

ICD-10-CM Expert for Hospitals

The complete official code set

Codes valid from October 1, 2023
through September 30, 2024

SAMPLE

2024

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This data file can be accessed at the following:

<https://www.optumcoding.com/ProductUpdates/>
Title: "2023 ICD-10-CM for Hospital Edits Data File"
Password: Inpatient23

Note: The following icons are placed at the end of the code description.

Age Edits

N Newborn Age: 0

These diagnoses are intended for newborns and neonates and the patient's age must be 0 years.

N47.0 Adherent prepuce, newborn

N

P Pediatric Age: 0-17

These diagnoses are intended for children and the patient's age must be between 0 and 17 years.

L21.1 Seborrheic infantile dermatitis

P

M Maternity Age: 9-64

These diagnoses are intended for childbearing patients between the age of 9 and 64 years.

O02.9 Abnormal product of conception, unspecified

M

A Adult Age: 15-124

These diagnoses are intended for patients between the age of 15 and 124 years.

R54 Age-related physical debility

Frailty
Old age
Senescence
Senile asthenia
Senile debility

EXCLUDES1 age-related cognitive decline (R41.81)
sarcopenia (M62.84)
senile psychosis (F03)
senility NOS (R41.81)

A

Sex Edits

♂ Male diagnosis only

Q98.0 Klinefelter syndrome karyotype 47, XXY

♂

♀ Female diagnosis only

N35.12 Postinfective urethral stricture, not elsewhere classified, female

♀

H1 - H14 Hospital Acquired Condition (HAC)

These codes identify conditions that are high cost or high volume or both, are either a complication or comorbidity (CC) or major complication or comorbidity (MCC) that as a secondary diagnosis results in assignment of a case to a higher-paying MS-DRG. These conditions are reasonably preventable through the application of evidence-based guidelines. If the condition is not present on admission (meaning it developed during the hospital admission), the case will not group to the higher-paying MS-DRG based solely upon the reporting of the HAC code. Many of these HACs are conditional, and are based on reporting the specific diagnosis code(s) in combination with certain procedure codes.

Note: Hospital-acquired conditions do not impact MS-LTC-DRG assignment.

The comprehensive list of HAC tables that coincide with these icon numbers appears in appendix G of this book.

N15.1 Renal and perinephric abscess

MCC H6

CC

CC Condition

This symbol designates a complication or comorbidity diagnosis that may affect DRG assignment. A complication or comorbidity diagnosis, CC condition, is defined as a significant acute disease, a significant acute manifestation of a chronic disease, an advanced or end-stage chronic disease, or a chronic disease associated with systemic physiological decompensation and debility that have consistently greater impact on hospital resources.

A comprehensive list of ICD-10-CM codes considered a CC appears in appendix E of this book.

G90.59 Complex regional pain syndrome I of other specified site

CC

MCC

MCC Condition

This symbol designates a major complication or comorbidity diagnosis that may affect DRG assignment. An MCC condition meets the same criteria as a CC condition but is associated with a higher acuity level and hospital resource consumption is expected to be higher than that for a CC condition. There are fewer conditions that meet the criteria as an MCC than those for a CC condition.

A comprehensive list of ICD-10-CM codes considered an MCC appears in appendix D of this book.

S35.238 Other injury of inferior mesenteric artery

MCC

Note: The assignment of an MS-DRG or MS-LTC-DRG often depends on the presence or absence of a secondary diagnosis code that is designated as an MCC or CC. However, in some instances the MCC or CC designation for that secondary diagnosis code is negated due to its relationship with the principal diagnosis; this is referred to as CC exclusion. The ICD-10 MS-DRG Definitions Manual included with the IPPS final rule provides a list of all principal diagnosis codes that would render ineffective the MCC/CC designation for a particular ICD-10-CM code when used as a secondary diagnosis. Optum has provided this CC exclusion list in an easily searchable data file, which can be accessed at the following:

<https://www.optumcoding.com/ProductUpdates/>
Title: "2023 ICD-10-CM for Hospitals CC Excludes Data File"
Password: Inpatient23

UNS

Unspecified Site

Identifies codes that are considered an MCC or CC but lack specificity in regard to their anatomical location. The medical record documentation should be reviewed carefully, to ensure that no other code within the same category or subcategory can be assigned for greater specificity.

G81.00 Flaccid hemiplegia affecting unspecified side

CC UNS MCC

UPD

Unacceptable Principal Diagnosis

This symbol identifies codes that should not be assigned as principal diagnosis for inpatient admissions. Codes with an unacceptable principal diagnosis edit are considered supplementary — describing circumstances that influence an individual's health status or an additional code — identifying conditions that are not specific manifestations but may be due to an underlying cause.

T48.5X5 Adverse effect of other anti-common-cold drugs

UPD

HIV

HIV-related Condition

This symbol indicates that the condition is considered a major HIV-related diagnosis. When the condition is coded in combination with a diagnosis of human immunodeficiency virus (HIV), code B20, the case will move from MS-DRG/MS-LTC-DRG 977 to MS-DRGs/MS-LTC-DRGs 974-976.

G96.9 Disorder of central nervous system, unspecified

HIV

Appendixes

The additional resources described below have been included as appendixes for the *ICD-10-CM Expert for Hospitals*. These resources further instruct the professional coder on the appropriate application of the ICD-10-CM code set.

Appendix A: Valid 3-character ICD-10-CM Codes

The user may consult this table to confirm that no further specificity, such as the use of 4th, 5th, 6th, or 7th characters or placeholders (X), is necessary. All ICD-10-CM codes that are valid at the three-character level are listed.

Appendix B: Pharmacology List 2023

This reference is a comprehensive but not all-inclusive list of pharmacological agents used to treat acute and/or chronic conditions. Drugs are listed in alphabetical order by their brand and/or generic names along with their drug action and indications for which they may commonly be prescribed. Some drugs have also been mapped to their appropriate long-term drug use Z code.

Appendix C: Z Codes for Long-Term Drug Use with Associated Drugs

This resource correlates Z codes that are used to identify current long-term drug use with a list of drugs that are typically categorized to that class of drug.

Note: These tables are not all-inclusive but list some of the more commonly used drugs.

Appendix D: Major Complication and Comorbidity (MCC) Code List

This is a full listing of conditions considered to be major complications and/or comorbidities that when present as a secondary diagnosis may affect DRG assignment under the Medicare Severity DRG (MS-DRG) system.

Note: This resource provides the most current MCC information that was available at the time of publication using the proposed, version 40, MS-DRG grouper software and Definitions Manual files published with the fiscal 2023 IPPS proposed rule.

Appendix E: Complication and Comorbidity (CC) Code List

This is a full listing of conditions considered to be complications and/or comorbidities that when present as a secondary diagnosis may affect DRG assignment under the MS-DRG system.

Note: This resource provides the most current CC information that was available at the time of publication using the proposed, version 40, MS-DRG grouper software and Definitions Manual files published with the fiscal 2023 IPPS proposed rule.

Appendix F: Present on Admission (POA) Tutorial

This tutorial walks the coder through the process of assigning the appropriate present-on-admission (POA) indicator for inpatient codes

based on the POA reporting guidelines. Detailed scenarios for a variety of situations are provided and discussed.

Appendix G: Hospital Acquired Conditions

This comprehensive table displays codes that identify conditions that are considered reasonably preventable when occurring during the hospital admission and may prevent the case from grouping to a higher-paying MS-DRG. Many of these HACs are conditional and are based on reporting the specific diagnosis code(s) in combination with certain procedure codes, which are also noted in this table.

Note: This resource provides the most current HAC information that was available at the time of publication using the proposed, version 40, MS-DRG grouper software and Definitions Manual files published with the fiscal 2023 IPPS proposed rule.

Appendix H: Centers for Medicare & Medicaid Services (CMS) Hierarchical Condition Categories (HCC) (CMS-HCC)

This resource provides the framework behind CMS's Medicare Advantage (MA) program, a risk-adjustment model developed as a means of compensating health care plans with large numbers of Medicare Part C beneficiaries. It includes a brief synopsis of the evolution of the program from its inception; insight into the various elements needed to predict risk, including the principles used to develop the hierarchical condition categories (HCCs), one of the fundamental components of the risk adjustment model; and a description of the audit process used to ensure the accuracy of payments made to MA plans.

Appendix I: Long-term Care Hospital Prospective Payment System Overview

The long-term care hospital prospective payment system (LTCH PPS) provides payment rates for LTCH facilities certified by Medicare as LTCH with an average length of stay (LOS) of 25 days or longer. This resource summarizes the certification qualifications for LTCH facilities, payment methodology, and current fiscal year PPS updates.

Appendix J: Long-Term Care Hospital Quality Reporting Program

The LTCH QRP is a mandatory reporting component for LTCH facilities certified by Medicare as LTCH with an average LOS of 25 days or longer. Much of the current QRP for LTCH, like other post-acute care providers, is based upon the requirements of the 2014 IMPACT Act. This resource summarizes the current QRP requirements for facilities certified as LTCH under Medicare, including required data set items and market-basket payment impact.

Illustrations

This section includes illustrations of normal anatomy with ICD-10-CM-specific terminology.

	Malignant Primary	Malignant Secondary	Ca in situ	Benign	Uncertain Behavior	Unspecified Behavior
Note: The list below gives the code number for neoplasms by anatomical site. For each site there are six possible code numbers according to whether the neoplasm in question is malignant, benign, in situ, of uncertain behavior, or of unspecified nature. The description of the neoplasm will often indicate which of the six columns is appropriate; e.g., malignant melanoma of skin, benign fibroadenoma of breast, carcinoma in situ of cervix uteri. Where such descriptors are not present, the remainder of the Index should be consulted where guidance is given to the appropriate column for each morphological (histological) variety listed; e.g., Mesonephroma — see Neoplasm, malignant; Embryoma — see also Neoplasm, uncertain behavior; Disease, Bowen's — see Neoplasm, skin, in situ. However, the guidance in the Index can be overridden if one of the descriptors mentioned above is present; e.g., malignant adenoma of colon is coded to C18.9 and not to D12.6 as the adjective "malignant" overrides the Index entry "Adenoma — see also Neoplasm, benign, by site." Codes listed with a dash -, following the code have a required additional character for laterality. The tabular list must be reviewed for the complete code.						
Neoplasm, neoplastic	C80.1	C79.9	D09.9	D36.9	D48.9	D49.9
abdomen,						
abdominal	C76.2	C79.8-✓	D09.8	D36.7	D48.7	D49.89
cavity	C76.2	C79.8-✓	D09.8	D36.7	D48.7	D49.89
organ	C76.2	C79.8-✓	D09.8	D36.7	D48.7	D49.89
viscera	C76.2	C79.8-✓	D09.8	D36.7	D48.7	D49.89
wall — see also						
Neoplasm,						
abdomen, wall,	C44.509	C79.2	D04.5	D23.5	D48.5	D49.2
skin						
connective						
tissue	C49.4	C79.8-✓	—	D21.4	D48.1	D49.2
skin	C44.509	—	—	—	—	—
basal cell						
carcinoma	C44.519	—	—	—	—	—
specified type						
NEC	C44.599	—	—	—	—	—
squamous cell						
carcinoma	C44.529	—	—	—	—	—
abdominopelvic	C76.8	C79.8-✓	—	D36.7	D48.7	D49.89
accessory sinus — see						
Neoplasm, sinus						
acoustic nerve	C72.4-✓	C79.49	—	D33.3	D43.3	D49.7
adenoid (pharynx)						
(tissue)	C11.1	C79.89	D00.08	D10.6	D37.05	D49.0
adipose tissue — see						
also Neoplasm,						
connective						
tissue	C49.4	C79.89	—	D21.9	D48.1	D49.2
adnexa (uterine)	C57.4	C79.89	D07.39	D28.7	D39.8	D49.59
adrenal	C74.9-✓	C79.7-✓	D09.3	D35.0-✓	D44.1-✓	D49.7
capsule	C74.9-✓	C79.7-✓	D09.3	D35.0-✓	D44.1-✓	D49.7
cortex	C74.9-✓	C79.7-✓	D09.3	D35.0-✓	D44.1-✓	D49.7
gland	C74.9-✓	C79.7-✓	D09.3	D35.0-✓	D44.1-✓	D49.7
medulla	C74.1-✓	C79.7-✓	D09.3	D35.0-✓	D44.1-✓	D49.7
ala nasi (external) —						
see also Neoplasm,						
skin, nose	C44.301	C79.2	D04.39	D23.39	D48.5	D49.2
alimentary canal or						
tract NEC	C26.9	C78.80	D01.9	D13.9	D37.9	D49.0
alveolar	C03.9	C79.89	D00.03	D10.39	D37.09	D49.0
mucosa	C03.9	C79.89	D00.03	D10.39	D37.09	D49.0
lower	C03.1	C79.89	D00.03	D10.39	D37.09	D49.0
upper	C03.0	C79.89	D00.03	D10.39	D37.09	D49.0
ridge or process	C41.1	C79.51	—	D16.5	D48.0	D49.2
carcinoma	C03.9	C79.8-✓	—	—	—	—
lower	C03.1	C79.8-✓	—	—	—	—
upper	C03.0	C79.8-✓	—	—	—	—
lower	C41.1	C79.51	—	D16.5	D48.0	D49.2
mucosa	C03.9	C79.89	D00.03	D10.39	D37.09	D49.0
lower	C03.1	C79.89	D00.03	D10.39	D37.09	D49.0
upper	C03.0	C79.89	D00.03	D10.39	D37.09	D49.0
upper	C41.0	C79.51	—	D16.4	D48.0	D49.2
sulcus	C06.1	C79.89	D00.02	D10.39	D37.09	D49.0
alveolus	C03.9	C79.89	D00.03	D10.39	D37.09	D49.0
lower	C03.1	C79.89	D00.03	D10.39	D37.09	D49.0
upper	C03.0	C79.89	D00.03	D10.39	D37.09	D49.0
ampulla of Vater	C24.1	C78.89	D01.5	D13.5	D37.6	D49.0
ankle NEC	C76.5-✓	C79.89	D04.7-✓	D36.7	D48.7	D49.89
anorectum, anorectal						
(junction)	C21.8	C78.5	D01.3	D12.9	D37.8	D49.0
antecubital fossa or						
space	C76.4-✓	C79.89	D04.6-✓	D36.7	D48.7	D49.89
Neoplasm, neoplastic						
— continued						
antrum (Highmore)						
(maxillary)	C31.0	C78.39	D02.3	D14.0	D38.5	D49.1
pyloric	C16.3	C78.89	D00.2	D13.1	D37.1	D49.0
tympanicum	C30.1	C78.39	D02.3	D14.0	D38.5	D49.1
anus, anal	C21.0	C78.5	D01.3	D12.9	D37.8	D49.0
canal	C21.1	C78.5	D01.3	D12.9	D37.8	D49.0
cloacogenic						
zone	C21.2	C78.5	D01.3	D12.9	D37.8	D49.0
margin — see also						
Neoplasm, anus,						
skin	C44.500	C79.2	D04.5	D23.5	D48.5	D49.2
overlapping lesion						
with						
rectosigmoid						
junction or	C21.8	—	—	—	—	—
rectum	C44.500	C79.2	D04.5	D23.5	D48.5	D49.2
skin						
basal cell	C44.510	—	—	—	—	—
carcinoma						
specified type	C44.590	—	—	—	—	—
NEC						
squamous cell						
carcinoma	C44.520	—	—	—	—	—
sphincter	C21.1	C78.5	D01.3	D12.9	D37.8	D49.0
aorta (thoracic)	C49.3	C79.89	—	D21.3	D48.1	D49.2
abdominal	C49.4	C79.89	—	D21.4	D48.1	D49.2
aortic body	C75.5	C79.89	—	D35.6	D44.7	D49.7
aponeurosis	C49.9	C79.89	—	D21.9	D48.1	D49.2
palmar	C49.1-✓	C79.89	—	D21.1-✓	D48.1	D49.2
plantar	C49.2-✓	C79.89	—	D21.2-✓	D48.1	D49.2
appendix	C18.1	C78.5	D01.0	D12.1	D37.3	D49.0
arachnoid	C70.9	C79.49	—	D32.9	D42.9	D49.7
cerebral	C70.0	C79.32	—	D32.0	D42.0	D49.7
spinal	C70.1	C79.49	—	D32.1	D42.1	D49.7
areola	C50.0-✓	C79.81	D05-✓	D24-✓	D48.6-✓	D49.3
arm NEC	C76.4-✓	C79.89	D04.6-✓	D36.7	D48.7	D49.89
artery — see Neoplasm,						
connective tissue						
aryepiglottic fold	C13.1	C79.89	D00.08	D10.7	D37.05	D49.0
hypopharyngeal						
aspect	C13.1	C79.89	D00.08	D10.7	D37.05	D49.0
laryngeal aspect	C32.1	C78.39	D02.0	D14.1	D38.0	D49.1
marginal zone	C13.1	C79.89	D00.08	D10.7	D37.05	D49.0
arytenoid						
(cartilage)	C32.3	C78.39	D02.0	D14.1	D38.0	D49.1
fold — see Neoplasm,						
aryepiglottic						
associated with						
transplanted						
organ	C80.2	—	—	—	—	—
atlas	C41.2	C79.51	—	D16.6	D48.0	D49.2
atrium, cardiac	C38.0	C79.89	—	D15.1	D48.7	D49.89
auditory						
canal (external)	C44.20-✓	C79.2	D04.2-✓	D23.2-✓	D48.5	D49.2
(skin)						
internal	C30.1	C78.39	D02.3	D14.0	D38.5	D49.1
nerve	C72.4-✓	C79.49	—	D33.3	D43.3	D49.7
tube	C30.1	C78.39	D02.3	D14.0	D38.5	D49.1
opening	C11.2	C79.89	D00.08	D10.6	D37.05	D49.0
auricle, ear — see also						
Neoplasm, skin,						
ear	C44.20-✓	C79.2	D04.2-✓	D23.2-✓	D48.5	D49.2
auricular canal						
(external) — see						
also Neoplasm, skin,						
ear	C44.20-✓	C79.2	D04.2-✓	D23.2-✓	D48.5	D49.2
internal	C30.1	C78.39	D02.3	D14.0	D38.5	D49.2
autonomic nerve or						
nervous system						
NEC (see Neoplasm,						
nerve, peripheral)						
axilla, axillary	C76.1	C79.89	D09.8	D36.7	D48.7	D49.89
fold — see also						
Neoplasm, skin,						
trunk	C44.509	C79.2	D04.5	D23.5	D48.5	D49.2
back NEC	C76.8	C79.89	D04.5	D36.7	D48.7	D49.89
Bartholin's gland	C51.0	C79.82	D07.1	D28.0	D39.8	D49.59
basal ganglia	C71.0	C79.31	—	D33.0	D43.0	D49.6
basis pedunculi	C71.7	C79.31	—	D33.1	D43.1	D49.6
bile or biliary						
(tract)	C24.9	C78.89	D01.5	D13.5	D37.6	D49.0

- C7A.1 Malignant poorly differentiated neuroendocrine tumors** CC HCC
 Malignant poorly differentiated neuroendocrine tumor NOS
 Malignant poorly differentiated neuroendocrine carcinoma, any site
 High grade neuroendocrine carcinoma, any site
- C7A.8 Other malignant neuroendocrine tumors** CC HCC
 AHA: 2019,3Q,7

Secondary neuroendocrine tumors (C7B)

✓4th C7B Secondary neuroendocrine tumors

Use additional code to identify any functional activity

✓5th C7B.0 Secondary carcinoid tumors

AHA: 2019,3Q,7

DEF: Specific type of slow-growing neuroendocrine tumors. Carcinoid tumors occur most commonly in the hormone producing cells of the gastrointestinal tracts and can also occur in the pancreas, testes, ovaries, or lungs.

- C7B.00 Secondary carcinoid tumors, unspecified site** HCC
- C7B.01 Secondary carcinoid tumors of distant lymph nodes** CC HCC
- C7B.02 Secondary carcinoid tumors of liver** CC HCC
- C7B.03 Secondary carcinoid tumors of bone** CC HCC
- C7B.04 Secondary carcinoid tumors of peritoneum** CC HCC
 Mesentery metastasis of carcinoid tumor
- C7B.09 Secondary carcinoid tumors of other sites** CC HCC
- C7B.1 Secondary Merkel cell carcinoma** HCC
 Merkel cell carcinoma nodal presentation
 Merkel cell carcinoma visceral metastatic presentation
- C7B.8 Other secondary neuroendocrine tumors** CC HCC
 AHA: 2019,3Q,7

Malignant neoplasms of ill-defined, other secondary and unspecified sites (C76-C80)

✓4th C76 Malignant neoplasm of other and ill-defined sites

EXCLUDES 1 malignant neoplasm of female genitourinary tract NOS (C57.9)
 malignant neoplasm of male genitourinary tract NOS (C63.9)
 malignant neoplasm of lymphoid, hematopoietic and related tissue (C81-C96)
 malignant neoplasm of skin (C44.-)
 malignant neoplasm of unspecified site NOS (C80.1)

- C76.0 Malignant neoplasm of head, face and neck** HCC
 Malignant neoplasm of cheek NOS
 Malignant neoplasm of nose NOS
- C76.1 Malignant neoplasm of thorax** HCC
 Intrathoracic malignant neoplasm NOS
 Malignant neoplasm of axilla NOS
 Thoracic malignant neoplasm NOS
- C76.2 Malignant neoplasm of abdomen** HCC
- C76.3 Malignant neoplasm of pelvis** HCC
 Malignant neoplasm of groin NOS
 Malignant neoplasm of sites overlapping systems within the pelvis
 Rectovaginal (septum) malignant neoplasm
 Rectovesical (septum) malignant neoplasm
- ✓5th C76.4 Malignant neoplasm of upper limb**
- C76.40 Malignant neoplasm of unspecified upper limb** HCC
- C76.41 Malignant neoplasm of right upper limb** HCC
- C76.42 Malignant neoplasm of left upper limb** HCC
- ✓5th C76.5 Malignant neoplasm of lower limb**
- C76.50 Malignant neoplasm of unspecified lower limb** HCC
- C76.51 Malignant neoplasm of right lower limb** HCC
- C76.52 Malignant neoplasm of left lower limb** HCC
- C76.8 Malignant neoplasm of other specified ill-defined sites** HCC
 Malignant neoplasm of overlapping ill-defined sites

✓4th C77 Secondary and unspecified malignant neoplasm of lymph nodes

EXCLUDES 1 malignant neoplasm of lymph nodes, specified as primary (C81-C86, C88, C96.-)
 mesentery metastasis of carcinoid tumor (C7B.04)
 secondary carcinoid tumors of distant lymph nodes (C7B.01)

- C77.0 Secondary and unspecified malignant neoplasm of lymph nodes of head, face and neck** CC HCC
 Secondary and unspecified malignant neoplasm of supraclavicular lymph nodes
- C77.1 Secondary and unspecified malignant neoplasm of intrathoracic lymph nodes** CC HCC
- C77.2 Secondary and unspecified malignant neoplasm of intra-abdominal lymph nodes** CC HCC
- C77.3 Secondary and unspecified malignant neoplasm of axilla and upper limb lymph nodes** CC HCC
 Secondary and unspecified malignant neoplasm of pectoral lymph nodes
- C77.4 Secondary and unspecified malignant neoplasm of inguinal and lower limb lymph nodes** CC HCC
- C77.5 Secondary and unspecified malignant neoplasm of intrapelvic lymph nodes** CC HCC
- C77.8 Secondary and unspecified malignant neoplasm of lymph nodes of multiple regions** CC HCC
- C77.9 Secondary and unspecified malignant neoplasm of lymph node, unspecified** CC HCC

✓4th C78 Secondary malignant neoplasm of respiratory and digestive organs

EXCLUDES 1 secondary carcinoid tumors of liver (C7B.02)
 secondary carcinoid tumors of peritoneum (C7B.04)
EXCLUDES 2 lymph node metastases (C77.0)

✓5th C78.0 Secondary malignant neoplasm of lung

AHA: 2019,1Q,16

- C78.00 Secondary malignant neoplasm of unspecified lung** CC HCC
- C78.01 Secondary malignant neoplasm of right lung** CC HCC
- C78.02 Secondary malignant neoplasm of left lung** CC HCC
- C78.1 Secondary malignant neoplasm of mediastinum** CC HCC
- C78.2 Secondary malignant neoplasm of pleura** CC HCC
- ✓5th C78.3 Secondary malignant neoplasm of other and unspecified respiratory organs**
- C78.30 Secondary malignant neoplasm of unspecified respiratory organ** CC HCC
- C78.39 Secondary malignant neoplasm of other respiratory organs** CC HCC
- C78.4 Secondary malignant neoplasm of small intestine** CC HCC
- C78.5 Secondary malignant neoplasm of large intestine and rectum** CC HCC
- C78.6 Secondary malignant neoplasm of retroperitoneum and peritoneum** CC HCC
 AHA: 2017,2Q,12
- C78.7 Secondary malignant neoplasm of liver and intrahepatic bile duct** CC HCC
- ✓5th C78.8 Secondary malignant neoplasm of other and unspecified digestive organs**
- C78.80 Secondary malignant neoplasm of unspecified digestive organ** CC HCC
- C78.89 Secondary malignant neoplasm of other digestive organs** CC HCC
 Code also exocrine pancreatic insufficiency (K86.81)

✓4th C79 Secondary malignant neoplasm of other and unspecified sites

EXCLUDES 1 secondary carcinoid tumors (C7B.-)
 secondary neuroendocrine tumors (C7B.-)

- ✓5th C79.0 Secondary malignant neoplasm of kidney and renal pelvis**
- C79.00 Secondary malignant neoplasm of unspecified kidney and renal pelvis** CC HCC
- C79.01 Secondary malignant neoplasm of right kidney and renal pelvis** CC HCC
- C79.02 Secondary malignant neoplasm of left kidney and renal pelvis** CC HCC
- ✓5th C79.1 Secondary malignant neoplasm of bladder and other and unspecified urinary organs**
- C79.10 Secondary malignant neoplasm of unspecified urinary organs** CC HCC

Chapter 4. Endocrine, Nutritional and Metabolic Diseases (E00–E89)

Chapter-specific Guidelines with Coding Examples

The chapter-specific guidelines from the ICD-10-CM Official Guidelines for Coding and Reporting have been provided below. Along with these guidelines are coding examples, contained in the shaded boxes, that have been developed to help illustrate the coding and/or sequencing guidance found in these guidelines.

a. Diabetes mellitus

The diabetes mellitus codes are combination codes that include the type of diabetes mellitus, the body system affected, and the complications affecting that body system. As many codes within a particular category as are necessary to describe all of the complications of the disease may be used. They should be sequenced based on the reason for a particular encounter. Assign as many codes from categories E08–E13 as needed to identify all of the associated conditions that the patient has.

Patient is seen for poorly controlled diabetes, type 2, with diabetic polyneuropathy and diabetic retinopathy with macular edema

E11.65 Type 2 diabetes mellitus with hyperglycemia

E11.311 Type 2 diabetes mellitus with unspecified diabetic retinopathy with macular edema

E11.42 Type 2 diabetes mellitus with diabetic polyneuropathy

Explanation: Use as many codes to describe the diabetic complications as needed. Many are combination codes that describe more than one condition. Code first the reason for the encounter. "Poorly controlled" is described as "with hyperglycemia." Diabetes documented as "uncontrolled" is not assumed to be hyperglycemic but can be classified to either hyperglycemia or hypoglycemia. If documentation is not clear, the provider must be queried so that the appropriate code can be reported.

1) Type of diabetes

The age of a patient is not the sole determining factor, though most type 1 diabetes develop the condition before reaching puberty. For this reason, type 1 diabetes mellitus is also referred to as juvenile diabetes.

A 45-year-old patient is diagnosed with type 1 diabetes

E10.9 Type 1 diabetes mellitus without complications

Explanation: Although most type 1 diabetes are diagnosed in childhood or adolescence, it can also begin in adults.

2) Type of diabetes mellitus not documented

If the type of diabetes mellitus is not documented in the medical record the default is E11.-, Type 2 diabetes mellitus.

H & P lists diabetes and hypertension on patient problem list

E11.9 Type 2 diabetes mellitus without complications

I10 Essential (primary) hypertension

Explanation: Since the type of diabetes was not documented and no complications were noted, the default code is E11.9.

3) Diabetes mellitus and the use of insulin, oral hypoglycemics, and injectable non-insulin drugs

If the documentation in a medical record does not indicate the type of diabetes but does indicate that the patient uses insulin, code E11.-, Type 2 diabetes mellitus, should be assigned. Additional code(s) should be assigned from category Z79 to identify the long-term (current) use of insulin, oral hypoglycemic drugs, or injectable non-insulin antidiabetic, as follows:

If the patient is treated with both oral **hypoglycemic drugs** and insulin, both code Z79.4, Long term (current) use of insulin, and code Z79.84, Long term (current) use of oral hypoglycemic drugs, should be assigned.

If the patient is treated with both insulin and an injectable non-insulin antidiabetic drug, assign codes Z79.4, Long term (current) use of insulin, and **Z79.85, Long-term (current) use of injectable non-insulin antidiabetic drugs.**

If the patient is treated with both oral hypoglycemic drugs and an injectable non-insulin antidiabetic drug, assign codes Z79.84, Long term (current) use of oral hypoglycemic drugs, and **Z79.85, Long-term (current) use of injectable non-insulin antidiabetic drugs.**

Code Z79.4 should not be assigned if insulin is given temporarily to bring a type 2 patient's blood sugar under control during an encounter.

Type 2 diabetic patient on daily metformin and Victoza is admitted in ketoacidosis, insulin given to stabilize blood sugars and discontinued at discharge

E11.10 Type 2 diabetes mellitus with ketoacidosis without coma

Z79.84 Long term (current) use of oral hypoglycemic drugs

Z79.85 Long term (current) use of injectable non-insulin anti-diabetic drugs

Explanation: Documentation indicates the patient is on an oral antidiabetic medication (metformin) and an injectable noninsulin antidiabetic medication (Victoza). Although insulin was given to the patient during the encounter, it was discontinued at discharge, indicating that the patient does not regularly use insulin. A Z code representing long-term use of the oral drug and long-term use of the injectable medication can be applied. Applying code Z79.4 to represent long-term use of insulin would be inappropriate.

4) Diabetes mellitus in pregnancy and gestational diabetes

See Section I.C.15. Diabetes mellitus in pregnancy.

See Section I.C.15. Gestational (pregnancy induced) diabetes

5) Complications due to insulin pump malfunction

(a) Underdose of insulin due to insulin pump failure

An underdose of insulin due to an insulin pump failure should be assigned to a code from subcategory T85.6, Mechanical complication of other specified internal and external prosthetic devices, implants and grafts, that specifies the type of pump malfunction, as the principal or first-listed code, followed by code T38.3X6-, Underdosing of insulin and oral hypoglycemic [antidiabetic] drugs. Additional codes for the type of diabetes mellitus and any associated complications due to the underdosing should also be assigned.

A 24-year-old type 1 diabetic male treated in ED for hyperglycemia; insulin pump found to be malfunctioning and underdosing

T85.614A Breakdown (mechanical) of insulin pump, initial encounter

T38.3X6A Underdosing of insulin and oral hypoglycemic [antidiabetic] drugs, initial encounter

E10.65 Type 1 diabetes mellitus with hyperglycemia

Explanation: The complication code for the mechanical breakdown of the pump is sequenced first, followed by the underdosing code and type of diabetes with complication. Code all other diabetic complication codes necessary to describe the patient's condition.

(b) Overdose of insulin due to insulin pump failure

The principal or first-listed code for an encounter due to an insulin pump malfunction resulting in an overdose of insulin, should also be T85.6-, Mechanical complication of other specified internal and external prosthetic devices, implants and grafts, followed by code T38.3X1-, Poisoning by insulin and oral hypoglycemic [antidiabetic] drugs, accidental (unintentional).

A 24-year-old type 1 diabetic male found down with diabetic coma, brought into ED and treated for hypoglycemia; insulin pump found to be malfunctioning and overdosing

T85.614A Breakdown (mechanical) of insulin pump, initial encounter

T38.3X1A Poisoning by insulin and oral hypoglycemic [antidiabetic] drugs, accidental (unintentional), initial encounter

E10.641 Type 1 diabetes mellitus with hypoglycemia with coma

Explanation: The complication code for the mechanical breakdown of the pump is sequenced first, followed by the poisoning code and type of diabetes with complication. All the characters in the combination code must be used to form a valid code and to fully describe the type of diabetes, the hypoglycemia, and the coma.

Chapter 9. Diseases of the Circulatory System (I00-I99)

EXCLUDES 2 certain conditions originating in the perinatal period (P04-P96)
 certain infectious and parasitic diseases (A00-B99)
 complications of pregnancy, childbirth and the puerperium (O00-O9A)
 congenital malformations, deformations, and chromosomal abnormalities (Q00-Q99)
 endocrine, nutritional and metabolic diseases (E00-E88)
 injury, poisoning and certain other consequences of external causes (S00-T88)
 neoplasms (C00-D49)
 symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified (R00-R94)
 systemic connective tissue disorders (M30-M36)
 transient cerebral ischemic attacks and related syndromes (G45.-)

This chapter contains the following blocks:

I00-I02 Acute rheumatic fever
 I05-I09 Chronic rheumatic heart diseases
 I10-I16 Hypertensive diseases
 I20-I25 Ischemic heart diseases
 I26-I28 Pulmonary heart disease and diseases of pulmonary circulation
 I30-I5A Other forms of heart disease
 I60-I69 Cerebrovascular diseases
 I70-I79 Diseases of arteries, arterioles and capillaries
 I80-I89 Diseases of veins, lymphatic vessels and lymph nodes, not elsewhere classified
 I95-I99 Other and unspecified disorders of the circulatory system

Acute rheumatic fever (I00-I02)

DEF: Rheumatic fever: Inflammatory disease that can follow a throat infection by group A streptococci. Complications can involve the joints (arthritis), subcutaneous tissue (nodules), skin (erythema marginatum), heart (carditis), or brain (chorea).

I00 Rheumatic fever without heart involvement

INCLUDES arthritis, rheumatic, acute or subacute

EXCLUDES 1 rheumatic fever with heart involvement (I01.0-I01.9)

✓4th I01 Rheumatic fever with heart involvement

EXCLUDES 1 chronic diseases of rheumatic origin (I05-I09) unless rheumatic fever is also present or there is evidence of reactivation or activity of the rheumatic process

I01.0 Acute rheumatic pericarditis

Any condition in I00 with pericarditis

Rheumatic pericarditis (acute)

EXCLUDES 1 acute pericarditis not specified as rheumatic (I30.-)

I01.1 Acute rheumatic endocarditis

Any condition in I00 with endocarditis or valvulitis

Acute rheumatic valvulitis

I01.2 Acute rheumatic myocarditis

Any condition in I00 with myocarditis

I01.8 Other acute rheumatic heart disease

Any condition in I00 with other or multiple types of heart involvement

Acute rheumatic pancarditis

I01.9 Acute rheumatic heart disease, unspecified

Any condition in I00 with unspecified type of heart involvement

Rheumatic carditis, acute

Rheumatic heart disease, active or acute

✓4th I02 Rheumatic chorea

INCLUDES Sydenham's chorea

EXCLUDES 1 chorea NOS (G25.5)

Huntington's chorea (G10)

I02.0 Rheumatic chorea with heart involvement

Chorea NOS with heart involvement

Rheumatic chorea with heart involvement of any type classifiable under I01.-

I02.9 Rheumatic chorea without heart involvement

Rheumatic chorea NOS

Chronic rheumatic heart diseases (I05-I09)**✓4th I05 Rheumatic mitral valve diseases**

INCLUDES conditions classifiable to both I05.0 and I05.2-I05.9, whether specified as rheumatic or not

EXCLUDES 1 mitral valve disease specified as nonrheumatic (I34.-)
 mitral valve disease with aortic and/or tricuspid valve involvement (I08.-)

I05.0 Rheumatic mitral stenosis

Mitral (valve) obstruction (rheumatic)

I05.1 Rheumatic mitral insufficiency

Rheumatic mitral incompetence

Rheumatic mitral regurgitation

EXCLUDES 1 mitral insufficiency not specified as rheumatic (I34.0)

I05.2 Rheumatic mitral stenosis with insufficiency

Rheumatic mitral stenosis with incompetence or regurgitation

I05.8 Other rheumatic mitral valve diseases

Rheumatic mitral (valve) failure

I05.9 Rheumatic mitral valve disease, unspecified

Rheumatic mitral (valve) disorder (chronic) NOS

✓4th I06 Rheumatic aortic valve diseases

EXCLUDES 1 aortic valve disease not specified as rheumatic (I35.-)

aortic valve disease with mitral and/or tricuspid valve involvement (I08.-)

I06.0 Rheumatic aortic stenosis

Rheumatic aortic (valve) obstruction

I06.1 Rheumatic aortic insufficiency

Rheumatic aortic incompetence

Rheumatic aortic regurgitation

I06.2 Rheumatic aortic stenosis with insufficiency

Rheumatic aortic stenosis with incompetence or regurgitation

I06.8 Other rheumatic aortic valve diseases**I06.9 Rheumatic aortic valve disease, unspecified**

Rheumatic aortic (valve) disease NOS

✓4th I07 Rheumatic tricuspid valve diseases

INCLUDES rheumatic tricuspid valve diseases specified as rheumatic or unspecified

EXCLUDES 1 tricuspid valve disease specified as nonrheumatic (I36.-)

tricuspid valve disease with aortic and/or mitral valve involvement (I08.-)

I07.0 Rheumatic tricuspid stenosis

Tricuspid (valve) stenosis (rheumatic)

I07.1 Rheumatic tricuspid insufficiency

Tricuspid (valve) insufficiency (rheumatic)

I07.2 Rheumatic tricuspid stenosis and insufficiency**I07.8 Other rheumatic tricuspid valve diseases****I07.9 Rheumatic tricuspid valve disease, unspecified**

Rheumatic tricuspid valve disorder NOS

✓4th I08 Multiple valve diseases

INCLUDES multiple valve diseases specified as rheumatic or unspecified

EXCLUDES 1 endocarditis, valve unspecified (I38)

multiple valve disease specified as nonrheumatic (I34.-, I35.-, I36.-, I37.-, I38.-, Q22.-, Q23.-, Q24.8-)
 rheumatic valve disease NOS (I09.1)

I08.0 Rheumatic disorders of both mitral and aortic valves

Involvement of both mitral and aortic valves specified as rheumatic or unspecified

AHA: 2019,2Q,5

I08.1 Rheumatic disorders of both mitral and tricuspid valves**I08.2 Rheumatic disorders of both aortic and tricuspid valves****I08.3 Combined rheumatic disorders of mitral, aortic and tricuspid valves****I08.8 Other rheumatic multiple valve diseases****I08.9 Rheumatic multiple valve disease, unspecified****✓4th I09 Other rheumatic heart diseases****I09.0 Rheumatic myocarditis**

EXCLUDES 1 myocarditis not specified as rheumatic (I51.4)

I09.1 Rheumatic diseases of endocardium, valve unspecified

Rheumatic endocarditis (chronic)

Rheumatic valvulitis (chronic)

EXCLUDES 1 endocarditis, valve unspecified (I38)

I09.2 Chronic rheumatic pericarditis

Adherent pericardium, rheumatic

Chronic rheumatic mediastinopericarditis

Chronic rheumatic myopericarditis

EXCLUDES 1 chronic pericarditis not specified as rheumatic (I31.-)

✓5th I09.8 Other specified rheumatic heart diseases**I09.81 Rheumatic heart failure**

Use additional code to identify type of heart failure (I50.-)

I09.89 Other specified rheumatic heart diseases

Rheumatic disease of pulmonary valve

✓4# J10 Influenza due to **other identified influenza virus**

INCLUDES influenza A (non-novel)
influenza B
influenza C

EXCLUDES 1 influenza due to avian influenza virus (J09.X-)
influenza due to swine flu (J09.X-)
influenza due to unidentified influenza virus (J11.-)

✓5# J10.0 Influenza due to other identified influenza virus with **pneumonia**

Code also associated lung abscess, if applicable (J85.1)

J10.00 Influenza due to other identified influenza virus with unspecified type of pneumonia **MCC****J10.01 Influenza due to other identified influenza virus with **the same other identified influenza virus pneumonia**** **MCC****J10.08 Influenza due to other identified influenza virus with other specified pneumonia** **HIV MCC**

Code also other specified type of pneumonia

J10.1 Influenza due to other identified influenza virus with **other respiratory manifestations**

Influenza due to other identified influenza virus NOS
Influenza due to other identified influenza virus with laryngitis
Influenza due to other identified influenza virus with pharyngitis
Influenza due to other identified influenza virus with upper respiratory symptoms

Use additional code for associated pleural effusion, if applicable (J91.8)

Use additional code for associated sinusitis, if applicable (J01.-)
AHA: 2016,3Q,10-11

J10.2 Influenza due to other identified influenza virus with **gastrointestinal manifestations**

Influenza due to other identified influenza virus gastroenteritis
EXCLUDES 1 "intestinal flu" [viral gastroenteritis] (A08.-)

✓5# J10.8 Influenza due to other identified influenza virus with other manifestations**J10.81 Influenza due to other identified influenza virus with **encephalopathy******J10.82 Influenza due to other identified influenza virus with **myocarditis******J10.83 Influenza due to other identified influenza virus with **otitis media****

Use additional code for any associated perforated tympanic membrane (H72.-)

J10.89 Influenza due to other identified influenza virus with other manifestations

Use additional codes to identify the manifestations

✓4# J11 Influenza due to **unidentified influenza virus****✓5# J11.0 Influenza due to unidentified influenza virus with **pneumonia****

Code also associated lung abscess, if applicable (J85.1)
AHA: 2016,3Q,11

J11.00 Influenza due to unidentified influenza virus with unspecified type of pneumonia **MCC**

Influenza with pneumonia NOS

J11.08 Influenza due to unidentified influenza virus with **specified pneumonia** **MCC**

Code also other specified type of pneumonia

J11.1 Influenza due to unidentified influenza virus with **other respiratory manifestations**

Influenza NOS
Influenzal laryngitis NOS
Influenzal pharyngitis NOS
Influenza with upper respiratory symptoms NOS

Use additional code for associated pleural effusion, if applicable (J91.8)

Use additional code for associated sinusitis, if applicable (J01.-)

J11.2 Influenza due to unidentified influenza virus with **gastrointestinal manifestations**

Influenza gastroenteritis NOS
EXCLUDES 1 "intestinal flu" [viral gastroenteritis] (A08.-)

✓5# J11.8 Influenza due to unidentified influenza virus with other manifestations**J11.81 Influenza due to unidentified influenza virus with **encephalopathy****

Influenzal encephalopathy NOS

J11.82 Influenza due to unidentified influenza virus with **myocarditis**

Influenzal myocarditis NOS

J11.83 Influenza due to unidentified influenza virus with **otitis media**

Influenzal otitis media NOS

Use additional code for any associated perforated tympanic membrane (H72.-)

J11.89 Influenza due to unidentified influenza virus with other manifestations

Use additional codes to identify the manifestations

✓4# J12 Viral pneumonia, not elsewhere classified

INCLUDES bronchopneumonia due to viruses other than influenza viruses

Code first associated influenza, if applicable (J09.X1, J10.0-, J11.0-)

Code also associated abscess, if applicable (J85.1)

EXCLUDES 1 aspiration pneumonia due to anesthesia during labor and delivery (O74.0)

aspiration pneumonia due to anesthesia during pregnancy (O29)

aspiration pneumonia due to anesthesia during puerperium (O89.0)

aspiration pneumonia due to solids and liquids (J69.-)

aspiration pneumonia NOS (J69.0)

congenital pneumonia (P23.0)

congenital rubella pneumonitis (P35.0)

interstitial pneumonia NOS (J84.9)

lipid pneumonia (J69.1)

neonatal aspiration pneumonia (P24.-)

AHA: 2020,2Q,28; 2019,1Q,35; 2018,3Q,24; 2016,3Q,15; 2013,4Q,118

J12.0 Adenoviral pneumonia **MCC****J12.1 Respiratory syncytial virus pneumonia** **MCC**

RSV pneumonia

J12.2 Parainfluenza virus pneumonia **MCC****J12.3 Human metapneumovirus pneumonia** **HIV MCC****✓5# J12.8 Other viral pneumonia****J12.81 Pneumonia due to **SARS-associated coronavirus**** **HIV MCC**

Severe acute respiratory syndrome NOS

DEF: Inflammation of the lungs with consolidation, caused by the severe adult respiratory syndrome (SARS)-associated coronavirus or SARS-CoV. This pneumonia should not be confused with that caused by SARS-CoV-2 (COVID-19).

J12.82 Pneumonia due to **coronavirus disease 2019** **HIV MCC UPD**

Pneumonia due to 2019 novel coronavirus (SARS-CoV-2)

Pneumonia due to COVID-19

Code first COVID-19 (U07.1)

AHA: 2021,1Q,25-30,31-49

J12.89 Other viral pneumonia **HIV MCC**

AHA: 2021,1Q,33-34; 2020,2Q,8,11; 2020,1Q,34-36

J12.9 Viral pneumonia, unspecified **HIV MCC****J13 Pneumonia due to **Streptococcus pneumoniae**** **HIV MCC MCC**

Bronchopneumonia due to *S. pneumoniae*

Code first associated influenza, if applicable (J09.X1, J10.0-, J11.0-)

Code also associated abscess, if applicable (J85.1)

EXCLUDES 1 congenital pneumonia due to *S. pneumoniae* (P23.6)

lobar pneumonia, unspecified organism (J18.1)

pneumonia due to other streptococci (J15.3-J15.4)

AHA: 2020,2Q,28; 2019,1Q,35; 2018,3Q,24; 2016,3Q,15; 2013,4Q,118

J14 Pneumonia due to **Hemophilus influenzae** **HIV MCC MCC**

Bronchopneumonia due to *H. influenzae*

Code first associated influenza, if applicable (J09.X1, J10.0-, J11.0-)

Code also associated abscess, if applicable (J85.1)

EXCLUDES 1 congenital pneumonia due to *H. influenzae* (P23.6)

AHA: 2020,2Q,28; 2019,1Q,35; 2018,3Q,24; 2016,3Q,15; 2013,4Q,118


026.21	Pregnancy care for patient with recurrent pregnancy loss, first trimester	M ♀
026.22	Pregnancy care for patient with recurrent pregnancy loss, second trimester	M ♀
026.23	Pregnancy care for patient with recurrent pregnancy loss, third trimester	M ♀
✓ 5 th 026.3	Retained intrauterine contraceptive device in pregnancy	
026.30	Retained intrauterine contraceptive device in pregnancy, unspecified trimester	M ♀
026.31	Retained intrauterine contraceptive device in pregnancy, first trimester	M ♀
026.32	Retained intrauterine contraceptive device in pregnancy, second trimester	M ♀
026.33	Retained intrauterine contraceptive device in pregnancy, third trimester	M ♀
✓ 5 th 026.4	Herpes gestationis	
	DEF: Rare skin disorder of unknown origin that appears on the abdomen in the second and third trimester as intensely itchy blisters that spread to other sites.	
026.40	Herpes gestationis, unspecified trimester	M ♀
026.41	Herpes gestationis, first trimester	M ♀
026.42	Herpes gestationis, second trimester	M ♀
026.43	Herpes gestationis, third trimester	M ♀
✓ 5 th 026.5	Maternal hypotension syndrome	
	Supine hypotensive syndrome	
026.50	Maternal hypotension syndrome, unspecified trimester	M ♀
026.51	Maternal hypotension syndrome, first trimester	M ♀
026.52	Maternal hypotension syndrome, second trimester	M ♀
026.53	Maternal hypotension syndrome, third trimester	M ♀
✓ 5 th 026.6	Liver and biliary tract disorders in pregnancy, childbirth and the puerperium	
	Use additional code to identify the specific disorder	
	EXCLUDES 2 hepatorenal syndrome following labor and delivery (O90.4)	
✓ 6 th 026.61	Liver and biliary tract disorders in pregnancy	
026.611	Liver and biliary tract disorders in pregnancy, first trimester	CC M ♀
026.612	Liver and biliary tract disorders in pregnancy, second trimester	CC M ♀
026.613	Liver and biliary tract disorders in pregnancy, third trimester	CC M ♀
026.619	Liver and biliary tract disorders in pregnancy, unspecified trimester	M ♀
026.62	Liver and biliary tract disorders in childbirth	CC M ♀
026.63	Liver and biliary tract disorders in the puerperium	M ♀
✓ 5 th 026.7	Subluxation of symphysis (pubis) in pregnancy, childbirth and the puerperium	
	EXCLUDES 1 traumatic separation of symphysis (pubis) during childbirth (O71.6)	
✓ 6 th 026.71	Subluxation of symphysis (pubis) in pregnancy	
026.711	Subluxation of symphysis (pubis) in pregnancy, first trimester	M ♀
026.712	Subluxation of symphysis (pubis) in pregnancy, second trimester	M ♀
026.713	Subluxation of symphysis (pubis) in pregnancy, third trimester	M ♀
026.719	Subluxation of symphysis (pubis) in pregnancy, unspecified trimester	M ♀
026.72	Subluxation of symphysis (pubis) in childbirth	M ♀
026.73	Subluxation of symphysis (pubis) in the puerperium	M ♀
✓ 5 th 026.8	Other specified pregnancy related conditions	
✓ 6 th 026.81	Pregnancy related exhaustion and fatigue	
026.811	Pregnancy related exhaustion and fatigue, first trimester	M ♀
026.812	Pregnancy related exhaustion and fatigue, second trimester	M ♀
026.813	Pregnancy related exhaustion and fatigue, third trimester	M ♀
026.819	Pregnancy related exhaustion and fatigue, unspecified trimester	M ♀
✓ 6 th 026.82	Pregnancy related peripheral neuritis	
026.821	Pregnancy related peripheral neuritis, first trimester	M ♀
026.822	Pregnancy related peripheral neuritis, second trimester	M ♀
026.823	Pregnancy related peripheral neuritis, third trimester	M ♀
026.829	Pregnancy related peripheral neuritis, unspecified trimester	M ♀
✓ 6 th 026.83	Pregnancy related renal disease	
	Use additional code to identify the specific disorder	
026.831	Pregnancy related renal disease, first trimester	CC M ♀
026.832	Pregnancy related renal disease, second trimester	CC M ♀
026.833	Pregnancy related renal disease, third trimester	CC M ♀
026.839	Pregnancy related renal disease, unspecified trimester	M ♀
✓ 6 th 026.84	Uterine size-date discrepancy complicating pregnancy	
	EXCLUDES 1 encounter for suspected problem with fetal growth ruled out (Z03.74)	
026.841	Uterine size-date discrepancy, first trimester	M ♀
026.842	Uterine size-date discrepancy, second trimester	M ♀
026.843	Uterine size-date discrepancy, third trimester	M ♀
026.849	Uterine size-date discrepancy, unspecified trimester	M ♀
✓ 6 th 026.85	Spotting complicating pregnancy	
026.851	Spotting complicating pregnancy, first trimester	M ♀
026.852	Spotting complicating pregnancy, second trimester	M ♀
026.853	Spotting complicating pregnancy, third trimester	M ♀
026.859	Spotting complicating pregnancy, unspecified trimester	M ♀
026.86	Pruritic urticarial papules and plaques of pregnancy (PUPPP)	M ♀
	Polymorphic eruption of pregnancy	
✓ 6 th 026.87	Cervical shortening	
	EXCLUDES 1 encounter for suspected cervical shortening ruled out (Z03.75)	
	DEF: Cervix that has shortened to less than 25 mm before the 24th week of pregnancy. A shortened cervix is a warning sign for impending premature delivery and is treated by cervical cerclage placement or progesterone.	
026.872	Cervical shortening, second trimester	CC M ♀
026.873	Cervical shortening, third trimester	CC M ♀
026.879	Cervical shortening, unspecified trimester	CC M ♀
✓ 6 th 026.89	Other specified pregnancy related conditions	
	AHA: 2015.3Q.40	
026.891	Other specified pregnancy related conditions, first trimester	M ♀
026.892	Other specified pregnancy related conditions, second trimester	M ♀
026.893	Other specified pregnancy related conditions, third trimester	M ♀
026.899	Other specified pregnancy related conditions, unspecified trimester	M ♀
✓ 5 th 026.9	Pregnancy related conditions, unspecified	
026.90	Pregnancy related conditions, unspecified, unspecified trimester	M ♀
026.91	Pregnancy related conditions, unspecified, first trimester	M ♀
026.92	Pregnancy related conditions, unspecified, second trimester	M ♀
026.93	Pregnancy related conditions, unspecified, third trimester	M ♀

2,4	✓ 7th	S52.279	Monteggia's fracture of unspecified ulna	MCC	CC	H5	UNS
✓ 6th		S52.28	Bent bone of ulna				
2,3	✓ 7th	S52.281	Bent bone of right ulna	MCC	CC	H5	
2,3	✓ 7th	S52.282	Bent bone of left ulna	MCC	CC	H5	
2,3	✓ 7th	S52.283	Bent bone of unspecified ulna	MCC	CC	H5	UNS
✓ 6th		S52.29	Other fracture of shaft of ulna				
2,3	✓ 7th	S52.291	Other fracture of shaft of right ulna	MCC	CC	H5	
2,3	✓ 7th	S52.292	Other fracture of shaft of left ulna	MCC	CC	H5	
2,3	✓ 7th	S52.299	Other fracture of shaft of unspecified ulna	MCC	CC	H5	UNS
✓ 5th		S52.3	Fracture of shaft of radius				
✓ 6th		S52.30	Unspecified fracture of shaft of radius				
2,3	✓ 7th	S52.301	Unspecified fracture of shaft of right radius	MCC	CC	H5	
2,3	✓ 7th	S52.302	Unspecified fracture of shaft of left radius	MCC	CC	H5	
2,3	✓ 7th	S52.309	Unspecified fracture of shaft of unspecified radius	MCC	CC	H5	UNS
✓ 6th		S52.31	Greenstick fracture of shaft of radius				
<p>The appropriate 7th character is to be added to all codes in subcategory S52.31.</p> <p>A initial encounter for closed fracture</p> <p>D subsequent encounter for fracture with routine healing</p> <p>G subsequent encounter for fracture with delayed healing</p> <p>K subsequent encounter for fracture with nonunion</p> <p>P subsequent encounter for fracture with malunion</p> <p>S sequela</p>							
3	✓ 7th	S52.311	Greenstick fracture of shaft of radius, right arm				
3	✓ 7th	S52.312	Greenstick fracture of shaft of radius, left arm				
3	✓ 7th	S52.319	Greenstick fracture of shaft of radius, unspecified arm				
✓ 6th		S52.32	Transverse fracture of shaft of radius				
2,3	✓ 7th	S52.321	Displaced transverse fracture of shaft of right radius	MCC	CC	H5	
2,3	✓ 7th	S52.322	Displaced transverse fracture of shaft of left radius	MCC	CC	H5	
2,3	✓ 7th	S52.323	Displaced transverse fracture of shaft of unspecified radius	MCC	CC	H5	UNS
2,3	✓ 7th	S52.324	Nondisplaced transverse fracture of shaft of right radius	MCC	CC	H5	
2,3	✓ 7th	S52.325	Nondisplaced transverse fracture of shaft of left radius	MCC	CC	H5	
2,3	✓ 7th	S52.326	Nondisplaced transverse fracture of shaft of unspecified radius	MCC	CC	H5	UNS
✓ 6th		S52.33	Oblique fracture of shaft of radius				
2,3	✓ 7th	S52.331	Displaced oblique fracture of shaft of right radius	MCC	CC	H5	
2,3	✓ 7th	S52.332	Displaced oblique fracture of shaft of left radius	MCC	CC	H5	
2,3	✓ 7th	S52.333	Displaced oblique fracture of shaft of unspecified radius	MCC	CC	H5	UNS
2,3	✓ 7th	S52.334	Nondisplaced oblique fracture of shaft of right radius	MCC	CC	H5	
2,3	✓ 7th	S52.335	Nondisplaced oblique fracture of shaft of left radius	MCC	CC	H5	
2,3	✓ 7th	S52.336	Nondisplaced oblique fracture of shaft of unspecified radius	MCC	CC	H5	UNS
✓ 6th		S52.34	Spiral fracture of shaft of radius				
2,3	✓ 7th	S52.341	Displaced spiral fracture of shaft of radius, right arm	MCC	CC	H5	
2,3	✓ 7th	S52.342	Displaced spiral fracture of shaft of radius, left arm	MCC	CC	H5	
2,3	✓ 7th	S52.343	Displaced spiral fracture of shaft of radius, unspecified arm	MCC	CC	H5	UNS
2,3	✓ 7th	S52.344	Nondisplaced spiral fracture of shaft of radius, right arm	MCC	CC	H5	

2,3	✓ 7th	S52.345	Nondisplaced spiral fracture of shaft of radius, left arm	MCC	CC	H5	
2,3	✓ 7th	S52.346	Nondisplaced spiral fracture of shaft of radius, unspecified arm	MCC	CC	H5	UNS
✓ 6th		S52.35	Comminuted fracture of shaft of radius				
2,3	✓ 7th	S52.351	Displaced comminuted fracture of shaft of radius, right arm	MCC	CC	H5	
2,3	✓ 7th	S52.352	Displaced comminuted fracture of shaft of radius, left arm	MCC	CC	H5	
2,3	✓ 7th	S52.353	Displaced comminuted fracture of shaft of radius, unspecified arm	MCC	CC	H5	UNS
2,3	✓ 7th	S52.354	Nondisplaced comminuted fracture of shaft of radius, right arm	MCC	CC	H5	
2,3	✓ 7th	S52.355	Nondisplaced comminuted fracture of shaft of radius, left arm	MCC	CC	H5	
2,3	✓ 7th	S52.356	Nondisplaced comminuted fracture of shaft of radius, unspecified arm	MCC	CC	H5	UNS
✓ 6th		S52.36	Segmental fracture of shaft of radius				
2,3	✓ 7th	S52.361	Displaced segmental fracture of shaft of radius, right arm	MCC	CC	H5	
2,3	✓ 7th	S52.362	Displaced segmental fracture of shaft of radius, left arm	MCC	CC	H5	
2,3	✓ 7th	S52.363	Displaced segmental fracture of shaft of radius, unspecified arm	MCC	CC	H5	UNS
2,3	✓ 7th	S52.364	Nondisplaced segmental fracture of shaft of radius, right arm	MCC	CC	H5	
2,3	✓ 7th	S52.365	Nondisplaced segmental fracture of shaft of radius, left arm	MCC	CC	H5	
2,3	✓ 7th	S52.366	Nondisplaced segmental fracture of shaft of radius, unspecified arm	MCC	CC	H5	UNS
✓ 6th		S52.37	Galeazzi's fracture				
Fracture of lower shaft of radius with radioulnar joint dislocation							
2,3	✓ 7th	S52.371	Galeazzi's fracture of right radius	MCC	CC	H5	
2,3	✓ 7th	S52.372	Galeazzi's fracture of left radius	MCC	CC	H5	
2,3	✓ 7th	S52.379	Galeazzi's fracture of unspecified radius	MCC	CC	H5	UNS
✓ 6th		S52.38	Bent bone of radius				
2,3	✓ 7th	S52.381	Bent bone of right radius	MCC	CC	H5	
2,3	✓ 7th	S52.382	Bent bone of left radius	MCC	CC	H5	
2,3	✓ 7th	S52.389	Bent bone of unspecified radius	MCC	CC	H5	UNS
✓ 6th		S52.39	Other fracture of shaft of radius				
2,3	✓ 7th	S52.391	Other fracture of shaft of radius, right arm	MCC	CC	H5	
2,3	✓ 7th	S52.392	Other fracture of shaft of radius, left arm	MCC	CC	H5	
2,3	✓ 7th	S52.399	Other fracture of shaft of radius, unspecified arm	MCC	CC	H5	UNS
✓ 5th		S52.5	Fracture of lower end of radius				
Fracture of distal end of radius							
EXCLUDES 2 physical fractures of lower end of radius (S59.2-)							
DEF: Fracture of the distal end of the radius above the wrist, most commonly caused by a fall onto an outstretched hand.							
✓ 6th		S52.50	Unspecified fracture of the lower end of radius				
2,3	✓ 7th	S52.501	Unspecified fracture of the lower end of right radius	MCC	CC	H5	
2,3	✓ 7th	S52.502	Unspecified fracture of the lower end of left radius	MCC	CC	H5	
2,3	✓ 7th	S52.509	Unspecified fracture of the lower end of unspecified radius	MCC	CC	H5	UNS
✓ 6th		S52.51	Fracture of radial styloid process				
2,3	✓ 7th	S52.511	Displaced fracture of right radial styloid process	MCC	CC	H5	
2,3	✓ 7th	S52.512	Displaced fracture of left radial styloid process	MCC	CC	H5	
2,3	✓ 7th	S52.513	Displaced fracture of unspecified radial styloid process	MCC	CC	H5	UNS
2,3	✓ 7th	S52.514	Nondisplaced fracture of right radial styloid process	MCC	CC	H5	
2,3	✓ 7th	S52.515	Nondisplaced fracture of left radial styloid process	MCC	CC	H5	

Appendix G: Hospital Acquired Conditions

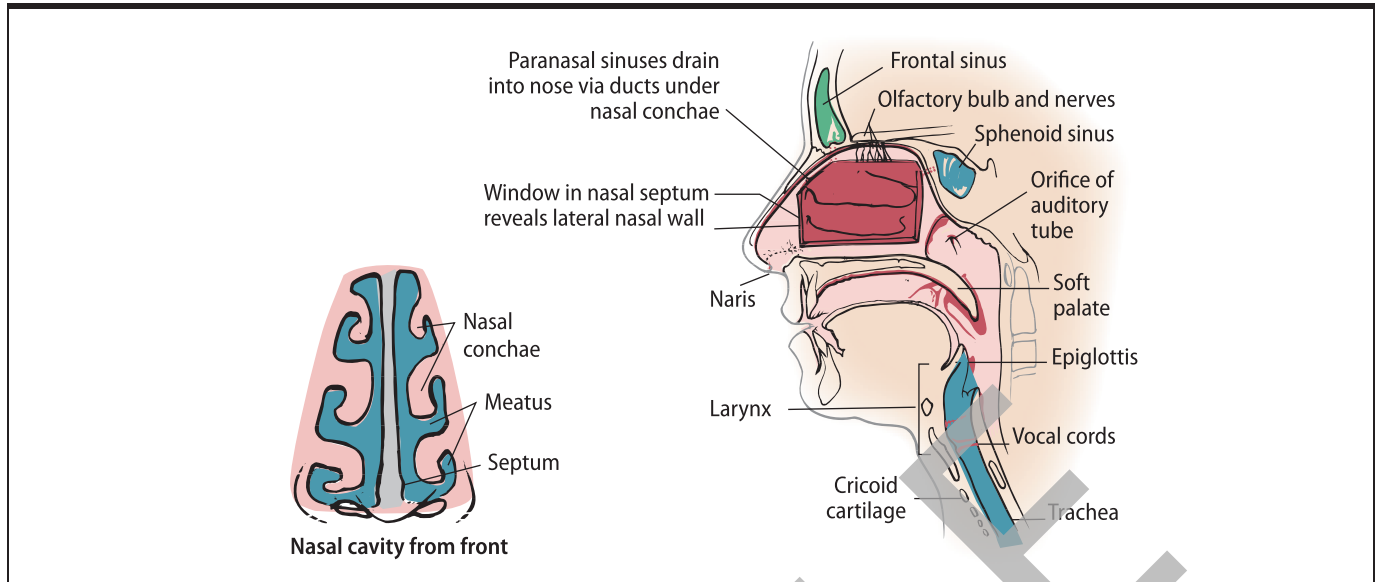
Hospital-acquired conditions (HACs) are conditions considered reasonably preventable through the application of evidence-based guidelines. These conditions, in and of themselves, are either a complication or comorbidity (CC) or major complication or comorbidity (MCC) that as a secondary diagnosis will move the MS-DRG assignment from a lower-paying MS-DRG to a higher-paying MS-DRG. However, if these conditions are not present on admission (meaning they developed during the hospital stay), the CC or MCC designation is nullified and the case will not group to the higher-paying MS-DRG based solely upon the reporting of the HAC code.

HACs are grouped into 14 categories. ICD-10-CM codes in the tabular section of this book that are grouped to one of these HAC categories are identified by an icon specific to that category. As many of these HACs are conditional, this resource provides any additional stipulations that may be required before the code can be considered an HAC. For example, code I26.02 has an  indicating it falls in the HAC 10 category for Deep Vein Thrombosis (DVT) or Pulmonary Embolism (PE) with Total Knee or Hip Replacement. However, I26.02 is not, by itself, an HAC. There must also be a specific ICD-10-PCS code, such as 0SR9019 Replacement of Right Hip Joint with Metal Synthetic Substitute, Cemented, Open Approach, applied in order for I26.02 to act as an HAC.

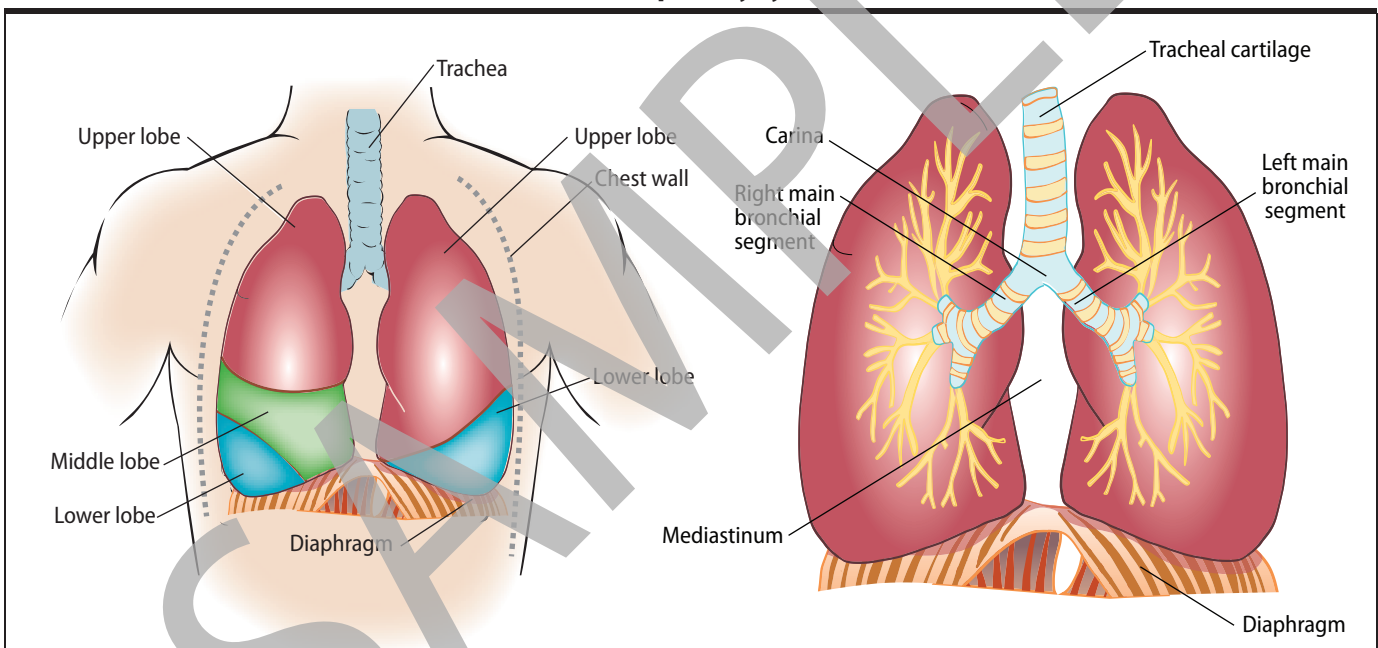
Note: The resource used to compile this list is based on the proposed, version 40, MS-DRG Grouper software and Definitions Manual files published with the fiscal 2023 IPPS proposed rule. The final, version 40, MS-DRG Grouper files and MS-DRG Definitions Manual files can be found at the following: <https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/AcuteInpatientPPS/PPS-Regulations-and-Notices.html>.

HAC 01: Foreign Object Retained After Surgery	HAC 02: Air Embolism	L89.603	S02.129A	S02.631B	S06.1X9A	S06.345A
Secondary diagnosis not POA:	Secondary diagnosis not POA:	L89.604	S02.129B	S02.632A	S06.1XAA	S06.346A
T81.500A	T80.0XXA	L89.613	S02.19XA	S02.632B	S06.2X1A	S06.347A
T81.501A		L89.614	S02.19XB	S02.640A	S06.2X2A	S06.348A
T81.502A		L89.623	S02.2XXB	S02.640B	S06.2X3A	S06.349A
T81.503A		L89.624	S02.30XA	S02.641A	S06.2X4A	S06.34AA
T81.504A		L89.813	S02.30XB	S02.641B	S06.2X5A	S06.350A
T81.505A		L89.814	S02.31XA	S02.642A	S06.2X6A	S06.351A
T81.506A		L89.893	S02.31XB	S02.642B	S06.2X7A	S06.352A
T81.507A		L89.894	S02.32XA	S02.650A	S06.2X8A	S06.353A
T81.508A		L89.93	S02.32XB	S02.650B	S06.2X9A	S06.354A
T81.509A		L89.94	S02.400A	S02.651A	S06.2XAA	S06.355A
T81.510A			S02.400B	S02.651B	S06.301A	S06.356A
T81.511A		HAC 05: Falls and Trauma	S02.401A	S02.652A	S06.302A	S06.357A
T81.512A		Secondary diagnosis not POA:	S02.401B	S02.652B	S06.303A	S06.358A
T81.513A		M99.10	S02.402A	S02.66XA	S06.304A	S06.359A
T81.514A		M99.11	S02.402B	S02.66XB	S06.305A	S06.35AA
T81.515A		M99.18	S02.40AA	S02.670A	S06.306A	S06.360A
T81.516A		S02.0XXA	S02.40AB	S02.670B	S06.307A	S06.361A
T81.517A		S02.0XXB	S02.40BA	S02.671A	S06.308A	S06.362A
T81.518A		S02.101A	S02.40BB	S02.671B	S06.309A	S06.363A
T81.519A		S02.101B	S02.40CA	S02.672A	S06.30AA	S06.364A
T81.520A		S02.102A	S02.40CB	S02.672B	S06.310A	S06.365A
T81.521A		S02.102B	S02.40DA	S02.69XA	S06.311A	S06.366A
T81.522A		S02.102A	S02.40DB	S02.69XB	S06.312A	S06.367A
T81.523A		S02.102B	S02.40EA	S02.80XA	S06.313A	S06.368A
T81.524A		S02.109A	S02.40EB	S02.80XB	S06.314A	S06.369A
T81.525A		S02.109B	S02.40FA	S02.81XA	S06.315A	S06.36AA
T81.526A		S02.110A	S02.40FB	S02.81XB	S06.316A	S06.370A
T81.527A		S02.110B	S02.411A	S02.82XA	S06.317A	S06.371A
T81.528A		S02.111A	S02.411B	S02.82XB	S06.318A	S06.372A
T81.529A		S02.111B	S02.412A	S02.831A	S06.319A	S06.373A
T81.530A		S02.112A	S02.412B	S02.831B	S06.31AA	S06.374A
T81.531A		S02.112B	S02.413A	S02.832A	S06.320A	S06.375A
T81.532A		S02.113A	S02.413B	S02.832B	S06.321A	S06.376A
T81.533A		S02.113B	S02.42XA	S02.839A	S06.322A	S06.377A
T81.534A		S02.118A	S02.42XB	S02.839B	S06.323A	S06.378A
T81.535A		S02.118B	S02.600A	S02.841A	S06.324A	S06.379A
T81.536A		S02.119A	S02.600B	S02.841B	S06.325A	S06.37AA
T81.537A		S02.119B	S02.601A	S02.842A	S06.326A	S06.380A
T81.538A		S02.11AA	S02.601B	S02.842B	S06.327A	S06.381A
T81.539A		S02.11AB	S02.602A	S02.849A	S06.328A	S06.382A
T81.540A		S02.11BA	S02.602B	S02.849B	S06.329A	S06.383A
T81.541A		S02.11BB	S02.609A	S02.85XA	S06.32AA	S06.384A
T81.542A		S02.11CA	S02.609B	S02.85XB	S06.330A	S06.385A
T81.543A		S02.11CB	S02.610A	S02.91XA	S06.331A	S06.386A
T81.544A		S02.11DA	S02.610B	S02.91XB	S06.332A	S06.387A
T81.545A		S02.11DB	S02.611A	S02.92XA	S06.333A	S06.388A
T81.546A		S02.11EA	S02.611B	S02.92XB	S06.334A	S06.389A
T81.547A		S02.11EB	S02.612A	S06.0X1A	S06.335A	S06.38AA
T81.548A		S02.11FA	S02.612B	S06.0X9A	S06.336A	S06.4X0A
T81.549A		S02.11FB	S02.620A	S06.0XAA	S06.337A	S06.4X1A
T81.550A		S02.11GA	S02.620B	S06.1X1A	S06.338A	S06.4X2A
T81.551A		S02.11GB	S02.621A	S06.1X2A	S06.339A	S06.4X3A
T81.552A		S02.11HA	S02.621B	S06.1X3A	S06.33AA	S06.4X4A
T81.553A		S02.11HB	S02.622A	S06.1X4A	S06.340A	S06.4X5A
T81.554A		S02.121A	S02.622B	S06.1X5A	S06.341A	S06.4X6A
T81.555A		S02.121B	S02.630A	S06.1X6A	S06.342A	S06.4X7A
T81.556A		S02.122A	S02.630B	S06.1X7A	S06.343A	S06.4X8A
T81.557A		S02.122B	S02.631A	S06.1X8A	S06.344A	S06.4X9A

Upper Respiratory System



Lower Respiratory System



Paranasal Sinuses

