

**UPDATED JUNE 2011**

**HIGHLIGHTS OF CHANGES TO ICD-9-CM CODES FY 2012**

The following are highlights of the changes to ICD-9-CM codes effective October 1, 2011, as approved by the ICD-9-CM Coordination and Maintenance Committee and published in the *Federal Register* dated May 5, 2011 and the Official ICD-9-CM Addenda for 2012.

**ICD-9-CM VOLUME 1 DIAGNOSES**

**INFECTIOUS AND PARASITIC DISEASES**

**Shiga toxin-producing *Escherichia coli* [*E. coli*] (STEC) (041.41-041.49)**

Infections with certain strains of *E. coli*, known as Shiga toxin-producing *E. coli* (STEC) that cause gastrointestinal infections may lead to hemolytic uremic syndrome (HUS), a potentially fatal condition. STEC transmission occurs through consumption of contaminated meats that are undercooked as well as consumption of many other types of contaminated products including but not limited to unpasteurized juice, raw milk, raw produce, and water. The American Academy of Pediatrics (AAP) requested a subdivision of code 041.4, *Escherichia coli* [*E. coli*] infection, to create a unique code for *Escherichia coli* O157:H7.

**NEOPLASMS**

**Reportable Skin Cancer (173.00-173.99)**

The New York State Cancer Registry has requested that the ICD-9-CM be expanded to allow for the classification of reportable skin cancers that are currently included under category 173, Other malignant neoplasm of skin. The vast majority of skin cancers are either basal or squamous cell, neither of which are reportable conditions to central cancer registries. The codes under category 173 have been expanded to the 5th digit level to allow for the differentiation of reportable and non-reportable (basal and squamous cell) skin cancers.

**DISEASES OF BLOOD AND BLOOD-FORMING ORGANS**

**Thalassemia (282.40-282.47)**

Thalassemia is a family of inherited hemoglobinopathies which in severest form require life-long blood transfusions for survival. Currently there is a single ICD-9-CM code (242.49) to capture all non-sickle-cell related thalassemsias. New codes were created to describe asymptomatic patients (silent carrier or thalassemia trait) to patients with severe disease (thalassemia major).

**Hemorrhagic disorder due to intrinsic circulating anticoagulants (286.52-286.59)**

Acquired hemophilia, or secondary hemophilia, is an autoimmune hemophilia in which antibodies to a coagulation factor develop, usually coagulation factor VIII. A specific code for acquired hemophilia will enable studies of new treatments for this disorder that would otherwise be more difficult or impossible. The code 286.5 was expanded to include acquired hemophilia.

## **MENTAL DISORDERS**

### **Dementia unspecified with and without behavioral disturbance (294.20-294.21)**

A new category 294.2, Dementia, unspecified, was added to identify the presence or absence of behavioral disturbance when the etiology of the dementia is not known.

### **Brain death (348.82)**

The National Association of Children's Hospitals and Related Institutions (NACHRI) requested a new unique code for brain death. When brain death is declared early in the course of the hospital stay, life support is removed within a relatively short period of time. New code 348.82 will clearly identify this patient population for epidemiologic studies.

## **DISEASES OF THE NERVOUS SYSTEM AND SENSE ORGANS**

### **Lambert-Eaton Syndrome (358.30-358.39)**

Lambert-Eaton myasthenic syndrome (LEMS) is an autoimmune disorder of the neuromuscular junction, the site where nerve cells meet muscle cells and helps activate the muscles. Symptoms include muscle weakness, a tingling sensation in the affected areas, fatigue, and dry mouth. LEMS is closely associated with cancer, in particular small cell lung cancer.

### **Glaucoma severity staging (365.70-365.74)**

The American Academy of Ophthalmology requested that new codes be created to be able to capture the stage of disease when coding for the most commonly encountered types of glaucoma. Several other revisions were also requested by the American Academy of Ophthalmology to be consistent with the knowledge and terminology currently in use.

### **Vitreomacular adhesion (379.27)**

Vitreomacular adhesion (VMA) is a condition affecting the macula, a small portion of the retina which is important for central vision. VMA is recognized as a separately identifiable condition that contributes to serious vision threatening conditions.

## **CIRCULATORY SYSTEM**

### **Saddle embolism (415.13, 444.01-444.09)**

Saddle emboli are one of the most severe forms of embolism and are associated with high mortality rates. The most common site for a saddle embolus is the aorta, but they can occur at other sites, such as the pulmonary artery. A unique code for saddle embolus of the aorta was created. Saddle embolus was previously an inclusion term under code 444.0, Arterial embolism and thrombosis of abdominal aorta.

## **RESPIRATORY SYSTEM**

### **Novel Influenza (488.81-488.89)**

Novel influenza A is a nationally reportable disease. It includes all human infections with influenza A viruses that are different from currently circulating human influenza viruses. These include viruses subtyped as nonhuman in origin, and those that are unsubtypable

with standard laboratory methods. The 2009 pandemic influenza is now regularly referred to as 2009 H1N1 influenza, rather than novel H1N1 influenza

**Pneumothorax and Air Leak (512.2, 512.81-512.89)**

The term “postoperative air leak” refers to air leak without significant air in the pleural space due to chest tube inserted either for primary spontaneous pneumothorax or following procedures. Spontaneous pneumothorax may be primary, or secondary and thus related to various other conditions. Codes were created to report these conditions.

**Idiopathic interstitial pneumonia and other lung diseases (516.30-516.37)**

The American Thoracic Society (ATS) and the American College of Chest Physicians (ACCP) requested creation of a specific code for IPF, as well as for a number of other interstitial lung diseases. IPF is one of the idiopathic interstitial pneumonias, a group of scarring lung diseases with distinctive presentations, pathophysiology, and clinical course.

**Postoperative Respiratory Failure (518.51-518.53)**

Unique codes were added at 518.5 to distinguish postoperative acute respiratory failure from less severe respiratory complications of surgery or trauma, within the existing axis of ICD-9-CM codes.

**DIGESTIVE SYSTEM**

**Complications of cystostomy (596.81-596.89)**

NCHS created a new set of codes for complications of a cystostomy, including infections and mechanical complications.

**Hepatopulmonary Syndrome (573.5)**

Hepatopulmonary Syndrome (HPS) is a complication of liver disease HPS is usually found in patients with chronic liver disease, particularly cirrhosis.

**GENITOURINARY SYSTEM**

**Vaginal mesh erosion (629.31-629.32)**

An effective surgical treatment for vaginal vault prolapse is abdominal sacral colpopexy using a graft to suspend the upper vagina to the anterior longitudinal ligament of the sacrum. Synthetic graft material use has been associated with mesh erosion and subsequent pelvic infection (due to the erosion into surrounding organs or tissue). Exposure of the mesh into the vagina can also occur. New subcategory 629.3 was created to identify these conditions.

**PREGNANCY, CHILDBIRTH AND PUERPERIUM**

**Elective C-sections prior to 39 weeks (649.81-649.82)**

The American College of Obstetricians and Gynecologists (ACOG) requested a new code that would specify the onset of labor prior to 39 weeks gestation with delivery. Planned repeat cesarean section deliveries prior to 39 weeks fall into this category.

**INTEGUMENTARY SYSTEM**

**Pilar cyst/Trichilemmal cyst (704.41-704.42)**

Pilar cysts are epidermal cysts formed by an outer wall of keratinizing epithelium without a granular layer, similar to the normal epithelium of the hair follicle at and distal to the sebaceous duct. Pilar cysts are erroneously but frequently referred to as sebaceous cysts. Proliferating trichilemmal cysts are biologically benign, grow rapidly, and may arise de novo. They may be locally aggressive and become large and ulcerated. New codes have been proposed to identify these conditions.

## **DISEASES OF THE MUCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE**

### **Partial Tear of Rotator Cuff (726.13)**

The rotator cuff is the network of four muscles and several tendons that form a covering around the top of the upper arm bone (humerus). A partial tear of the rotator cuff is an area of damage to the rotator cuff tendons, where the tear does not go all the way through the tendons. Currently ICD-9-CM has a unique code for the complete tear of the rotator cuff, but did not have a unique code for a partial tear of the rotator cuff.

## **INJURY AND POISONING**

### **Postoperative Shock (998.00-998.09)**

Shock is not a disease, but a physiologic state characterized by decreased perfusion (i.e., hypoperfusion) of body tissues, resulting in decreased oxygen delivery and local imbalance between oxygen delivery and consumption. New codes specify type of shock; cardiogenic, septic, other or unspecified.

### **Infection Due to Central Venous Catheter (999.31-999.34)**

Central line-associated bloodstream infections (CLABSI) are common, with an estimated 250,000 cases occurring in hospitals in the United States. These cause significantly longer hospitalizations and resource use.

### **Anaphylactic Reaction (999.41-999.49)**

An anaphylactic reaction, or anaphylaxis, is a type of allergic hypersensitivity reaction, which may be caused by a number of different allergens. It may cause itching, hives, and wheezing, among other symptoms, and in severe cases, can cause a drop in blood pressure, which is anaphylactic shock. In ICD-9-CM, codes for anaphylactic reactions have been titled with the term anaphylactic shock with inclusion terms and indexing that indicated all such reactions are included both with and without shock. These codes will be retitled to include the term 'reaction' as the more umbrella term to include both with and without shock. In addition, specific codes for anaphylactic reactions due to administration of blood and blood products, and for anaphylactic reactions due to vaccination have been proposed.

## **V CODES**

Several V codes have been proposed to report personal or family history of specific diseases or disorders such as pulmonary embolism, anaphylaxis, glaucoma, ectopic pregnancy, and inconclusive fetal viability. Also, new V codes for acquired absence of hip joint, knee joint, and other joint have been created.

## **ICD-9-CM VOLUME 3 PROCEDURES**

### **External Ventricular Drainage (02.21-02.22)**

New codes were created to differentiate between procedures that created a passage between the ventricle and another intracranial space and procedure in which a tube is inserted into the ventricle and tunneled under the skin in order to shunt the CSF elsewhere in the body, such as the abdomen.

### **Insertion of Aqueous Drainage Shunt (12.67)**

The Ex-PRESS™ Mini Glaucoma Shunt and other devices are designed to relieve intraocular pressure in patients with glaucoma who have failed medical and surgical interventions (such as trabeculectomy).

### **PTCA and Atherectomy (17.53-17.56)**

Coronary angioplasty and coronary atherectomy procedures are not synonymous and coronary angioplasty may be performed without an atherectomy. Therefore new codes were added to specifically report coronary atherectomy separately from coronary angioplasty. New codes were created for intracranial, extracranial, and other non-coronary atherectomy as well.

### **Transcatheter Cardiac Valve Replacement for Aortic and Pulmonary Valves (35.05-35.09)**

Recently developed transcatheter techniques allow certain heart valves to be replaced without conventional open heart surgery. There are two approaches for the aortic valve replacement: endovascular and transapical and for pulmonary valve replacement the approach is endovascular. The native valve is destroyed in situ and the new valve is implanted replacing structure and function of the native valve.

### **Insertion of implantable pressure sensor with and without lead for cardiac/great vessel hemodynamic monitoring (38.26)**

Codes exist to identify the two components of the implantable pressure sensor system that are implantable: the insertion of the sensor and the implantation of the monitor subcutaneously. Newer systems are being developed where one component of the system is implantable; only the sensor is implanted in a great vessel. An external monitor is used to communicate wirelessly with the sensor. One new code and one revised code title have been created at this time to distinguish between these types of monitoring systems.

### **Sleeve Gastrectomy (43.82)**

The sleeve gastrectomy and laparoscopic banding gastroplasty are common procedures used to treat obesity. Sleeve gastrectomy, also called vertical sleeve gastrectomy (VSG) can be performed using an open or laparoscopic approach. One new procedure code was created to capture the laparoscopic approach.

### **Embolization of Uterine Artery (68.24-68.25)**

Confusion among coders concerning the correct code assignment for uterine artery embolization procedures has been resolved with the creation of a new code to capture this procedure with and without coils.