

FY09 ICD-9-CM Diagnosis Code Updates

Audio Seminar/Webinar
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Practical Tools for Seminar Learning

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Goals

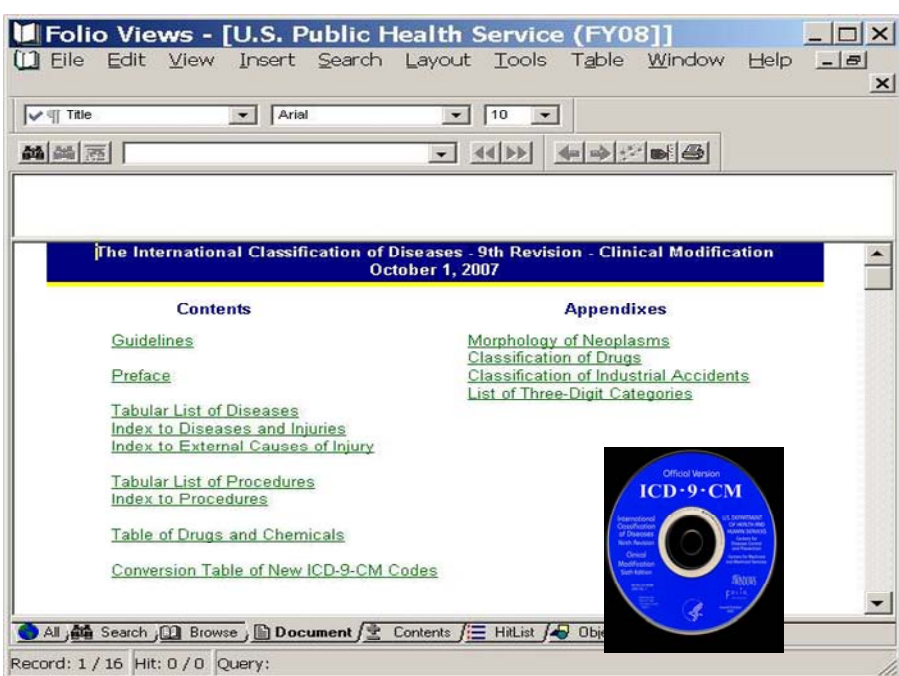
- ◆ **Review ICD-9-CM maintenance process**
- ◆ **Highlight October 1, 2008 diagnosis code changes**
- ◆ **Give examples of code use**
- ◆ **Provide further resources**

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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 – April 30, 2008
 - Final Rule – August 8, 2008
- ◆ **Complete addenda posted – see references at end**

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<http://bookstore.gpo.gov/>

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Highlights of October 1, 2008 (FY09) ICD-9-CM Diagnosis Code Changes



Summary of Diagnosis Changes

Effective October 1, 2008

- ♦ **367 New diagnosis codes, 25 invalidated, 61 revised titles**
 - Many additional tabular changes
 - Includes, excludes and other coding notes
- ♦ **7 New external cause of injury codes (E codes)**
- ♦ **Estimated 1500+ index changes**
 - Most are new codes added to the index
 - Existing entries revised especially for 5th digit expansions
 - Requests to add or revise existing index entries
 - Additions to Table of Drugs and Chemicals
- ♦ **Important: Review all addenda documents**
 - Though coding software and books may do the updating for you and even flag changes for you
 - Know what has changed
 - Important to review changes other than in “your clinical chapter”

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Infectious and Parasitic Diseases

MRSA: Methicillin Resistant Staphylococcus Aureus

Background:

- ♦ **Resistant to all currently available β -lactam antibiotics (penicillin's, cephalosporin's)**
- ♦ **Potential to cause severe/invasive infections**
- ♦ **Transmission: Direct contact**
- ♦ **Accounts for majority of *S. aureus* infections in healthcare settings**
- ♦ **Common cause of skin infections**

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Infectious and Parasitic Diseases

MRSA: Methicillin Resistant Staphylococcus Aureus

Background (cont.):

- ♦ **Associated with increased morbidity, mortality, and healthcare costs compared to MSSA (Methicillin susceptible Staphylococcus aureus)**
- ♦ **Codes needed to do better disease surveillance and tracking**
- ♦ **Needed to create codes which linked the *S. aureus* organism to a clinical syndrome**
 - **MRSA septicemia**
 - **Bacterial infection due to MRSA**
 - **MRSA pneumonia**

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Infectious and Parasitic Diseases

New codes for MRSA in many chapters:

- **Chapter 1: 038.1x Septicemia
041.1 Bacterial infection**
- **Chapter 8: 482.4x Pneumonia due to Staph**
- **V codes: V02.5x Carrier status
V12.04 History of MRSA**

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Infectious and Parasitic Diseases

Follow coding instructional notes and guidelines:

- ♦ **MRSA septicemia –**
 - Assign code 038.12, MRSA septicemia
 - Follow septicemia/SIRS guidelines
 - Do not additionally assign code 041.12
- ♦ **Bacterial infection due to MRSA -**
 - Assign a code for disease or site (such as skin infection, UTI)
 - Use 041.12 as a secondary code
- ♦ **MRSA pneumonia –**
 - Assign code 482.42, MRSA pneumonia
 - Do not additionally assign code 041.12

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Infectious and Parasitic Diseases

MRSA coding (cont.)

- ♦ **V09.0 Infection with drug resistant microorganisms no longer used MRSA**
- ♦ **Carrier status – V02.5x**
 - Used for MRSA/MSSA colonization, MRSA or MSSA “screen positive”
 - Can be used in addition to infection if diagnosis is both colonization and infection
- ♦ **History of MRSA – V12.04**

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Infectious and Parasitic Diseases

Coding Example

Code the following diagnosis:

Pneumonia due to MRSA

Answer:

Assign code 482.42 Methicillin resistant pneumonia due to Staphylococcus aureus

[NOTE: Do not assign separate code 041.12]

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Infectious and Parasitic Diseases

- ◆ **Jakob-Creutzfeldt disease**
 - **Expanded code 046.1**
 - **New code 046.11, Variant CJD (vCJD)**
- ◆ **Many new codes for other specified prion diseases of central nervous system (subcategory 046.7)**

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Infectious and Parasitic Diseases

- ♦ **Cowpox and paravaccinia – category 051 expanded and new category 059**
 - Grouped into 5 genre:
 - Orthopoxviruses – 059.0x
 - Parapoxviruses – 059.1x
 - Molluscipoxviruses – currently at 078.0
 - Yatapoxviruses – 059.2x
 - Others
- ♦ **078.1 Viral warts**
 - **078.12** Plantar wart – new code
 - New and revised inclusion terms
 - Some terms have moved to different code

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Neoplasms

199.2 Malignant neoplasm associated with transplanted organ

Categories 203-208 – Multiple myeloma and leukemias

- ♦ Revised 5th digit 0 to “without mention of having achieved remission”
- ♦ Added “failed remission” as inclusion term there
- ♦ Added 5th digit 2 – in relapse
- ♦ Result is 28 revised code titles and 28 new codes

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Neoplasms

209 Neuroendocrine tumors - 43 new codes in this new category

- ♦ Includes carcinoid tumors of the solid organs
- ♦ Are excluded from the other codes for tumors of the solid organs
- ♦ Commonly associated with the multiple endocrine neoplasia syndromes, MEN syndromes (code first note for this)

209.0 Malignant carcinoid tumors of the small intestine

209.1 Malignant carcinoid tumors of the appendix, large intestine, and rectum

209.2 Malignant carcinoid tumors of other and unspecified sites

209.3 Malignant poorly differentiated neuroendocrine tumors

209.4 Benign carcinoid tumors of the small intestine

209.5 Benign carcinoid tumors of the appendix, large intestine, and rectum

209.6 Benign carcinoid tumors of other and unspecified sites

238.77 Post-transplant lymphoproliferative disorder (PTLD)

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ENDOCRINE, NUTRITIONAL AND METABOLIC DISEASES, AND IMMUNITY DISORDERS

New category: 249 Secondary diabetes mellitus

- ♦ Always caused by another condition or event such as:
 - Cystic fibrosis
 - Cushing's syndrome
 - Malignant neoplasm of pancreas
 - Infection
 - Steroid use
- ♦ 4th digits match category 250 Diabetes Mellitus for associated conditions and manifestations
- ♦ 5th digits required to describe controlled or uncontrolled
- ♦ No 5th digits for Type I or Type II
 - Not applicable to secondary diabetes

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ENDOCRINE, NUTRITIONAL AND METABOLIC DISEASES, AND IMMUNITY DISORDERS**249 Secondary diabetes mellitus (cont.)****Assigning codes:**

- ◆ Code for cause of the secondary diabetes*
- ◆ Code from category 249 to show manifestations/complications
- ◆ Use additional codes to identify specific manifestation where applicable
- ◆ Code V58.67 for insulin use

* Sequence of cause vs. 249 as principal diagnosis is dependent on reason for admission/encounter

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Case Study

Q: How do you code secondary diabetes mellitus due to cystic fibrosis. The patient is on insulin.

A: Assign the following codes (sequencing would depend on reason for encounter):

277.00 Cystic fibrosis without mention of meconium ileus

249.00 Secondary diabetes mellitus without mention of complication, not stated as uncontrolled

V58.67 Long term (current) use of insulin

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ENDOCRINE, NUTRITIONAL AND METABOLIC DISEASES, AND IMMUNITY DISORDERS**259.5 Androgen insensitivity syndrome**

- ◆ Expanded to 5th digit to show complete vs. partial

Other new codes –**275.5 Hungry bone syndrome****279.5 Graft-versus-host disease**

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DISEASES OF THE BLOOD AND BLOOD-FORMING ORGANS**289.84 Heparin-induced thrombocytopenia (HIT)****Heparin – one of most frequently prescribed meds**

- ◆ 3%-5% of patients will develop this humoral immune-mediated reaction
- ◆ Clinical picture includes: drop in platelet count by 50% within 5-10 days after heparin therapy
- ◆ Treatment - initiation of alternative anticoagulant

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Neurology

Headaches and Migraines

International Classification of Headache Disorders, 2nd edition

Other headache syndromes – new category 339

24 new codes

Important:

Tension headache – indexed to code 307.81

Tension type headache – indexed to code 339.1

Migraine – category 346

- ◆ 5th digits 0 and 1 revised to add without status migrainosus
- ◆ 5th digits 2 and 3 new to add with status migrainosus
- ◆ 30 new codes and 10 revised titles
- ◆ Extensive re-do of inclusion terms and moving things to category 339

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Neurology

349.3 Dural Tear

◆ **349.3 Dural Tear**

- **349.31** Accidental puncture or laceration of dura during a procedure Incidental (inadvertent) durotomy
- **349.39** Other dural tear

Other new code:

337.0 Idiopathic peripheral autonomic neuropathy

- Expanded to 5th digit

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Neurology – Eye and adnexa

Retinopathy of Prematurity –

- ♦ A leading cause of blindness in children
- ♦ Disease name used to describe acute retinal changes seen in premature infants
- ♦ Vasoproliferative disorder involving developing retina in premature infants
- ♦ Mild forms usually regress with little or no loss of visual function
- ♦ Severe forms can lead to vision loss due to retinal scarring and damage
- ♦ Severe cases usually require intervention such as retinal photocoagulation
- ♦ Retrolental fibroplasia older term mainly applies to only cicatricial disease – retained for historical data purposes

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Neurology – Eye and adnexa

362 Other retinal disorders

- ♦ 362.2 Other proliferative retinopathy
 - 362.21 Retrolental fibroplasia Cicatricial retinopathy of prematurity
 - 362.22 Retinopathy of prematurity, stage 0
 - 362.23 Retinopathy of prematurity, stage 1
 - 362.24 Retinopathy of prematurity, stage 2
 - 362.25 Retinopathy of prematurity, stage 3
 - 362.26 Retinopathy of prematurity, stage 4
 - 362.27 Retinopathy of prematurity, stage 5
 - 362.29 Other non-diabetic proliferative retinopathy

Other new codes in this chapter:

- 364.82 Plateau iris syndrome
- 372.34 Pingueculitis

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Cardiovascular

- ◆ Technology now allows real-time identification of plaque as being lipid-rich or non-lipid-rich important diagnostic information for the interventional cardiologist.
- ◆ Helps cardiologist determine type of stent to utilize depending on the present location and amount of lipid-rich plaque (drug eluting vs. bare metal)
- ◆ New code: 414.3 Coronary atherosclerosis due to lipid rich plaque

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DISEASES OF THE RESPIRATORY SYSTEM

Malignant pleural effusion

- ◆ Malignant pleural effusion was defaulting to code secondary malignant neoplasm of the pleura
- ◆ Was not always valid
- ◆ Malignant pleural effusion may also represent thoracic lymphoma
- ◆ Malignant pleural effusion is also used for staging lung cancer
- ◆ New code: 511.81 Malignant pleural effusion

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Digestive system

Eosinophilic gastrointestinal disease (EGID)

530.13 Eosinophilic esophagitis

535.7 Eosinophilic gastritis (5TH digits 0-1)

558.4 Eosinophilic gastroenteritis and colitis

558.41 Eosinophilic gastroenteritis and
Eosinophilic enteritis

558.42 Eosinophilic colitis

Other new codes:

569.44 Dysplasia of anus

571.42 Autoimmune hepatitis

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DISEASES OF THE GENITOURINARY SYSTEM

Hematuria

- ♦ A common presenting symptom of bladder cancer
- ♦ But also may have a number of underlying urinary conditions including:
 - Urinary tract infection
 - Benign prostatic hypertrophy
 - Kidney or ureteral calculi

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DISEASES OF THE GENITOURINARY SYSTEM

Hematuria (cont.)

- ♦ Can be important in tracking those who may have other risk factors for development of bladder cancer such as:
 - Smoking
 - Voiding dysfunction
 - Personal history of UTI
 - Personal history of irradiation
 - Family history of bladder cancer
 - Individuals whose job exposes them to hazardous chemicals such as benzenes, aromatic amines, dyes, arsenic

599.7 Hematuria – expanded to 5th digit

599.70 Hematuria, unspecified

599.71 Gross hematuria

599.72 Microscopic hematuria

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DISEASES OF THE GENITOURINARY SYSTEM

- ♦ **611.8 Other specified disorders of breast**
 - 611.81 Ptosis of breast**
 - 611.82 Hypoplasia of breast**
 - 611.83 Capsular contracture of breast implant**
 - 611.89 Other specified disorders of breast**

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DISEASES OF THE GENITOURINARY SYSTEM

612 Deformity and disproportion of reconstructed breast

- 612.0** Deformity of reconstructed breast
 - Contour irregularity in reconstructed breast
 - Excess tissue in reconstructed breast
 - Misshapen reconstructed breast
- 612.1** Disproportion of reconstructed breast
 - Breast asymmetry between native breast and reconstructed breast
 - Disproportion between native breast and reconstructed breast

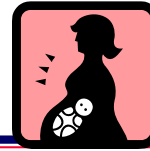
31

DISEASES OF THE GENITOURINARY SYSTEM

- ♦ **625.7 Vulvodynia – moved and expanded**
 - 625.70** Vulvodynia, unspecified – was at 625.8
 - 625.71** Vulvar vestibulitis – was at 616.10
 - 625.79** Other vulvodynia – was at 625.8

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***PREGNANCY, CHILDBIRTH,
AND THE PUERPERIUM***



649.7 Cervical shortening with valid 5th digits
[0,1,3] – new subcategory

Used to be coded to 654.5x and 654.6x

OTHER MATERNAL AND FETAL COMPLICATIONS (678-679)

678 Other fetal conditions

678.0 Fetal hematologic conditions

Fetal anemia

Fetal thrombocytopenia

Fetal twin to twin transfusion

678.1 Fetal conjoined twins

679 Complications of in utero procedures

679.0 Maternal complications from in utero procedure

679.1 Fetal complications from in utero procedure

Fetal complications from amniocentesis

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***PREGNANCY, CHILDBIRTH, AND
THE PUERPERIUM***

**New V codes – related to testing for and treating
Maternal and Fetal complications**

V15.2 Surgery to other organs

V15.21 Personal history of undergoing in utero procedure
during pregnancy

V15.22 Personal history of undergoing in utero procedure
while a fetus

V15.29 Surgery to other organs

V23 Supervision of high-risk pregnancy

V23.85 Pregnancy resulting from assisted reproductive
technology

Pregnancy resulting from in vitro fertilization

V23.86 Pregnancy with history of in utero procedure
during previous pregnancy

Excludes: management of pregnancy affected by in utero
procedure during current pregnancy (678.0-678.1)

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***PREGNANCY, CHILDBIRTH, AND
THE PUERPERIUM***

Related new V codes (cont.)

V28.8 Other specified antenatal screening

- V28.81** Encounter for fetal anatomic survey
- V28.82** Encounter for screening for risk of pre-term labor
- V28.89** Other specified antenatal screening
 - Chorionic villus sampling
 - Genomic screening
 - Nuchal translucency testing
 - Proteomic screening

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***PREGNANCY, CHILDBIRTH, AND
THE PUERPERIUM***

Related new V Codes (cont.)

V89 Other suspected conditions not found

V89.0 Suspected maternal and fetal conditions not found

Excludes: known or suspected fetal anomalies affecting management of mother, not ruled out
(655.00- 655.93, 656.00-656.93, 657.00-657.03, 658.00-658.93)
newborn and perinatal conditions - code to condition

- V89.01** Suspected problem with amniotic cavity and membrane not found
 - Suspected oligohydramnios not found
 - Suspected polyhydramnios not found

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PREGNANCY, CHILDBIRTH, AND THE PUERPERIUM

Related new V Codes (cont.)

V89 Other suspected conditions not found

V89.02 Suspected placental problem not found

V89.03 Suspected fetal anomaly not found

V89.04 Suspected problem with fetal growth not found

V89.05 Suspected cervical shortening not found

V89.09 Other suspected maternal and fetal condition not found

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CERTAIN CONDITIONS ORIGINATING IN THE PERINATAL PERIOD

760.6 Surgical operation on mother and fetus

760.61 Newborn affected by amniocentesis

760.62 Newborn affected by other in utero procedure

760.63 Newborn affected by other surgical operations on mother during pregnancy

760.64 Newborn affected by previous surgical procedure on mother not associated with pregnancy

777.5 Necrotizing enterocolitis in fetus or newborn – expanded to 5th digits for stages

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DISEASES OF THE SKIN AND SUBCUTANEOUS TISSUE

695.1 Erythema multiforme – expanded to 5th digits
 Erythema multiforme major vs. minor
 Stevens-Johnson syndrome
 Stevens-Johnson syndrome-toxic epidermal necrolysis overlap syndrome

695.5 Exfoliation due to erythematous conditions according to extent of body surface involved
 New codes to show percent of body surface involvement
 Uses same percentages as burn codes

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DISEASES OF THE SKIN AND SUBCUTANEOUS TISSUE

707.2 Pressure ulcer stages – new codes

- 707.20** Pressure ulcer, unspecified stage
- 707.21** Pressure ulcer stage I
 Healing pressure ulcer, stage I
 Pressure pre-ulcer skin changes limited to persistent focal erythema
- 707.22** Pressure ulcer stage II
 Healing pressure ulcer, stage II
 Pressure ulcer with abrasion, blister, partial thickness skin loss involving epidermis and/or dermis
- 707.23** Pressure ulcer stage III
 Healing pressure ulcer, stage III
 Pressure ulcer with full thickness skin loss involving damage or necrosis of subcutaneous tissue

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DISEASES OF THE SKIN AND SUBCUTANEOUS TISSUE

707.2 Pressure ulcer stages – new codes (cont.)

- 707.24 Pressure ulcer stage IV**
Healing pressure ulcer, stage IV
Pressure ulcer with necrosis of
soft tissues through to
underlying muscle, tendon, or bone
- 707.25 Pressure ulcer, unstageable**

Guidelines Updated:

**New I.B.16: Documentation for BMI and
Pressure Ulcer Stages**

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Case Study

Q: How do you code pressure ulcer of sacral area, stage II is documented in the nursing notes.

A: As long as the provider has documented the diagnosis of pressure ulcer of the sacral area the following codes may be assigned:

- 707.03, Pressure ulcer, lower back**
707.22, Stage II pressure ulcer

The updated guidelines state that the provider must make the diagnosis of pressure ulcer, while the nursing (or other clinician's notes) may be used to obtain the details about the stage of the pressure ulcer.

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Musculoskeletal System



729.9 Other and unspecified disorders of soft tissue

729.91 Post-traumatic seroma

729.92 Non-traumatic hematoma of soft tissue

733.9 Other and unspecified disorders of bone and cartilage

733.96 Stress fracture of femoral neck

733.97 Stress fracture of shaft of femur

733.98 Stress fracture of pelvis

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Signs and Symptoms

Fever and other physiologic disturbances of temperature regulation

- Significant complication when associated with many chronic conditions, for example
 - Leukemia
 - Sickle cell disease

780.6 Fever and other physiologic disturbances of temperature regulation

780.60 Fever, unspecified
Chills with fever

780.61 Fever presenting with conditions classified elsewhere

780.62 Postprocedural fever

780.63 Postvaccination fever

780.64 Chills (without fever)
Chills NOS

780.65 Hypothermia not associated with low environmental temperature

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Signs and Symptoms (cont.)

780.72 Functional quadriplegia

- ♦ Not paresis, person can feel their limbs
- ♦ Inability to move due to another condition
 - Examples include severe contractures, arthritis
- ♦ Person is functionally the same as a paralyzed person

788.91 Functional urinary incontinence

- ♦ Similar to above, leakage of urine related to:
 - Irreversible impairment in cognitive functioning
 - which leads to an impairment in the individual's ability to exercise control over bladder function
 - Person may not remember to use the toilet or staff may not respond quickly to their call

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Signs and Symptoms (cont.)

Other new symptom codes:

795.1 Abnormal Papanicolaou smear of vagina and vaginal HPV

- ♦ Revised title
- ♦ Moved what was at this code to code 796.9, Other nonspecific abnormal findings
- ♦ Expanded this to 5th digit like 795.0, Abnormal Papanicolaou smear of cervix and cervical HPV

796.7 Abnormal cytologic smear of anus and anal HPV - same type of codes

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INJURY AND POISONING

997.31 Ventilator associated pneumonia – new code

Background:

- ♦ Mechanical ventilators provide necessary respiratory support
- ♦ their use puts patients at risk ventilator-associated pneumonia.
- ♦ 15% hospital-associated infections due to this
- ♦ 25% infections acquired in ICU due to this

Guidelines updated:

- ♦ Code assignment is based on the provider’s documentation of the relationship between the condition and the procedure
- ♦ Assign code 997.31 only when the provider has documented ventilator associated pneumonia (VAP)
- ♦ Assign additional code to identify the organism
- ♦ Do not assign code from 480-484, Pneumonia and Influenza, to identify type of pneumonia

997.39 Other respiratory complications

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INJURY AND POISONING

Disruption of wound

New codes:

- 998.30 Disruption of wound, unspecified**
- 998.33 Disruption of traumatic injury wound repair**
Disruption or dehiscence of closure of traumatic laceration (external) (internal)

Many new inclusion terms have been added to these two existing codes:

- 998.31 Disruption of internal operation surgical wound**
- 998.32 Disruption of external operation surgical wound**

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INJURY AND POISONING

Extravasation of vesicant chemotherapy

- ♦ Extravasate: pass out of vessel or organ
- ♦ Vesicant: agent with potential to cause tissue necrosis if it extravasates
- ♦ IV substances given can extravasate into tissue around the IV site
- ♦ Causes
 - IV catheters or devices moving or slipping out of veins
 - Patient moving and dislodging IV catheters
 - IV devices separating or breaking
- ♦ Extravasation can cause tissue necrosis

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INJURY AND POISONING

New codes:

- 999.81 Extravasation of vesicant chemotherapy**
- 999.82 Extravasation of other vesicant agent**
- 999.88 Other infusion reaction**
- 999.89 Other transfusion reaction**

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V Codes**(other than those previously covered)****V07.5x Prophylactic use of agents affecting estrogen receptors and estrogen levels****Code first, if applicable:****malignant neoplasm of breast (174.0-174.9, 175.0-175.9)****malignant neoplasm of prostate (185)****V13.5 Other musculoskeletal disorders****V13.51 Pathologic fracture****V13.52 Stress fracture****V15.5 Injury****V15.51 Traumatic fracture**

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V Codes (cont.)**V45.87 Transplanted organ removal status**
Transplanted organ previously removed due to complication, failure, rejection or infection

- Do not assign this to encounter in which the transplanted organ is removed.
- Code for complication necessitating removal of the transplant organ should be assigned for this encounter.

V51 Aftercare involving the use of plastic surgery**V51.0 Encounter for breast reconstruction following mastectomy****V51.8 Other aftercare involving the use of plastic surgery**

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V Codes (cont.)**V61.0x Family disruption**

- ♦ Expanded for all kinds of family situations
- ♦ Military deployment related
- ♦ Legal related

V62.2 Other occupational circumstances or maladjustment

V62.21 Personal current military deployment status

V62.22 Personal history of return from military deployment

V62.29 Other occupational circumstances or maladjustment

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V Codes (cont.)**V87 Other specified personal exposures and history presenting hazards to health**

V87.0 Contact with and (suspected) exposure to hazardous metals

V87.1 Contact with and (suspected) exposure to hazardous aromatic compounds

V87.2 Contact with and (suspected) exposure to other potentially hazardous chemicals

V87.3 Contact with and (suspected) exposure to other potentially hazardous substances

V87.4 Personal history of drug therapy

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V Codes (cont.)

V88 Acquired absence of other organs and tissue

V88.0 Acquired absence of cervix and uterus

- ◆ **Previously coded to V45.77, Acquired absence of genital organs**

V88.01 Acquired absence of both cervix and uterus

V88.02 Acquired absence of uterus with remaining cervical stump

V88.03 Acquired absence of cervix with remaining uterus

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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 code tables (Tables 6A-6E)?

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.

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E Codes – new in 2008

E885 Fall on same level from slipping, tripping, or stumbling

E885.1 Fall from roller skates
 Heelies
 Wheelies

E927 Overexertion and strenuous and repetitive movements or loads

E927.0 Overexertion from sudden strenuous movement

E927.1 Overexertion from prolonged static position

E927.2 Excessive physical exertion from prolonged activity

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E Codes – new in 2008

E927 Overexertion and strenuous and repetitive movements or loads (cont.)

E927.3 Cumulative trauma from repetitive motion

E927.4 Cumulative trauma from repetitive impact

E927.8 Other overexertion and strenuous and repetitive movements or loads

E927.9 Unspecified overexertion and strenuous and repetitive movements or loads

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Other Changes

- ◆ Supplement to the tabular addenda
- ◆ Document containing valid 5th digit notation
- ◆ **REMINDER: Check full addenda (tabular and index) for all changes**

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Resources/References



ICD-9-CM Diagnosis coding changes 10/01/2008

- ◆ 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 (background about changes)
<http://www.cdc.gov/nchs/about/otheract/icd9/maint/maint.htm>
- ◆ Tables 6A-6F: New/Revised/Invalid codes (CMS web site):
http://www.cms.hhs.gov/ICD9ProviderDiagnosticCodes/07_summary_tables.asp#TopOfPage

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Resources/References (cont.)

**ICD-9-CM Diagnosis coding changes
10/01/2008**

- ◆ **Federal Register August 8, 2008, Final Rule FY 2008 Inpatient Prospective Payment System (including new code lists and DRG changes):**
<http://www.cms.hhs.gov/AcuteInpatientPPS/downloads/CMS-1390-F.pdf>
- ◆ **ICD-9-CM Official Coding Guidelines for Coding and Reporting**
<http://www.cdc.gov/nchs/datawh/ftp/ftp9/ftp9icd9/icdguide08.pdf>

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Audience Questions



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September 18, 2008

FY09 CMS IPPS Update

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Appendix

Resource/Reference List	35
FY09 Revised Diagnosis Code Titles	
FY09 Invalid Diagnosis Codes	
FY09 New Diagnosis Codes	
CE Certificate Instructions	

Appendix

Resource/Reference List

<http://www.cdc.gov/nchs/icd9.htm>

<http://www.cdc.gov/nchs/about/otheract/icd9/maint/maint.htm>

http://www.cms.hhs.gov/ICD9ProviderDiagnosticCodes/07_summarytables.asp#TopOfPage

<http://www.cms.hhs.gov/AcuteInpatientPPS/downloads/CMS-1390-F.pdf>

<http://www.cdc.gov/nchs/datawh/ftpserv/ftpicd9/icdguide08.pdf>

REVISED DIAGNOSIS CODE TITLES

Effective October 1, 2008

The final addendum providing complete information on changes to the diagnosis part of ICD-9-CM is posted on CDC's webpage at: www.cdc.gov/nchs/icd9.htm

Diagnosis Code	Description
038.11*	Methicillin susceptible Staphylococcus aureus septicemia
041.11*	Methicillin susceptible Staphylococcus aureus in conditions classified elsewhere and of unspecified site
203.00	Multiple myeloma, without mention of having achieved remission
203.10	Plasma cell leukemia, without mention of having achieved remission
203.80	Other immunoproliferative neoplasms, without mention of having achieved remission
204.00	Acute lymphoid leukemia, without mention of having achieved remission
204.10	Chronic lymphoid leukemia, without mention of having achieved remission
204.20	Subacute lymphoid leukemia, without mention of having achieved remission
204.80	Other lymphoid leukemia, without mention of having achieved remission
204.90	Unspecified lymphoid leukemia, without mention of having achieved remission
205.00	Acute myeloid leukemia, without mention of having achieved remission
205.10	Chronic myeloid leukemia, without mention of having achieved remission
205.20	Subacute myeloid leukemia, without mention of having achieved remission
205.30	Myeloid sarcoma, without mention of having achieved remission
205.80	Other myeloid leukemia, without mention of having achieved remission
205.90	Unspecified myeloid leukemia, without mention of having achieved remission
206.00	Acute monocytic leukemia, without mention of having achieved remission
206.10	Chronic monocytic leukemia, without mention of having achieved remission
206.20	Subacute monocytic leukemia, without mention of having achieved remission
206.80	Other monocytic leukemia, without mention of having achieved remission
206.90	Unspecified monocytic leukemia, without mention of having achieved remission
207.00	Acute erythremia and erythroleukemia, without mention of having achieved remission
207.10	Chronic erythremia, without mention of having achieved remission
207.20	Megakaryocytic leukemia, without mention of having achieved remission
207.80	Other specified leukemia, without mention of having achieved remission
208.00	Acute leukemia of unspecified cell type, without mention of having achieved remission
208.10	Chronic leukemia of unspecified cell type, without mention of having achieved remission
208.20	Subacute leukemia of unspecified cell type, without mention of having achieved remission
208.80	Other leukemia of unspecified cell type, without mention of having achieved remission
208.90	Unspecified leukemia, without mention of having achieved remission
346.00	Migraine with aura, without mention of intractable migraine without mention of status migrainosus
346.01	Migraine with aura, with intractable migraine, so stated, without mention of status

REVISED DIAGNOSIS CODE TITLES
Effective October 1, 2008

Diagnosis Code	Description
	migrainosus
346.10	Migraine without aura, without mention of intractable migraine without mention of status migrainosus
346.11	Migraine without aura, with intractable migraine, so stated, without mention of status migrainosus
346.20	Variants of migraine, not elsewhere classified, without mention of intractable migraine without mention of status migrainosus
346.21	Variants of migraine, not elsewhere classified, with intractable migraine, so stated, without mention of status migrainosus
346.80	Other forms of migraine, without mention of intractable migraine without mention of status migrainosus
346.81	Other forms of migraine, with intractable migraine, so stated, without mention of status migrainosus
346.90*	Migraine, unspecified, without mention of intractable migraine without mention of status migrainosus
346.91*	Migraine, unspecified, with intractable migraine, so stated, without mention of status migrainosus
386.00	Ménière's disease, unspecified
386.01	Active Ménière's disease, cochleovestibular
386.02	Active Ménière's disease, cochlear
386.03	Active Ménière's disease, vestibular
386.04	Inactive Ménière's disease
482.41*	Methicillin susceptible pneumonia due to Staphylococcus aureus
707.00	Pressure ulcer, unspecified site
707.01	Pressure ulcer, elbow
707.02	Pressure ulcer, upper back
707.03	Pressure ulcer, lower back
707.04	Pressure ulcer, hip
707.05	Pressure ulcer, buttock
707.06	Pressure ulcer, ankle
707.07	Pressure ulcer, heel
707.09	Pressure ulcer, other site
795.08	Unsatisfactory cervical cytology smear
998.31	Disruption of internal operation (surgical) wound
998.32*	Disruption of external operation (surgical) wound
V28.3	Encounter for routine screening for malformation using ultrasonics
V45.71	Acquired absence of breast and nipple

Notes:

* These diagnosis codes were discussed at the March 19-20, 2008 ICD-9-CM Coordination and Maintenance Committee meeting and were not finalized in time to include in the proposed rule. They will be implemented on October 1, 2008.

Revised code 776.9 that was listed in the proposed rule has been deleted. There will be no changes to code 776.9.

INVALID DIAGNOSIS CODES

Effective October 1, 2008

The final addendum providing complete information on changes to the diagnosis part of ICD-9-CM is posted on CDC's webpage at: www.cdc.gov/nchs/icd9.htm

Diagnosis Code	Description
046.1	Jakob-Creutzfeldt disease
051.0	Cowpox
136.2	Specific infections by free-living amebae
259.5	Androgen insensitivity syndrome
337.0	Idiopathic peripheral autonomic neuropathy
511.8	Other specified forms of pleural effusion, except tuberculous
599.7	Hematuria
611.8	Other specified disorders of breast
695.1	Erythema multiforme
729.9	Other and unspecified disorders of soft tissue
760.6	Surgical operation on mother
777.5	Necrotizing enterocolitis in fetus or newborn
780.6*	Fever
788.9	Other symptoms involving urinary system
795.1	Nonspecific abnormal Papanicolaou smear of other site
997.3	Respiratory complications
999.8	Other transfusion reaction
V13.5	Personal history of other musculoskeletal disorders
V15.2	Personal history of surgery to other major organs
V15.5	Personal history of injury
V28.8	Encounter for other specified antenatal screening
V45.1	Renal dialysis status
V51	Aftercare involving the use of plastic surgery
V61.0*	Family disruption
V62.2*	Other occupational circumstances or maladjustment

Notes:

* These diagnosis codes were discussed at the March 19-20, 2008 ICD-9-CM Coordination and Maintenance Committee meeting and were not finalized in time to include in the proposed rule. They will be deleted on October 1, 2008.

NEW DIAGNOSIS CODES
Effective October 1, 2008

The final addendum providing complete information on changes to the diagnosis part of ICD-9-CM is posted on CDC's webpage at: www.cdc.gov/nchs/icd9.htm

Diagnosis Code	Description
038.12*	Methicillin resistant Staphylococcus aureus septicemia
041.12*	Methicillin resistant Staphylococcus aureus in conditions classified elsewhere and of unspecified site
046.11	Variant Creutzfeldt-Jakob disease
046.19	Other and unspecified Creutzfeldt-Jakob disease
046.71	Gerstmann-Sträussler-Scheinker syndrome
046.72	Fatal familial insomnia
046.79	Other and unspecified prion disease of central nervous system
051.01	Cowpox
051.02	Vaccinia not from vaccination
059.00	Orthopoxvirus infection, unspecified
059.01	Monkeypox
059.09	Other orthopoxvirus infections
059.10	Parapoxvirus infection, unspecified
059.11	Bovine stomatitis
059.12	Sealpox
059.19	Other parapoxvirus infections
059.20*	Yatapoxvirus infection, unspecified
059.21	Tanapox
059.22	Yaba monkey tumor virus
059.8	Other poxvirus infections
059.9	Poxvirus infections, unspecified
078.12	Plantar wart
136.21	Specific infection due to acanthamoeba
136.29	Other specific infections by free-living amebae
199.2	Malignant neoplasm associated with transplant organ
203.02	Multiple myeloma, in relapse
203.12	Plasma cell leukemia, in relapse
203.82	Other immunoproliferative neoplasms, in relapse
204.02	Acute lymphoid leukemia, in relapse
204.12	Chronic lymphoid leukemia, in relapse
204.22	Subacute lymphoid leukemia, in relapse
204.82	Other lymphoid leukemia, in relapse
204.92	Unspecified lymphoid leukemia, in relapse
205.02	Acute myeloid leukemia, in relapse
205.12	Chronic myeloid leukemia, in relapse
205.22	Subacute myeloid leukemia, in relapse
205.32	Myeloid sarcoma, in relapse
205.82	Other myeloid leukemia, in relapse
205.92	Unspecified myeloid leukemia, in relapse

NEW DIAGNOSIS CODES
Effective October 1, 2008

Diagnosis Code	Description
206.02	Acute monocytic leukemia, in relapse
206.12	Chronic monocytic leukemia, in relapse
206.22	Subacute monocytic leukemia, in relapse
206.82	Other monocytic leukemia, in relapse
206.92	Unspecified monocytic leukemia, in relapse
207.02	Acute erythremia and erythroleukemia, in relapse
207.12	Chronic erythremia, in relapse
207.22	Megakaryocytic leukemia, in relapse
207.82	Other specified leukemia, in relapse
208.02	Acute leukemia of unspecified cell type, in relapse
208.12	Chronic leukemia of unspecified cell type, in relapse
208.22	Subacute leukemia of unspecified cell type, in relapse
208.82	Other leukemia of unspecified cell type, in relapse
208.92	Unspecified leukemia, in relapse
209.00	Malignant carcinoid tumor of the small intestine, unspecified portion
209.01	Malignant carcinoid tumor of the duodenum
209.02	Malignant carcinoid tumor of the jejunum
209.03	Malignant carcinoid tumor of the ileum
209.10	Malignant carcinoid tumor of the large intestine, unspecified portion
209.11	Malignant carcinoid tumor of the appendix
209.12	Malignant carcinoid tumor of the cecum
209.13	Malignant carcinoid tumor of the ascending colon
209.14	Malignant carcinoid tumor of the transverse colon
209.15	Malignant carcinoid tumor of the descending colon
209.16	Malignant carcinoid tumor of the sigmoid colon
209.17	Malignant carcinoid tumor of the rectum
209.20	Malignant carcinoid tumor of unknown primary site
209.21	Malignant carcinoid tumor of the bronchus and lung
209.22	Malignant carcinoid tumor of the thymus
209.23	Malignant carcinoid tumor of the stomach
209.24	Malignant carcinoid tumor of the kidney
209.25	Malignant carcinoid tumor of foregut, not otherwise specified
209.26	Malignant carcinoid tumor of midgut, not otherwise specified
209.27	Malignant carcinoid tumor of hindgut, not otherwise specified
209.29	Malignant carcinoid tumor of other sites
209.30	Malignant poorly differentiated neuroendocrine carcinoma, any site
209.40	Benign carcinoid tumor of the small intestine, unspecified portion
209.41	Benign carcinoid tumor of the duodenum
209.42	Benign carcinoid tumor of the jejunum
209.43	Benign carcinoid tumor of the ileum
209.50	Benign carcinoid tumor of the large intestine, unspecified portion
209.51	Benign carcinoid tumor of the appendix
209.52	Benign carcinoid tumor of the cecum

NEW DIAGNOSIS CODES
Effective October 1, 2008

Diagnosis Code	Description
209.53	Benign carcinoid tumor of the ascending colon
209.54	Benign carcinoid tumor of the transverse colon
209.55	Benign carcinoid tumor of the descending colon
209.56	Benign carcinoid tumor of the sigmoid colon
209.57	Benign carcinoid tumor of the rectum
209.60	Benign carcinoid tumor of unknown primary site
209.61	Benign carcinoid tumor of the bronchus and lung
209.62	Benign carcinoid tumor of the thymus
209.63	Benign carcinoid tumor of the stomach
209.64	Benign carcinoid tumor of the kidney
209.65	Benign carcinoid tumor of foregut, not otherwise specified
209.66	Benign carcinoid tumor of midgut, not otherwise specified
209.67	Benign carcinoid tumor of hindgut, not otherwise specified
209.69	Benign carcinoid tumor of other sites
238.77	Post-transplant lymphoproliferative disorder (PTLD)
249.00	Secondary diabetes mellitus without mention of complication, not stated as uncontrolled, or unspecified
249.01	Secondary diabetes mellitus without mention of complication, uncontrolled
249.10	Secondary diabetes mellitus with ketoacidosis, not stated as uncontrolled, or unspecified
249.11	Secondary diabetes mellitus with ketoacidosis, uncontrolled
249.20	Secondary diabetes mellitus with hyperosmolarity, not stated as uncontrolled, or unspecified
249.21	Secondary diabetes mellitus with hyperosmolarity, uncontrolled
249.30	Secondary diabetes mellitus with other coma, not stated as uncontrolled, or unspecified
249.31	Secondary diabetes mellitus with other coma, uncontrolled
249.40	Secondary diabetes mellitus with renal manifestations, not stated as uncontrolled, or unspecified
249.41	Secondary diabetes mellitus with renal manifestations, uncontrolled
249.50	Secondary diabetes mellitus with ophthalmic manifestations, not stated as uncontrolled, or unspecified
249.51	Secondary diabetes mellitus with ophthalmic manifestations, uncontrolled
249.60	Secondary diabetes mellitus with neurological manifestations, not stated as uncontrolled, or unspecified
249.61	Secondary diabetes mellitus with neurological manifestations, uncontrolled
249.70	Secondary diabetes mellitus with peripheral circulatory disorders, not stated as uncontrolled, or unspecified
249.71	Secondary diabetes mellitus with peripheral circulatory disorders, uncontrolled
249.80	Secondary diabetes mellitus with other specified manifestations, not stated as uncontrolled, or unspecified
249.81	Secondary diabetes mellitus with other specified manifestations, uncontrolled
249.90	Secondary diabetes mellitus with unspecified complication, not stated as

NEW DIAGNOSIS CODES
Effective October 1, 2008

Diagnosis Code	Description
	uncontrolled, or unspecified
249.91	Secondary diabetes mellitus with unspecified complication, uncontrolled
259.50	Androgen insensitivity, unspecified
259.51	Androgen insensitivity syndrome
259.52	Partial androgen insensitivity
275.5	Hungry bone syndrome
279.50	Graft-versus-host disease, unspecified
279.51	Acute graft-versus-host disease
279.52	Chronic graft-versus-host disease
279.53	Acute on chronic graft-versus-host disease
289.84	Heparin-induced thrombocytopenia (HIT)
337.00	Idiopathic peripheral autonomic neuropathy, unspecified
337.01	Carotid sinus syndrome
337.09	Other idiopathic peripheral autonomic neuropathy
339.00	Cluster headache syndrome, unspecified
339.01	Episodic cluster headache
339.02	Chronic cluster headache
339.03	Episodic paroxysmal hemicrania
339.04	Chronic paroxysmal hemicrania
339.05	Short lasting unilateral neuralgiform headache with conjunctival injection and tearing
339.09	Other trigeminal autonomic cephalgias
339.10	Tension type headache, unspecified
339.11	Episodic tension type headache
339.12	Chronic tension type headache
339.20	Post-traumatic headache, unspecified
339.21	Acute post-traumatic headache
339.22	Chronic post-traumatic headache
339.3	Drug induced headache, not elsewhere classified
339.41	Hemicrania continua
339.42	New daily persistent headache
339.43	Primary thunderclap headache
339.44	Other complicated headache syndrome
339.81	Hypnic headache
339.82	Headache associated with sexual activity
339.83	Primary cough headache
339.84	Primary exertional headache
339.85	Primary stabbing headache
339.89	Other headache syndromes
346.02	Migraine with aura, without mention of intractable migraine with status migrainosus
346.03	Migraine with aura, with intractable migraine, so stated, with status migrainosus
346.12	Migraine without aura, without mention of intractable migraine with status

NEW DIAGNOSIS CODES
Effective October 1, 2008

Diagnosis Code	Description
	migrainosus
346.13	Migraine without aura, with intractable migraine, so stated, with status migrainosus
346.22	Variants of migraine, not elsewhere classified, without mention of intractable migraine with status migrainosus
346.23	Variants of migraine, not elsewhere classified, with intractable migraine, so stated, with status migrainosus
346.30	Hemiplegic migraine, without mention of intractable migraine without mention of status migrainosus
346.31	Hemiplegic migraine, with intractable migraine, so stated, without mention of status migrainosus
346.32	Hemiplegic migraine, without mention of intractable migraine with status migrainosus
346.33	Hemiplegic migraine, with intractable migraine, so stated, with status migrainosus
346.40	Menstrual migraine, without mention of intractable migraine without mention of status migrainosus
346.41	Menstrual migraine, with intractable migraine, so stated, without mention of status migrainosus
346.42	Menstrual migraine, without mention of intractable migraine with status migrainosus
346.43	Menstrual migraine, with intractable migraine, so stated, with status migrainosus
346.50	Persistent migraine aura without cerebral infarction, without mention of intractable migraine without mention of status migrainosus
346.51	Persistent migraine aura without cerebral infarction, with intractable migraine, so stated, without mention of status migrainosus
346.52	Persistent migraine aura without cerebral infarction, without mention of intractable migraine with status migrainosus
346.53	Persistent migraine aura without cerebral infarction, with intractable migraine, so stated, with status migrainosus
346.60	Persistent migraine aura with cerebral infarction, without mention of intractable migraine without mention of status migrainosus
346.61	Persistent migraine aura with cerebral infarction, with intractable migraine, so stated, without mention of status migrainosus
346.62	Persistent migraine aura with cerebral infarction, without mention of intractable migraine with status migrainosus
346.63	Persistent migraine aura with cerebral infarction, with intractable migraine, so stated, with status migrainosus
346.70	Chronic migraine without aura, without mention of intractable migraine without mention of status migrainosus
346.71	Chronic migraine without aura, with intractable migraine, so stated, without mention of status migrainosus
346.72	Chronic migraine without aura, without mention of intractable migraine with status migrainosus
346.73	Chronic migraine without aura, with intractable migraine, so stated, with status migrainosus

NEW DIAGNOSIS CODES
Effective October 1, 2008

Diagnosis Code	Description
346.82	Other forms of migraine, without mention of intractable migraine with status migrainosus
346.83	Other forms of migraine, with intractable migraine, so stated, with status migrainosus
346.92*	Migraine, unspecified, without mention of intractable migraine with status migrainosus
346.93*	Migraine, unspecified, with intractable migraine, so stated, with status migrainosus
349.31*	Accidental puncture or laceration of dura during a procedure
349.39*	Other dural tear
362.20	Retinopathy of prematurity, unspecified
362.22	Retinopathy of prematurity, stage 0
362.23	Retinopathy of prematurity, stage 1
362.24	Retinopathy of prematurity, stage 2
362.25	Retinopathy of prematurity, stage 3
362.26	Retinopathy of prematurity, stage 4
362.27	Retinopathy of prematurity, stage 5
364.82	Plateau iris syndrome
372.34	Pingueculitis
414.3	Coronary atherosclerosis due to lipid rich plaque
482.42*	Methicillin resistant pneumonia due to Staphylococcus aureus
511.81	Malignant pleural effusion
511.89	Other specified forms of effusion, except tuberculous
530.13*	Eosinophilic esophagitis
535.70*	Eosinophilic gastritis, without mention of hemorrhage
535.71*	Eosinophilic gastritis, with hemorrhage
558.41*	Eosinophilic gastroenteritis
558.42*	Eosinophilic colitis
569.44	Dysplasia of anus
571.42	Autoimmune hepatitis
599.70	Hematuria, unspecified
599.71	Gross hematuria
599.72	Microscopic hematuria
611.81	Ptosis of breast
611.82	Hypoplasia of breast
611.83	Capsular contracture of breast implant
611.89	Other specified disorders of breast
612.0	Deformity of reconstructed breast
612.1	Disproportion of reconstructed breast
625.70	Vulvodynia, unspecified
625.71	Vulvar vestibulitis
625.79	Other vulvodynia
649.70	Cervical shortening, unspecified as to episode of care or not applicable
649.71	Cervical shortening, delivered, with or without mention of antepartum condition

NEW DIAGNOSIS CODES
Effective October 1, 2008

Diagnosis Code	Description
649.73	Cervical shortening, antepartum condition or complication
678.00	Fetal hematologic conditions, unspecified as to episode of care or not applicable
678.01	Fetal hematologic conditions, delivered, with or without mention of antepartum condition
678.03	Fetal hematologic conditions, antepartum condition or complication
678.10	Fetal conjoined twins, unspecified as to episode of care or not applicable
678.11	Fetal conjoined twins, delivered, with or without mention of antepartum condition
678.13	Fetal conjoined twins, antepartum condition or complication
679.00	Maternal complications from in utero procedure, unspecified as to episode of care or not applicable
679.01	Maternal complications from in utero procedure, delivered, with or without mention of antepartum condition
679.02	Maternal complications from in utero procedure, delivered, with mention of postpartum complication
679.03	Maternal complications from in utero procedure, antepartum condition or complication
679.04	Maternal complications from in utero procedure, postpartum condition or complication
679.10	Fetal complications from in utero procedures, unspecified as to episode of care or not applicable
679.11	Fetal complications from in utero procedures, delivered, with or without mention of antepartum condition
679.12	Fetal complications from in utero procedures, delivered, with mention of postpartum complication
679.13	Fetal complications from in utero procedures, antepartum condition or complication
679.14	Fetal complications from in utero procedures, postpartum condition or complication
695.10	Erythema multiforme, unspecified
695.11	Erythema multiforme minor
695.12	Erythema multiforme major
695.13	Stevens-Johnson syndrome
695.14	Stevens-Johnson syndrome-toxic epidermal necrolysis overlap syndrome
695.15	Toxic epidermal necrolysis
695.19	Other erythema multiforme
695.50	Exfoliation due to erythematous condition involving less than 10 percent of body surface
695.51	Exfoliation due to erythematous condition involving 10-19 percent of body surface
695.52	Exfoliation due to erythematous condition involving 20-29 percent of body surface
695.53	Exfoliation due to erythematous condition involving 30-39 percent of body surface
695.54	Exfoliation due to erythematous condition involving 40-49 percent of body surface
695.55	Exfoliation due to erythematous condition involving 50-59 percent of body surface
695.56	Exfoliation due to erythematous condition involving 60-69 percent of body surface

NEW DIAGNOSIS CODES
Effective October 1, 2008

Diagnosis Code	Description
695.57	Exfoliation due to erythematous condition involving 70-79 percent of body surface
695.58	Exfoliation due to erythematous condition involving 80-89 percent of body surface
695.59	Exfoliation due to erythematous condition involving 90 percent or more of body surface
707.20	Pressure ulcer, unspecified stage
707.21	Pressure ulcer, stage I
707.22	Pressure ulcer, stage II
707.23	Pressure ulcer, stage III
707.24	Pressure ulcer, stage IV
707.25*	Pressure ulcer, unstageable
729.90	Disorders of soft tissue, unspecified
729.91	Post-traumatic seroma
729.92	Nontraumatic hematoma of soft tissue
729.99	Other disorders of soft tissue
733.96*	Stress fracture of femoral neck
733.97*	Stress fracture of shaft of femur
733.98*	Stress fracture of pelvis
760.61	Newborn affected by amniocentesis
760.62	Newborn affected by other in utero procedure
760.63	Newborn affected by other surgical operations on mother during pregnancy
760.64	Newborn affected by previous surgical procedure on mother not associated with pregnancy
777.50	Necrotizing enterocolitis in newborn, unspecified
777.51	Stage I necrotizing enterocolitis in newborn
777.52	Stage II necrotizing enterocolitis in newborn
777.53	Stage III necrotizing enterocolitis in newborn
780.60*	Fever, unspecified
780.61*	Fever presenting with conditions classified elsewhere
780.62*	Postprocedural fever
780.63*	Postvaccination fever
780.64*	Chills (without fever)
780.65*	Hypothermia not associated with low environmental temperature
780.72	Functional quadriplegia
788.91	Functional urinary incontinence
788.99	Other symptoms involving urinary system
795.07	Satisfactory cervical smear but lacking transformation zone
795.10	Abnormal glandular Papanicolaou smear of vagina
795.11	Papanicolaou smear of vagina with atypical squamous cells of undetermined significance (ASC-US)
795.12	Papanicolaou smear of vagina with atypical squamous cells cannot exclude high grade squamous intraepithelial lesion (ASC-H)
795.13	Papanicolaou smear of vagina with low grade squamous intraepithelial lesion (LGSIL)

NEW DIAGNOSIS CODES
Effective October 1, 2008

Diagnosis Code	Description
795.14	Papanicolaou smear of vagina with high grade squamous intraepithelial lesion (HGSIL)
795.15	Vaginal high risk human papillomavirus (HPV) DNA test positive
795.16	Papanicolaou smear of vagina with cytologic evidence of malignancy
795.18	Unsatisfactory vaginal cytology smear
795.19	Other abnormal Papanicolaou smear of vagina and vaginal HPV
796.70	Abnormal glandular Papanicolaou smear of anus
796.71	Papanicolaou smear of anus with atypical squamous cells of undetermined significance (ASC-US)
796.72	Papanicolaou smear of anus with atypical squamous cells cannot exclude high grade squamous intraepithelial lesion (ASC-H)
796.73	Papanicolaou smear of anus with low grade squamous intraepithelial lesion (LGSIL)
796.74	Papanicolaou smear of anus with high grade squamous intraepithelial lesion (HGSIL)
796.75	Anal high risk human papillomavirus (HPV) DNA test positive
796.76	Papanicolaou smear of anus with cytologic evidence of malignancy
796.77	Satisfactory anal smear but lacking transformation zone
796.78	Unsatisfactory anal cytology smear
796.79	Other abnormal Papanicolaou smear of anus and anal HPV
997.31	Ventilator associated pneumonia
997.39	Other respiratory complications
998.30	Disruption of wound, unspecified
998.33*	Disruption of traumatic injury wound repair
999.81	Extravasation of vesicant chemotherapy
999.82	Extravasation of other vesicant agent
999.88	Other infusion reaction
999.89	Other transfusion reaction
V02.53*	Carrier or suspected carrier of Methicillin susceptible Staphylococcus aureus
V02.54*	Carrier or suspected carrier of Methicillin resistant Staphylococcus aureus
V07.51	Prophylactic use of selective estrogen receptor modulators (SERMs)
V07.52	Prophylactic use of aromatase inhibitors
V07.59	Prophylactic use of other agents affecting estrogen receptors and estrogen levels
V12.04*	Personal history of Methicillin resistant Staphylococcus aureus
V13.51	Personal history of pathologic fracture
V13.52	Personal history of stress fracture
V13.59	Personal history of other musculoskeletal disorders
V15.21	Personal history of undergoing in utero procedure during pregnancy
V15.22	Personal history of undergoing in utero procedure while a fetus
V15.29	Personal history of surgery to other organs
V15.51	Personal history of traumatic fracture
V15.59	Personal history of other injury
V23.85	Pregnancy resulting from assisted reproductive technology

NEW DIAGNOSIS CODES
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Diagnosis Code	Description
V23.86	Pregnancy with history of in utero procedure during previous pregnancy
V28.81	Encounter for fetal anatomic survey
V28.82	Encounter for screening for risk of pre-term labor
V28.89	Other specified antenatal screening
V45.11	Renal dialysis status
V45.12	Noncompliance with renal dialysis
V45.87	Transplanted organ removal status
V45.88*	Status post administration of tPA (rtPA) in a different facility within the last 24 hours prior to admission to current facility
V46.3	Wheelchair dependence
V51.0	Encounter for breast reconstruction following mastectomy
V51.8	Other aftercare involving the use of plastic surgery
V61.01*	Family disruption due to family member on military deployment
V61.02*	Family disruption due to return of family member from military deployment
V61.03*	Family disruption due to divorce or legal separation
V61.04*	Family disruption due to parent-child estrangement
V61.05*	Family disruption due to child in welfare custody
V61.06*	Family disruption due to child in foster care or in care of non-parental family member
V61.09*	Other family disruption
V62.21*	Personal current military deployment status
V62.22*	Personal history of return from military deployment
V62.29*	Other occupational circumstances or maladjustment
V87.01	Contact with and (suspected) exposure to arsenic
V87.09	Contact with and (suspected) exposure to other hazardous metals
V87.11	Contact with and (suspected) exposure to aromatic amines
V87.12	Contact with and (suspected) exposure to benzene
V87.19	Contact with and (suspected) exposure to other hazardous aromatic compounds
V87.2	Contact with and (suspected) exposure to other potentially hazardous chemicals
V87.31	Contact with and (suspected) exposure to mold
V87.39	Contact with and (suspected) exposure to other potentially hazardous substances
V87.41	Personal history of antineoplastic chemotherapy
V87.42	Personal history of monoclonal drug therapy
V87.49	Personal history of other drug therapy
V88.01	Acquired absence of both cervix and uterus
V88.02	Acquired absence of uterus with remaining cervical stump
V88.03	Acquired absence of cervix with remaining uterus
V89.01	Suspected problem with amniotic cavity and membrane not found
V89.02	Suspected placental problem not found
V89.03	Suspected fetal anomaly not found
V89.04	Suspected problem with fetal growth not found
V89.05	Suspected cervical shortening not found
V89.09	Other suspected maternal and fetal condition not found

NEW DIAGNOSIS CODES

Effective October 1, 2008

Notes:

* These diagnosis codes were discussed at the March 19-20, 2008 ICD-9-CM Coordination and Maintenance Committee meeting and were not finalized in time to include in the proposed rule. They will be implemented on October 1, 2008.

New code 059.29 that was listed in the proposed rule has been deleted. It has been replaced with new code 059.20.

The title for new code 998.33 that was listed in the proposed rule has been revised for the final rule.



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