (364.81)

996.6 Infection and inflammatory reaction due to internal prosthetic device, implant, and graft

- **Excludes:**
  - infection due to:
    - central venous catheter (999.31)
    - Hickman catheter (999.31)
    - peripherally inserted central catheter (PICC) (999.31)
    - triple lumen catheter (999.31)
Injury And Poisoning (cont.)

999 Complications of medical care, not elsewhere classified
999.3 Other infection
   Use additional code to identify the specified infection, such as: septicemia (038.0-038.9)
999.31 Infection due to central venous catheter
   Catheter-related bloodstream infection (CRBSI)
   Infection due to:
      Hickman catheter
      Peripherally inserted central catheter (PICC)
      Triple lumen catheter
   Excludes: infection due to:
      arterial catheter (996.62)
      catheter NOS (996.69)
      peripheral venous catheter (996.62)
      urinary catheter (996.64)
999.39 Infection following other infusion, injection, transfusion, or vaccination

V Codes

V12 Personal history of certain other diseases

V12.5 Diseases of circulatory system

V12.53 Sudden cardiac arrest
   Sudden cardiac death successfully resuscitated
V12.54 Transient ischemic attack (TIA), and cerebral infarction without residual deficits
V Codes (cont)

V17 Family history of certain chronic disabling diseases

V17.4 Other cardiovascular diseases

V17.41 Family history of sudden cardiac death (SCD) family history of myocardial infarction (V17.3)
V17.49 Family history of other cardiovascular diseases

V codes (cont) - Encounter Related to Reproduction and Development

V25 Encounter for contraceptive management
V25.0 General counseling and advice
New V25.04 Counseling and instruction in natural family planning to avoid pregnancy

V26 Procreative management
V26.4 General counseling and advice

New V26.41 Procreative counseling and advice using natural family planning
New V26.49 Other procreative management counseling and advice
**V codes (cont) - Encounter Related to Reproduction and Development**

V26  Procreative management
   V26.8  Other specified procreative management
      V26.81  Encounter for assisted reproductive fertility procedure cycle
      Patient undergoing in vitro fertilization cycle
      Use additional code to identify the type of infertility
      Excludes: pre-cycle diagnosis and testing – code to reason for encounter
      V26.89  Other specified procreative management

**Case Study**

**Q:** A woman presents for an IVF implant procedure. The diagnosis reads “IVF for infertility due to anovulation”. How do you code the diagnosis for this encounter?

**A:** Assign V26.81, Encounter for assisted reproductive fertility procedure cycle as the first listed diagnosis. Assign 628.0, Infertility associated with anovulation as an additional diagnosis code to show the reason for the infertility.
**V codes (cont) - Other**

**V68 Encounters for administrative purposes**
- **V68.0** Issue of medical certificates
- **V68.01** Disability examination
  - Use additional code(s) to identify:
    - specific examination(s),
    - screening and testing performed (V72.0-V82.9)
- **V68.09** Other issue of medical certificates

**V73.81** Special screening examination for human papillomavirus (HPV)

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**E Codes and the Federal Register**

Frequently asked question:

**Q:** Why don’t new and revised E codes appear in the *Federal Register* proposed or final rules?

**A:** The *Federal Register* proposed and final rule contains information related to the Inpatient Prospective Payment System (IPPS) changes for the coming year. Since E codes are not used in the IPPS they are not published in the *Federal Register*. They always appear in the diagnosis addenda (tabular and index changes) each year. Comments regarding these codes and all other proposed changes to ICD-9-CM can be made during the open comment period following an ICD-9-CM Coordination and Maintenance Committee meeting.

This is a good reason to check the full addenda, posted on the NCHS web site, in addition to the new and revised code lists in the *Federal Register*. 
E Codes - 3 New in 2007

E933 Primarily systemic agents
   E933.6 Oral bisphosphonates
   E933.7 Intravenous bisphosphonates

E928 Other and unspecified environmental and accidental causes
   E928.6 Environmental exposure to harmful algae and toxins
       Algae bloom NOS
       Blue-green algae bloom
       Brown tide
       Cyanobacteria bloom
       Florida red tide
       Harmful algae bloom
       Pfisteria piscicida
       Red tide

Other Coding Changes

Tabular
284.8 Other specified aplastic anemias
   New codes 284.81 Red cell aplasia (acquired) (adult) (with thymoma)
               Red cell aplasia NOS
   284.89 Other specified aplastic anemias

288.6 Elevated white blood cell count
   New code 288.66 Bandemia

423 Other diseases of pericardium
   New code 423.3 Cardiac tamponade
       Code first the underlying cause
Other Coding Changes

Tabular (cont)

525 Other diseases and conditions of the teeth and supporting structures
525.7 Endosseous dental implant failure

New codes

525.71 Osseointegration failure of dental implant
525.72 Post-osseointegration biological failure of dental implant
525.73 Post-osseointegration mechanical failure of dental implant
525.79 Other endosseous dental implant failure

780 General symptoms
780.3 Convulsions
780.39 Other convulsions

Add Seizure NOS

Check index addenda for more changes

Other Coding Changes

Index

- Atony of uterus without hemorrhage 661.2x, Other and unspecified uterine inertia [0,1,3]
  - This is for intrapartum atony w/o hemorrhage only
- Atony of uterus with hemorrhage 666.1x, Other immediate postpartum hemorrhage [0,2,4]
  - Both intrapartum or postpartum atony with hemorrhage go here
- Postpartum atony of uterus without hemorrhage 669.8x, Other complications of labor and delivery [0-4]
- Seizure(s) 780.39
  - recurrent 345.9X
  - repetitive 780.39
Resources/References

- NCHS Classification of Diseases and Functioning & Disability web site includes Diagnosis (Volumes 1 & 2) addenda: http://www.cdc.gov/nchs/icd9.htm
- ICD-9-CM Coordination and Maintenance Committee http://www.cdc.gov/nchs/about/otheract/icd9/maint/maint.htm

Volume 3, Procedures

New and Revised Procedure Codes
DRG Changes
Procedure Code Changes FY 2008

39 New Procedure Codes

15 Revised Procedure Codes

4 Deleted Procedure Codes

Changes effective October 1, 2007

Blood Brain Barrier

What is it????

The lining of the small blood vessels in the brain which prevents many substances such as toxins or drugs from entering the brain
Disruption of the blood brain barrier

• Intent of the procedure is to increase the delivery of drugs to the brain for effective treatment of primary and metastatic brain tumors
• A catheter is placed in the femoral artery and advanced to the carotid or vertebral artery. A solution of mannitol is then administered into the artery which opens the BBB allowing the chemotherapy to be infused into this same artery. After a few hours, the BBB closes again

New code
• 00.19 Disruption of blood brain barrier via infusion [BBBD]

Code also chemotherapy (99.25)

Excludes: other perfusion (39.97)
Intra-operative Neurophysiologic Monitoring (IOM)

- Where is it used?
  - complex spinal surgeries (to protect the spinal cord and nerve roots)
  - carotid endarterectomy
  - surgery for intracranial and aortic aneurysms or dissections
  - in surgeries involving tumors near critical nerves or brain structures, such as acoustic neuromas or parotid tumors

Intra-operative Neurophysiologic Monitoring (IOM) cont

IOM uses various modalities to assess the integrity of critical neural structures:

- EEG, Somatosensory evoked potentials (SSEP), Brainstem auditory evoked potentials, EMG, Nerve conduction studies, Motor evoked potentials (MEP), Transcranial Doppler
Intra-operative Neurophysiologic Monitoring (IOM) cont

† New code

00.94 Intra-operative neurophysiologic monitoring
Includes: Cranial nerve, peripheral nerve and spinal cord testing performed intra-operatively
  Intra-operative neurophysiologic testing
  IOM
  Nerve monitoring
  Neuromonitoring

Excludes: brain temperature monitoring (01.17)
  intracranial oxygen monitoring (01.16)
  intracranial pressure monitoring (01.10)
  plethysmogram (89.58)

Intracranial Monitoring

† Used in the management of traumatic brain injury, cerebrovascular injury and other brain disorders that produce increased intracranial pressure with subsequent decrease in brain tissue oxygenation levels
Intracranial Monitoring Codes

01.10  Intracranial pressure monitoring
01.16  Intracranial oxygen monitoring
01.17  Brain temperature monitoring
  Includes: insertion of catheter or probe for monitoring

Previously identified by procedure code 01.18, Other diagnostic procedures on brain and cerebral meninges

Operations on Other Endocrine Glands

- **Thymus**: A lymphoid organ situated in the center of the upper chest just behind the sternum (breastbone)
  - epithelial cells
  - lymphocytic cells

- **Thymoma**: a neoplasm of the thymus
  - benign
  - malignant
Excision of Thymus

- New codes
  07.83 Thoracoscopic partial excision of thymus
    Excludes: other partial excision of thymus (07.81)

  07.84 Thoracoscopic total excision of thymus
    Excludes: other total excision of thymus (07.82)

Incision of Thymus

- New codes
  07.95 Thoracoscopic incision of thymus
    Excludes: other incision of thymus (07.92)

  07.98 Other and unspecified thoracoscopic operations on thymus
Excision of Lung

- **New code**
  
  **32.20** Thoracoscopic excision of lesion or tissue of lung
  
  Thoracoscopic wedge resection

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**Thoracoscopic Lung Procedures cont**

- **Created new subcategory**
  
  **32.3** Segmental resection of lung
  
  Partial lobectomy

- **New codes**
  
  **32.30** Thoracoscopic segmental resection of lung
  
  **32.39** Other and unspecified segmental resection of lung
  
  Excludes: thoracoscopic segmental resection of lung (32.30)
Thoracoscopic Lung Procedures cont

- Created new subcategory
  32.4 Lobectomy of lung
  Lobectomy with segmental resection of adjacent lobes of lung

  Excludes: that with radical dissection [excision] of thoracic structures (32.6)

- New codes
  32.41 Thoracoscopic lobectomy of lung

  32.49 Other lobectomy of lung
  Excludes: thoracoscopic lobectomy of lung (32.41)

Thoracoscopic Lung Procedures cont

- Revised title and created new subcategory
  32.5 Pneumonectomy
  Excision of lung NOS
  Pneumonectomy (with mediastinal dissection)

- New codes
  32.50 Thoracoscopic pneumonectomy

  32.59 Other and unspecified pneumonectomy
  Excludes: thoracoscopic pneumonectomy (32.50)
**Other Operations on Lung**

- **New code**
  
  33.20  Thoracoscopic lung biopsy
  
  Excludes:  
  
  closed endoscopic biopsy of lung (33.27)
  
  closed [percutaneous] [needle] biopsy of lung (33.26)
  
  open biopsy of lung (33.28)

**Operations on Chest Wall, Pleura, Mediastinum and Diaphragm**

- **New codes**
  
  34.06  Thoracoscopic drainage of pleural cavity
  
  Evacuation of empyema
  
  34.20  Thoracoscopic pleural biopsy
  
  34.52  Thoracoscopic decortication of lung
Liver Biopsy

- New codes
  50.13 Transjugular liver biopsy
    Transvenous liver biopsy
    Excludes: closed (percutaneous) [needle] biopsy of liver (50.11)
    laparoscopic liver biopsy (50.14)

  50.14 Laparoscopic liver biopsy
    Excludes: closed (percutaneous) [needle] biopsy of liver (50.11)
    open biopsy of liver (50.12)
    transjugular liver biopsy (50.13)

Female Pelvic Prolapse Repair

- New codes
  70.53 Repair of cystocele and rectocele with graft or prosthesis
  70.54 Repair of cystocele with graft or prosthesis
    Anterior colporrhaphy (with urethrocele repair)
  70.55 Repair of rectocele with graft or prosthesis

  Posterior colporrhaphy
  Use additional code for biological substance (70.94) or synthetic substance (70.95), if known
Vaginal Construction and Reconstruction

♦ New codes
70.63 Vaginal construction with graft or prosthesis
   Excludes: vaginal construction (70.61)

70.64 Vaginal reconstruction with graft or prosthesis
   Excludes: vaginal reconstruction (70.62)

Use additional code for biological substance (70.94) or synthetic substance (70.95), if known

Other Repair of Vagina

♦ New codes
70.78 Vaginal suspension and fixation with graft or prosthesis
Other Operations on Vagina and Cul-de-sac

- **New codes**
  70.93 Other operations on cul-de-sac with graft or prosthesis
  Repair of vaginal enterocele with graft or prosthesis
  Use additional code for biological substance (70.94) or synthetic substance (70.95), if known
  70.94 Insertion of biological graft
  70.95 Insertion of synthetic graft or prosthesis
  Artificial tissue

Spinal Motion Preservation Procedures

- **New codes:**
  84.80 Insertion or replacement of interspinous process device(s)
  84.81 Revision of interspinous process device(s)
  84.82 Insertion or replacement of pedicle-based dynamic stabilization device(s)
  84.83 Revision of pedicle-based dynamic stabilization device(s)
  84.84 Insertion or replacement of facet replacement device(s)
  84.85 Revision of facet replacement device(s)
Spinal Motion Preservation Procedures (cont)

- Prior to the creation of new codes, several of the procedures were captured under 84.59, Insertion of other spinal devices.
- Subcategory 84.8 includes any synchronous facetectomy (partial or total) performed at the same level.
- Code also any synchronous surgical decompression (foraminotomy, laminectomy, or laminotomy) if performed, code 03.09, Other exploration and decompression of spinal canal.

Spinal Motion Preservation Procedures (cont)

- Motion preservation technologies placed in the posterior column of the spine include:
  - Interspinous process devices
  - Pedicle based dynamic stabilization devices
  - Facet replacement devices
  - Intervertebral disc replacements, and disc repair systems (These technologies remain with existing codes 84.60-84.69, Replacement of spinal disc)
Intra-Operative Fluorescence Vascular Angiography

- Also called intraoperative laser arteriogram or SPY™ angiography.
- Imaging technology allows real time evaluation of coronary vasculature and cardiac chambers during CABG.
- Dye injected into the bloodstream. Fluorescence captured on video camera and LCD monitor displays images during operation.

Intra-Operative Electron Radiation Therapy

- New code: 92.41 Intra-operative electron radiation therapy.
- Delivers intensive electron radiation therapy during a surgical procedure using a mobile device.
- Applied directly to the cancer tumor or tumor bed while normal tissues are displaced or protected.
**Significant Addenda Changes**

- Deletion of “replacement” in code titles for 00.74-00.77
- Code also note under 03.09 (this note goes along with the new codes for posterior spinal motion preservation devices)
- Inclusion term for fine needle aspiration of lung and transthoracic needle biopsy of lung under 33.26
- Revision of code title for 39.8 (includes insertion of carotid sinus baroreflex activation device)

**Significant Addenda Changes (cont)**

- Inclusion term for STARR procedure under 48.74
- Addition of “graft” to code titles for 53.41-53.69
- Modified notes under category 54 so that this category no longer excludes operations on the female pelvic cavity
- Inclusion term under 80.0 for removal of posterior spinal motion preservation device
Significant Addenda Changes (cont)

- Notes under 81.0 and 81.3 to code also excision of harvested bone for graft
- Inclusion term for removal of carotid sinus baroreflex activation device under 86.05
- New index entry for robotic assisted surgery

Resources

- Federal Register, August 22, 2007
  http://www.cms.hhs.gov/AcuteInpatientPPS

  http://www.cms.hhs.gov/ICD9ProviderDiagnosticCodes

- ICD-9-CM Coordination and Maintenance Committee Meeting, September 28-29, 2006

- ICD-9-CM Coordination and Maintenance Committee Meeting, March 22-23, 2007
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