

## PROVIDER BULLETIN

Volume 34 Number 05

<http://dss.mo.gov/mhd/>

September 19, 2011

# FEDERAL FISCAL YEAR 2012 (FFY12) ICD-9-CM DIAGNOSIS CODE CHANGES EFFECTIVE OCTOBER 1, 2011

## CONTENTS

- **2012 ICD-9-CM DIAGNOSIS CODE CHANGES EFFECTIVE OCTOBER 1, 2011**

### **2012 ICD-9-CM DIAGNOSIS CODE CHANGES**

For claims with dates of service October 1, 2011 and after, providers must use the International Classification of Diseases, 9<sup>th</sup> Revision, Clinical Modification (ICD-9-CM) diagnosis codes that are effective October 1, 2011. The Health Insurance Portability and Accountability Act (HIPAA) Transaction and Code Set Rule requires the use of national/medical code sets that are valid at the time the service is provided, and ICD-9-CM is a national/medical code set. ICD-9-CM codes submitted on claims must be valid at the time the service is provided.

Listed below are invalid, new, and revised diagnosis codes effective October 1, 2011.

**Note:** The final addendum which describes all changes to the procedure part of ICD-9-CM is posted on CMS' webpage at: <http://www.cms.hhs.gov/ICD9ProviderDiagnosticCodes>

<b>INVALID DIAGNOSIS CODES - Effective October 1, 2011</b>	
Diagnosis Code	Description
041.4	Escherichia coli [E. coli] infection in conditions classified elsewhere and of unspecified site
173.0	Other malignant neoplasm of skin of lip
173.1	Other malignant neoplasm of skin of eyelid, including canthus
173.2	Other malignant neoplasm of skin of ear and external auditory canal
173.3	Other malignant neoplasm of skin of other and unspecified parts of face
173.4	Other malignant neoplasm of scalp and skin of neck
173.5	Other malignant neoplasm of skin of trunk, except scrotum
173.6	Other malignant neoplasm of skin of upper limb, including shoulder
173.7	Other malignant neoplasm of skin of lower limb, including hip
173.8	Other malignant neoplasm of other specified sites of skin
173.9	Other malignant neoplasm of skin, site unspecified
284.1*	Pancytopenia

<b>INVALID DIAGNOSIS CODES - Effective October 1, 2011</b>	
Diagnosis Code	Description
286.5	Hemorrhagic disorder due to intrinsic circulating anticoagulants
310.8	Other specified nonpsychotic mental disorders following organic brain damage
425.1*	Pancytopenia
444.0	Embolism and thrombosis of abdominal aorta
512.8*	Other spontaneous pneumothorax
516.3	Idiopathic fibrosing alveolitis
518.5*	Pulmonary insufficiency following trauma and surgery
596.8	Other specified disorders of bladder
631	Other abnormal product of conception
718.60*	Unspecified intrapelvic protrusion of acetabulum, site unspecified
747.3	Anomalies of pulmonary artery
793.1*	Nonspecific (abnormal) findings on radiological and other examination of lung field
795.5*	Nonspecific reaction to tuberculin skin test without active tuberculosis
997.4**	Digestive system complications
998.0*	Postoperative shock
999.4	Anaphylactic shock due to serum
999.5**	Other serum reaction
V12.2	Personal history of endocrine, metabolic, and immunity disorders
V13.8	Personal history of other specified diseases
V19.1	Family history of other eye disorders
V40.3*	Other behavioral problems

<b>NEW DIAGNOSIS CODES - Effective October 1, 2011</b>	
Procedure Code	Description
041.41	Shiga toxin-producing Escherichia coli [E. coli] (STEC) O157
041.42	Other specified Shiga toxin-producing Escherichia coli [E. coli] (STEC)
041.43	Shiga toxin-producing Escherichia coli [E. coli] (STEC), unspecified
041.49	Other and unspecified Escherichia coli [E. coli]
173.00	Unspecified malignant neoplasm of skin of lip
173.01	Basal cell carcinoma of skin of lip
173.02	Squamous cell carcinoma of skin of lip
173.09	Other specified malignant neoplasm of skin of lip
173.10	Unspecified malignant neoplasm of eyelid, including canthus
173.11	Basal cell carcinoma of eyelid, including canthus
173.12	Squamous cell carcinoma of eyelid, including canthus
173.19	Other specified malignant neoplasm of eyelid, including canthus
173.20	Unspecified malignant neoplasm of skin of ear and external auditory canal
173.21	Basal cell carcinoma of skin of ear and external auditory canal
173.22	Squamous cell carcinoma of skin of ear and external auditory canal
173.29	Other specified malignant neoplasm of skin of ear and external auditory canal
173.30	Unspecified malignant neoplasm of skin of other and unspecified parts of face
173.31	Basal cell carcinoma of skin of other and unspecified parts of face
173.32	Squamous cell carcinoma of skin of other and unspecified parts of face
173.39	Other specified malignant neoplasm of skin of other and unspecified parts of face
173.40	Unspecified malignant neoplasm of scalp and skin of neck
173.41	Basal cell carcinoma of scalp and skin of neck
173.42	Squamous cell carcinoma of scalp and skin of neck
173.49	Other specified malignant neoplasm of scalp and skin of neck
173.50	Unspecified malignant neoplasm of skin of trunk, except scrotum

<b>NEW DIAGNOSIS CODES - Effective October 1, 2011</b>	
Procedure Code	Description
173.51	Basal cell carcinoma of skin of trunk, except scrotum
173.52	Squamous cell carcinoma of skin of trunk, except scrotum
173.59	Other specified malignant neoplasm of skin of trunk, except scrotum
173.60	Unspecified malignant neoplasm of skin of upper limb, including shoulder
173.61	Basal cell carcinoma of skin of upper limb, including shoulder
173.62	Squamous cell carcinoma of skin of upper limb, including shoulder
173.69	Other specified malignant neoplasm of skin of upper limb, including shoulder
173.70	Unspecified malignant neoplasm of skin of lower limb, including hip
173.71	Basal cell carcinoma of skin of lower limb, including hip
173.72	Squamous cell carcinoma of skin of lower limb, including hip
173.79	Other specified malignant neoplasm of skin of lower limb, including hip
173.80	Unspecified malignant neoplasm of other specified sites of skin
173.81	Basal cell carcinoma of other specified sites of skin
173.82	Squamous cell carcinoma of other specified sites of skin
173.89	Other specified malignant neoplasm of other specified sites of skin
173.90	Unspecified malignant neoplasm of skin, site unspecified
173.91	Basal cell carcinoma of skin, site unspecified
173.92	Squamous cell carcinoma of skin, site unspecified
173.99	Other specified malignant neoplasm of skin, site unspecified
282.40*	Thalassemia, unspecified
282.43*	Alpha thalassemia
282.44*	Beta thalassemia
282.45*	Delta-beta thalassemia
282.46*	Thalassemia minor
282.47*	Hemoglobin E-beta thalassemia
284.11*	Antineoplastic chemotherapy induced pancytopenia
284.12*	Other drug-induced pancytopenia
284.19*	Other pancytopenia
286.52	Acquired hemophilia
286.53	Antiphospholipid antibody with hemorrhagic disorder
286.59	Other hemorrhagic disorder due to intrinsic circulating anticoagulants, antibodies, or inhibitors
294.20	Dementia, unspecified, without behavioral disturbance
294.21	Dementia, unspecified, with behavioral disturbance
310.81	Pseudobulbar affect
310.89	Other specified nonpsychotic mental disorders following organic brain damage
331.6	Corticobasal degeneration
348.82	Brain death
358.30	Lambert-Eaton syndrome, unspecified
358.31	Lambert-Eaton syndrome in neoplastic disease
358.39	Lambert-Eaton syndrome in other diseases classified elsewhere
365.05	Open angle with borderline findings, high risk
365.06	Primary angle closure without glaucoma damage
365.70	Glaucoma stage, unspecified
365.71	Mild stage glaucoma
365.72	Moderate stage glaucoma
365.73	Severe stage glaucoma
365.74	Indeterminate stage glaucoma
379.27*	Vitreomacular adhesion
414.4*	Coronary atherosclerosis due to calcified coronary lesion

<b>NEW DIAGNOSIS CODES - Effective October 1, 2011</b>	
Procedure Code	Description
415.13	Saddle embolus of pulmonary artery
425.11*	Hypertrophic obstructive cardiomyopathy
425.18*	Other hypertrophic cardiomyopathy
444.01	Saddle embolus of abdominal aorta
444.09	Other arterial embolism and thrombosis of abdominal aorta
488.81*	Influenza due to identified novel influenza A virus with pneumonia
488.82*	Influenza due to identified novel influenza A virus with other respiratory manifestations
488.89*	Influenza due to identified novel influenza A virus with other manifestations
508.2*	Respiratory conditions due to smoke inhalation
512.2*	Postoperative air leak
512.81*	Primary spontaneous pneumothorax
512.82*	Secondary spontaneous pneumothorax
512.83*	Chronic pneumothorax
512.84*	Other air leak
512.89*	Other pneumothorax
516.30	Idiopathic interstitial pneumonia, not otherwise specified
516.31	Idiopathic pulmonary fibrosis
516.32	Idiopathic non-specific interstitial pneumonitis
516.33*	Acute interstitial pneumonitis
516.34	Respiratory bronchiolitis interstitial lung disease
516.35	Idiopathic lymphoid interstitial pneumonia
516.36	Cryptogenic organizing pneumonia
516.37	Desquamative interstitial pneumonia
516.4	Lymphangioleiomyomatosis
516.5	Adult pulmonary Langerhans cell histiocytosis
516.61	Neuroendocrine cell hyperplasia of infancy
516.62	Pulmonary interstitial glycogenosis
516.63	Surfactant mutations of the lung
516.64	Alveolar capillary dysplasia with vein misalignment
516.69	Other interstitial lung diseases of childhood
518.51*	Acute respiratory failure following trauma and surgery
518.52*	Other pulmonary insufficiency, not elsewhere classified, following trauma and surgery
518.53*	Acute and chronic respiratory failure following trauma and surgery
539.01	Infection due to gastric band procedure
539.09	Other complications of gastric band procedure
539.81	Infection due to other bariatric procedure
539.89	Other complications of other bariatric procedure
573.5*	Hepatopulmonary syndrome
596.81	Infection of cystostomy
596.82	Mechanical complication of cystostomy
596.83	Other complication of cystostomy
596.89	Other specified disorders of bladder
629.31	Erosion of implanted vaginal mesh and other prosthetic materials to surrounding organ or tissue
629.32	Exposure of implanted vaginal mesh and other prosthetic materials into vagina
631.0	Inappropriate change in quantitative human chorionic gonadotropin (hCG) in early pregnancy
631.8	Other abnormal products of conception
649.81	Onset (spontaneous) of labor after 37 completed weeks of gestation but before 39 completed weeks gestation, with delivery by (planned) cesarean section, delivered, with or without mention of antepartum condition

<b>NEW DIAGNOSIS CODES - Effective October 1, 2011</b>	
Procedure Code	Description
649.82	Onset (spontaneous) of labor after 37 completed weeks of gestation but before 39 completed weeks gestation, with delivery by (planned) cesarean section, delivered, with mention of postpartum complication
704.41	Pilar cyst
704.42	Trichilemmal cyst
726.13*	Partial tear of rotator cuff
747.31	Pulmonary artery coarctation and atresia
747.32	Pulmonary arteriovenous malformation
747.39	Other anomalies of pulmonary artery and pulmonary circulation
793.11*	Solitary pulmonary nodule
793.19*	Other nonspecific abnormal finding of lung field
795.51*	Nonspecific reaction to tuberculin skin test without active tuberculosis
795.52*	Nonspecific reaction to cell mediated immunity measurement of gamma interferon antigen response without active tuberculosis
808.44	Multiple closed pelvic fractures without disruption of pelvic circle
808.54	Multiple open pelvic fractures without disruption of pelvic circle
996.88	Complications of transplanted organ, stem cell
997.32	Postprocedural aspiration pneumonia
997.41	Retained cholelithiasis following cholecystectomy
997.49	Other digestive system complications
998.00*	Postoperative shock, unspecified
998.01*	Postoperative shock, cardiogenic
998.02*	Postoperative shock, septic
998.09*	Postoperative shock, other
999.32*	Bloodstream infection due to central venous catheter
999.33*	Local infection due to central venous catheter
999.34*	Acute infection following transfusion, infusion, or injection of blood and blood products
999.41	Anaphylactic reaction due to administration of blood and blood products
999.42	Anaphylactic reaction due to vaccination
999.49	Anaphylactic reaction due to other serum
999.51	Other serum reaction due to administration of blood and blood products
999.52	Other serum reaction due to vaccination
999.59	Other serum reaction
V12.21	Personal history of gestational diabetes
V12.29	Personal history of other endocrine, metabolic, and immunity disorders
V12.55	Personal history of pulmonary embolism
V13.81	Personal history of anaphylaxis
V13.89	Personal history of other specified diseases
V19.11	Family history of glaucoma
V19.19	Family history of other specified eye disorder
V23.42	Pregnancy with history of ectopic pregnancy
V23.87	Pregnancy with inconclusive fetal viability
V40.31*	Wandering in diseases classified elsewhere
V40.39*	Other specified behavioral problem
V54.82	Aftercare following explantation of joint prosthesis
V58.68*	Long term (current) use of bisphosphonates
V87.02	Contact with and (suspected) exposure to uranium
V88.21	Acquired absence of hip joint
V88.22	Acquired absence of knee joint
V88.29	Acquired absence of other joint

<b>NEW DIAGNOSIS CODES - Effective October 1, 2011</b>	
Procedure Code	Description
317*	Mild intellectual disabilities
318.0*	Moderate intellectual disabilities
318.1*	Severe intellectual disabilities
318.2*	Profound intellectual disabilities
319*	Unspecified intellectual disabilities
323.41	Other encephalitis and encephalomyelitis due to other infections classified elsewhere
323.42	Other myelitis due to other infections classified elsewhere
346.01	Migraine with aura, with intractable migraine, so stated, without mention of status migrainosus
346.11	Migraine without aura, with intractable migraine, so stated, without mention of status migrainosus
346.21	Variants of migraine, not elsewhere classified, with intractable migraine, so stated, without mention of status migrainosus
346.31	Hemiplegic migraine, with intractable migraine, so stated, without mention of status migrainosus
346.41	Menstrual migraine, with intractable migraine, so stated, without mention of status migrainosus
346.51	Persistent migraine aura without cerebral infarction, with intractable migraine, so stated, without mention of status migrainosus
346.61	Persistent migraine aura with cerebral infarction, with intractable migraine, so stated, without mention of status migrainosus
346.71	Chronic migraine without aura, with intractable migraine, so stated, without mention of status migrainosus
346.81	Other forms of migraine, with intractable migraine, so stated, without mention of status migrainosus
346.91	Migraine, unspecified, with intractable migraine, so stated, without mention of status migrainosus
365.01	Open angle with borderline findings, low risk
488.11*	Influenza due to identified 2009 H1N1 influenza virus with pneumonia
488.12*	Influenza due to identified 2009 H1N1 influenza virus with other respiratory manifestations
488.19*	Influenza due to identified 2009 H1N1 influenza virus with other manifestations
646.70	Liver and biliary tract disorders in pregnancy, unspecified as to episode of care or not applicable
646.71	Liver and biliary tract disorders in pregnancy, delivered, with or without mention of antepartum condition
646.73	Liver and biliary tract disorders in pregnancy, antepartum condition or complication
808.43	Multiple closed pelvic fractures with disruption of pelvic circle
808.53	Multiple open pelvic fractures with disruption of pelvic circle
968.5	Surface (topical) and infiltration anesthetics
995.0	Other anaphylactic reaction
995.60	Anaphylactic reaction due to unspecified food
995.61	Anaphylactic reaction due to peanuts
995.62	Anaphylactic reaction due to crustaceans
995.63	Anaphylactic reaction due to fruits and vegetables
995.64	Anaphylactic reaction due to tree nuts and seeds
995.65	Anaphylactic reaction due to fish
995.66	Anaphylactic reaction due to food additives

<b>NEW DIAGNOSIS CODES - Effective October 1, 2011</b>	
Procedure Code	Description
995.67	Anaphylactic reaction due to milk products
995.68	Anaphylactic reaction due to eggs
995.69	Anaphylactic reaction due to other specified food
999.31*	Other and unspecified infection due to central venous catheter
V18.4*	Family history of intellectual disabilities
V79.2*	Special screening for intellectual disabilities

**Notes:**

\* These procedure codes were discussed at the March 9-10, 2011 ICD-9-CM Coordination and Maintenance Committee meeting and were not finalized in time to include in the proposed rule. However, they will be implemented on October 1, 2011.

**Provider Bulletins** are available on the MO HealthNet Division (MHD) (Formerly the Division of Medical Services) Web site at <http://dss.mo.gov/mhd/providers/pages/bulletins.htm>. Bulletins will remain on the Provider Bulletins page only until incorporated into the [provider manuals](#) as appropriate, then moved to the Archived Bulletin page.

**MO HealthNet News:** Providers and other interested parties are urged to go to the MHD Web site at <http://dss.mo.gov/mhd/global/pages/mednewssubscribe.htm> to subscribe to the electronic mailing list to receive automatic notifications of provider bulletins, provider manual updates, and other official MO HealthNet communications via E-mail.

**MO HealthNet Managed Care:** The information contained in this bulletin applies to coverage for:

- MO HealthNet Fee-for-Service
- Services not included in MO HealthNet Managed Care

Questions regarding MO HealthNet Managed Care benefits should be directed to the patient’s MO HealthNet Managed Care health plan. Before delivering a service, please check the patient’s eligibility status by swiping the red MO HealthNet card or by calling the Interactive Voice Response (IVR) System at 573-635-8908 and using Option One for the red or white card.

**Provider Communications Hotline  
573-751-2896**