DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop 00-00-00
Baltimore, Maryland 21244-1850

CENTER FOR MEDICARE

Agenda
ICD-10 Coordination and Maintenance Committee
Department of Health and Human Services
Centers for Medicare & Medicaid Services
CMS Auditorium
7500 Security Boulevard
Baltimore, MD 21244-1850
ICD-10-PCS Topics
September 12, 2017

Pat Brooks, CMS – Co-Chairperson

Webcast and Dial-In Information

- The meeting will begin promptly at 9am ET and will be webcast.
- Toll-free dial-in access is available for participants who cannot join the webcast:
  Phone: Tuesday, September 12, 2017: 1-844-396-8222; Meeting ID: 907 558 361
  Wednesday, September 13, 2017: 1-844-396-8222; Meeting ID: 902 209 427
  We encourage you to join early, as the number of phone lines is limited.
- If participating via the webcast or dialing in you do NOT need to register on-line for the meeting.

This meeting is being webcast via CMS at http://www.cms.gov/live/. By your attendance, you are giving consent to the use and distribution of your name, likeness and voice during the meeting. You are also giving consent to the use and distribution of any personally identifiable information that you or others may disclose about you during the meeting. Please do not disclose personal health information.

Note: Proposals for diagnosis code topics are scheduled to begin after procedure code topics have concluded on September 12, 2017 and will be led by the Centers for Disease Control (CDC). Diagnosis code topics will continue on September 13, 2017. Please visit CDCs website for the Diagnosis agenda located at the following address:
http://www.cdc.gov/nchs/icd/icd10cm_maintenance.htm

Introductions and Overview   Pat Brooks

ICD-10-PCS Topics:

1. Addenda and Key Updates   Rhonda Butler , 3M
    Pages 10-18

Closing Remarks   Mady Hue

Registering for the meeting:
Registration for the March 6-7, 2018 ICD-10 Coordination and Maintenance Committee meeting opens on February 2, 2018**. If participating by Livestream webcast or dialing in you do not need to register online.**

Information on registering online to attend the meeting can be found at:
http://www.cms.hhs.gov/apps/events/

For questions about the registration process, please contact Mady Hue at 410-786-4510 or marilu.hue@cms.hhs.gov or Noel Manlove at 410-786-5161 or noel.manlove@cms.hhs.gov.

Continuing Education Credits:
Continuing education credits may be awarded by the American Academy of Professional Coders (AAPC) or the American Health Information Management Association (AHIMA) for participation in CMS ICD-10 Coordination and Maintenance (C&M) Committee Meeting Conference Calls, Meetings and Webcasts.

Continuing Education Information for American Academy of Professional Coders (AAPC)
If you have attended or are planning to attend a CMS ICD-10 Coordination and Maintenance (C&M) Committee Meeting Conference Call, you should be aware that CMS does not provide certificates of attendance for these calls. Instead, the AAPC will accept your e-mailed confirmation and call description as proof of participation. Please retain a copy of your e-mailed confirmation for these calls as the AAPC will request them for any conference call you entered into your CEU Tracker if you are chosen for CEU verification. Members are awarded one (1) CEU per hour of participation.

Continuing Education Information for American Health Information Management Association (AHIMA)
AHIMA credential-holders may claim 1 CEU per 60 minutes of attendance at an educational program. Maintain documentation about the program for verification purposes in the event of an audit. A program does not need to be pre-approved by AHIMA, nor does a CEU certificate need to be provided, in order to claim AHIMA CEU credit. For detailed information about AHIMA's CEU requirements, see the Recertification Guide on AHIMA's web site.

Please note: The statements above are standard language provided to CMS by the AAPC and the AHIMA. If you have any questions concerning either statement, please contact the respective organization, <u>not CMS</u>.

ICD-10 TIMELINE

A timeline of important dates in the ICD-10 process is described below:

September 12-13, 2017	ICD-10 Coordination and Maintenance Committee Meeting.
	Those who wish to attend the ICD-10 Coordination and Maintenance Committee meeting **must have registered for the meeting online by September 1, 2017.** You must bring an official form of picture identification (such as a driver's license) in order to be admitted to the building.
	In compliance to The Real ID Act, enacted in 2005, (http://www.dhs.gov/real-id-enforcement-brief) the following states/territories: Maine, Minnesota, Missouri, Montana and Washington State **will not** gain access into any Federal Agencies using the **above states** driver's license or ID. This means CMS visitors from these states/territories will need to provide alternative proof of identification (**such as a passport**) to gain entrance into Baltimore-based and Bethesda CMS buildings, as well as the Humphrey Building in Washington.
September 2017	Webcast of the September 12-13, 2017 ICD-10 Coordination and Maintenance Committee meeting will be posted on the CMS webpage as follows: https://www.cms.gov/Medicare/Coding/ICD9ProviderDiagnosticCodes/meetings.html
October 1, 2017	New and revised ICD-10-CM and ICD-10-PCS codes go into effect along with DRG changes. Final addendum available on web pages as follows: Diagnosis addendum - http://www.cdc.gov/nchs/icd/icd10cm.htm Procedure addendum – http://www.cms.gov/Medicare/Coding/ICD10/
October 2017	**There were not any new procedure codes discussed at the September 12-13, 2017 ICD-10 Coordination and Maintenance Committee meetings for implementation on April 1, 2018.**
November 13, 2017	**Deadline for receipt of public comments on proposed new codes and revisions discussed at the September 12-13, 2017 ICD-10 Coordination and Maintenance Committee meetings for implementation on October 1, 2018.**

January 8, 2018	**Deadline for requestors: Those members of the public requesting that topics be discussed at the March 6–7, 2018 ICD-10 Coordination and Maintenance Committee meeting must have their requests submitted to CMS for procedures and NCHS for diagnoses by this date.**
February 2018	Tentative agenda for the Procedure part of the March 6, 2018 ICD-10 Coordination and Maintenance Committee meeting posted on CMS webpage as follows: https://www.cms.gov/Medicare/Coding/ICD9ProviderDiagnosticCodes/ICD-9-CM-C-and-M-Meeting-Materials.html
	Tentative agenda for the Diagnosis part of the March 7, 2018 ICD-10 Coordination and Maintenance Committee meeting posted on NCHS homepage as follows: http://www.cdc.gov/nchs/icd/icd10cm_maintenance.htm
	Federal Register notice of March 6–7, 2018 ICD-10 Coordination and Maintenance Committee Meeting will be published.
February 2, 2018	**On-line registration opens for the March 6–7, 2018 ICD-10 Coordination and Maintenance Committee meeting at: https://www.cms.gov/apps/events/default.asp**
March 2018	Because of increased security requirements, **those wishing to attend the March 6–7, 2018** ICD-10 Coordination and Maintenance Committee meeting must register for the meeting online at: **https://www.cms.gov/apps/events/default.asp**
	Attendees must register online by February 2, 2018; failure to do so may result in lack of access to the meeting.
March 6 – 7, 2018	ICD-10 Coordination and Maintenance Committee meeting.
March 2018	Webcast of the March 6-7, 2018 ICD-10 Coordination and Maintenance Committee meeting will be posted on the CMS webpage as follows: https://www.cms.gov/Medicare/Coding/ICD9ProviderDiagnosticCodes/ICD-9-CM-C-and-M-Meeting-Materials.html
April 1, 2018	Any new ICD-10 codes to capture new diseases or technology on April 1, 2018, will be implemented.
April 6, 2018	**Deadline for receipt of public comments on proposed new codes and revisions discussed at the March 6–7, 2018 ICD-10 Coordination and Maintenance Committee meetings for implementation on October 1, 2018**.

April 2018	Notice of Proposed Rulemaking to be published in the <u>Federal Register</u> as mandated by Public Law 99-509. This notice will include references to the finalized FY 2019 ICD-10-CM diagnosis and ICD-10-PCS procedure codes to date. It will also include proposed revisions to the MS-DRG system based on ICD-10-CM/PCS codes on which the public may comment. The proposed rule can be accessed at: http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/AcuteInpatientPPS/index.html?redirect=/AcuteInpatientPPS/IPPS/list.asp
June 2018	Final addendum posted on web pages as follows: Diagnosis addendum – http://www.cdc.gov/nchs/icd/icd10cm.htm Procedure addendum - http://cms.hhs.gov/Medicare/Coding/ICD10/index.html
July 13, 2018	**Deadline for requestors: Those members of the public requesting that topics be discussed at the September 11-12, 2018 ICD-10 Coordination and Maintenance Committee meeting must have their requests submitted to CMS for procedures and NCHS for diagnoses.**
August 1, 2018	Hospital Inpatient Prospective Payment System final rule to be published in the Federal Register as mandated by Public Law 99-509. This rule will also include links to all the final codes to be implemented on October 1, 2018. This rule can be accessed at: http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/AcuteInpatientPPS/index.html?redirect=/AcuteInpatientPPS/IPPS/list.asp
August 2018	Tentative agenda for the Procedure part of the September 11-12, 2018 ICD-10 Coordination and Maintenance Committee meeting will be posted on the CMS webpage at – https://www.cms.gov/Medicare/Coding/ICD9ProviderDiagnosticCodes/ICD-9-CM-C-and-M-Meeting-Materials.html Tentative agenda for the Diagnosis part of the September 11-12, 2018 ICD-10 Coordination and Maintenance Committee meeting will be posted on the NCHS webpage at - http://www.cdc.gov/nchs/icd/icd10cm_maintenance.htm Federal Register notice for the September 11-12, 2018 ICD-10 Coordination and Maintenance Committee meeting will be published. This will include the tentative agenda.

August 3, 2018	**On-line registration opens for the September 11-12, 2018 ICD-10 Coordination and Maintenance Committee meeting at: https://www.cms.gov/apps/events/default.asp**
September 3, 2018	Because of increased security requirements, those wishing to attend the September 11-12, 2018 ICD-10 Coordination and Maintenance Committee meeting must register for the meeting online at: **https://www.cms.gov/apps/events/default.asp** **Attendees must register online by September 3, 2018; failure to do so may result in lack of access to the meeting.**
September 11-12, 2018	ICD-10 Coordination and Maintenance Committee meeting. Those who wish to attend the ICD-10 Coordination and Maintenance Committee meeting **must have registered for the meeting online by September 3, 2018.** You must bring an official form of picture identification (such as a driver's license) in order to be admitted to the building.
September 2018	Webcast of the September 11-12, 2018 ICD-10 Coordination and Maintenance Committee meeting will be posted on the CMS webpage as follows: https://www.cms.gov/Medicare/Coding/ICD9ProviderDiagnosticCodes/meetings.html Summary report of the Diagnosis part of the September 11-12, 2018 ICD-10 Coordination and Maintenance Committee meeting report will be posted on NCHS homepage as follows: http://www.cdc.gov/nchs/icd/icd10cm_maintenance.htm
October 1, 2018	New and revised ICD-10-CM and ICD-10-PCS codes go into effect along with DRG changes. Final addendum available on web pages as follows: Diagnosis addendum - http://www.cdc.gov/nchs/icd/icd10cm.htm Procedure addendum – http://www.cms.gov/Medicare/Coding/ICD10/
October 16, 2018	**Deadline for receipt of public comments on proposed new codes discussed at the September 11-12, 2018 ICD-10 Coordination and Maintenance Committee meetings for implementation on April 1, 2019.**
November 2018	Any new ICD-10 codes required to capture new technology that will be implemented on the following April 1 will be announced. Information on any new codes to be implemented April 1, 2019 will be posted on the following websites:

http://www.cdc.gov/nchs/icd/icd10cm.htm
http://www.cms.gov/Medicare/Coding/ICD10/

November 12, 2018　　　　　**Deadline for receipt of public comments on proposed new codes and revisions discussed at the September 11-12, 2018 ICD-10 Coordination and Maintenance Committee meetings for implementation on October 1, 2019.**

Introductions and Overview

- ICD-10 Coordination & Maintenance (C&M) Committee is a public forum on ICD-10-CM & ICD-10-PCS code updates
- CMS & CDC Co-chair the meetings
  - CMS has lead on procedure issues
  - CDC has lead on diagnosis issues
- Coding proposals requested by the public are presented and public given opportunity to comment

Code Proposals

- ICD-10-PCS code proposals being consideration for implementation on October 1, 2018
- No final decisions made at the meeting
- CMS will describe options and recommendations to facilitate discussion
- Public can comment at meeting and send written comments

Comments on Code Proposals

- Submit written comments by
  - November 13, 2017 for codes discussed at September 12-13, 2017 C&M meeting
- Procedure comments to CMS (new address) ICDProcedureCodeRequest@cms.hhs.gov
- Diagnosis comments to Donna Pickett, CDC nchsicd10cm@cdc.gov

Proposed and Final Rules

- April 2017 – Notice of Proposed Rulemaking, IPPS
  - Includes ICD-10-CM/PCS diagnosis and procedure updates approved prior to March 2017 C&M meeting
- August 1, 2017 – Final rule with links to final codes to be implemented on October 1, 2017
  - Includes any additional codes approved from March 7- 8, 2017 C&M meeting
  - https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/AcuteInpatientPPS/FY2018-IPPS-Final-Rule-Home-Page.html

Addendum

- June 2017 – Final code updates and addendum posted
  - FY 2018 ICD-10-PCS (Procedures) http://www.cms.gov/Medicare/Coding/ICD10/index.html
  - FY 2018 ICD-10-CM (Diagnoses) http://www.cdc.gov/nchs/icd/icd10cm.htm

GEM Files

- FY 2018 ICD-10-CM and ICD-10-PCS GEMs posted at http://www.cms.gov/Medicare/Coding/ICD10/index.html
- This will be the last GEM update

March 6-7, 2018 C&M Code Requests

- January 8, 2018– Deadline for submitting topics for March 6-7, 2018 C&M meeting
  - Procedure requests to CMS (new address) ICDProcedureCodeRequest@cms.hhs.gov
  - Diagnosis requests to Donna Pickett, CDC nchsicd10cm@cdc.gov

Public Participation

- For this meeting the public may participate in three ways:
  - Attend public C&M meeting
  - Listen to proceedings through free conference lines
  - Participate through a free livestream webcast
- CMS & CDC hope this provides greater opportunity for public participation

Written Comments

- No matter how you participate – please send written comments by
  - November 13, 2017 for codes to be implemented on October 1, 2018
  - Procedure comments to CMS ICDProcedureCodeRequest@cms.hhs.gov
  - Diagnosis comments to Donna Pickett, CDC nchsicd10cm@cdc.gov

ICD-10-PCS Codes Implementation

- ICD-10-PCS codes discussed today under consideration for October 1, 2018 implementation

ICD-10-PCS Index/Body Part Key/Device Key Addenda

Lttr   A

Main   Add   Arcadius(R) XP (C)(L) use Interbody Fusion Device, Nanotextured Surface in
              New Technology

Main   Aspiration, fine needle

       Add   Biopsy see Extraction

       Revise from   fluid or gas see Drainage

       Revise to   Fluid or gas see Drainage

       Revise from   tissue see Excision

       Revise to   Tissue see Excision

Main   Assessment

       Revise from   intravascular perfusion, using indocyanine green (ICG) dye see
       Monitoring, Physiological Systems 4A1

       Revise to   Intravascular perfusion, using indocyanine green (ICG) dye see Monitoring,
       Physiological Systems 4A1

Lttr   B

Main   Banding, laparoscopic (adjustable) gastric

       Delete   Adjustment/revision 0DW64CZ

       Add   Surgical correction see Revision of device in, Stomach 0DW6

Main   Biopsy

       Delete   Bone Marrow see Extraction with qualifier Diagnostic

       Add   see Extraction with qualifier Diagnostic

Lttr   C

Main   Add   CeSpace(tm) XP use Interbody Fusion Device, Nanotextured Surface in New
              Technology

Lttr   F

Main   Fine needle aspiration

       Add   Biopsy see Extraction

       Revise from   fluid or gas see Drainage

       Revise to   Fluid or gas see Drainage

       Revise from   tissue see Excision

       Revise to   Tissue see Excision

Lttr   H

Main   Herniorrhaphy
          Revise from   with synthetic substitute
          Revise to   With synthetic substitute
Main   Hysterectomy
          Revise from   supracervical see Resection, Uterus 0UT9
          Revise to   Supracervical see Resection, Uterus 0UT9
          Revise from   total see Resection, Uterus 0UT9
          Revise to   Total see Resection, Uterus 0UT9

Lttr   L
Main   LAGB (laparoscopic adjustable gastric banding)
          Delete   Adjustment/revision 0DW64CZ
          Add   Surgical correction see Revision of device in, Stomach 0DW6
Main   Lavage
          Revise from   bronchial alveolar, diagnostic see Drainage, Respiratory System 0B9
          Revise to   Bronchial alveolar, diagnostic see Drainage, Respiratory System 0B9
Main   Lithotripsy
          Revise from   with removal of fragments see Extirpation
          Revise to   With removal of fragments see Extirpation

Lttr   P
Main   Photocoagulation
          Revise from   for Destruction see Destruction
          Revise to   For Destruction see Destruction
          Revise from   for Repair see Repair
          Revise to   For Repair see Repair
Main   Add   ProSpace(tm) XP use Interbody Fusion Device, Nanotextured Surface in New Technology

Lttr   T
Main   Revise from TBNA (transbronchial needle aspiration) see Drainage, Respiratory System 0B9
          Revise to   TBNA (transbronchial needle aspiration)
          Add   Biopsy see Extraction, Respiratory System 0BD
          Add   Therapeutic drainage see Drainage, Respiratory System 0B9
Main   Add   TSpace(R) XP use Interbody Fusion Device, Nanotextured Surface in New Technology

Medical and Surgical Section
Axis 3 Operation

Control of Epistaxis

Source	Description	Code specification
2017, public & CMS internal review	In the Ear, Nose, Sinus body system, add root operation Control for the body part Nasal Mucosa and Soft Tissue to distinguish procedures to control epistaxis from procedures to control bleeding elsewhere in the respiratory tract.	093K[78]ZZ (2 codes)

EXAMPLE

Section	**0** Medical and Surgical		
Body System	**9** Ear, Nose, Sinus		
Operation	**ADD 3** Control: Stopping, or attempting to stop, postprocedural or other acute bleeding		
Body Part	Approach	Device	Qualifier
ADD K Nasal Mucosa and Soft Tissue	**7** Via Natural or Artificial Opening **8** Via Natural or Artificial Opening Endoscopic	**Z** No Device	**Z** No Qualifier

Uterus Transplant

Source	Description	Code specification
2016, public & CMS internal review	In the Female Reproductive body system, add the body part value Uterus to the root operation Transplantation table 0UY, to enable coding of uterus transplant procedures.	0UY90Z[012] (3 codes)

EXAMPLE

Section	**0** Medical and Surgical		
Body System	**U** Female Reproductive System		
Operation	**Y** Transplantation: Putting in or on all or a portion of a living body part taken from another individual or animal to physically take the place and/or function of all or a portion of a similar body part		
Body Part	Approach	Device	Qualifier
0 Ovary, Right **1** Ovary, Left **ADD 9** Uterus	**0** Open	**Z** No Device	**0** Allogeneic **1** Syngeneic **2** Zooplastic

Medical and Surgical Section
Axis 6 Device

Creation without Using a Device

Source	Description	Code specification
2016, public comment & CMS internal review	In the Heart and Great Vessels body system of the Medical and Surgical section, add the device value Z No Device to the root operation Creation table 024, for all body part values in the table. These changes enable capture of detail for procedures that do not use additional material (graft or synthetic) to perform the procedure.	024F0ZJ (one code) 024[GJ]0Z2 (2 codes)

EXAMPLE

Section	0 Medical and Surgical		
Body System	2 Heart and Great Vessels		
Operation	4 Creation: Putting in or on biological or synthetic material to form a new body part that to the extent possible replicates the anatomic structure or function of an absent body part		
Body Part	Approach	Device	Qualifier
F Aortic Valve	**0** Open	**7** Autologous Tissue Substitute **8** Zooplastic Tissue **J** Synthetic Substitute **K** Nonautologous Tissue Substitute **ADD Z** No Device	**J** Truncal Valve
G Mitral Valve **J** Tricuspid Valve	**0** Open	**7** Autologous Tissue Substitute **8** Zooplastic Tissue **J** Synthetic Substitute **K** Nonautologous Tissue Substitute **ADD Z** No Device	**2** Common Atrioventricular Valve

Partial Knee Joint Replacement, Unicondylar

Source	Description	Code specification
2017, public comment & CMS internal review	In the Lower Joints body system, revise the device value L Synthetic Substitute, Unicondylar to Synthetic Substitute, Unicondylar Lateral. In addition, add new device values M Synthetic Substitute, Unicondylar Medial and N Synthetic Substitute, Patellofemoral to the root operation Replacement table 0SR, for the knee joint body part values. These changes enable capture of additional detail for partial knee arthroplasty procedures.	Revise 0SR[CD]0L[9AZ] (6 codes) Add 0SR[CD]0MN][9AZ] (12 codes)

EXAMPLE

Section	0 Medical and Surgical			
Body System	S Lower Joints			
Operation	R Replacement: Putting in or on biological or synthetic material that physically takes the place and/or function of all or a portion of a body part			

Body Part	Approach	Device	Qualifier
C Knee Joint, Right **D** Knee Joint, Left	**0** Open	**6** Synthetic Substitute, Oxidized Zirconium on Polyethylene **J** Synthetic Substitute **REVISE from L** Synthetic Substitute, Unicondylar **REVISE to L** Synthetic Substitute, Unicondylar Lateral **ADD M** Synthetic Substitute, Unicondylar Medial **ADD N** Synthetic Substitute, Patellofemoral	**9** Cemented **A** Uncemented **Z** No Qualifier

Joint Fusion Device Value

Source	Description	Code specification
2016, public comment & CMS internal review	In tables 0RG and 0SG, Fusion of Upper Joints and Fusion of Lower Joints, delete device value Z No Device from the tables.	0[RS]G^^Z^ (213 codes)

EXAMPLE

Section	0 Medical and Surgical			
Body System	R Upper Joints			
Operation	G Fusion: Joining together portions of an articular body part rendering the articular body part immobile			

Body Part	Approach	Device	Qualifier
0 Occipital-cervical Joint **1** Cervical Vertebral Joint **2** Cervical Vertebral Joints, 2 or more **4** Cervicothoracic Vertebral Joint **6** Thoracic Vertebral Joint **7** Thoracic Vertebral Joints, 2 to 7 **8** Thoracic Vertebral Joints, 8 or more **A** Thoracolumbar Vertebral Joint	**0** Open **3** Percutaneous **4** Percutaneous Endoscopic	**7** Autologous Tissue Substitute **J** Synthetic Substitute **K** Nonautologous Tissue Substitute **DELETE Z** No Device	**0** Anterior Approach, Anterior Column **1** Posterior Approach, Posterior Column **J** Posterior Approach, Anterior Column
0 Occipital-cervical Joint **1** Cervical Vertebral Joint **2** Cervical Vertebral Joints, 2 or more **4** Cervicothoracic Vertebral Joint **6** Thoracic Vertebral Joint **7** Thoracic Vertebral Joints, 2 to 7 **8** Thoracic Vertebral Joints, 8 or more **A** Thoracolumbar Vertebral Joint	**0** Open **3** Percutaneous **4** Percutaneous Endoscopic	**A** Interbody Fusion Device	**0** Anterior Approach, Anterior Column **J** Posterior Approach, Anterior Column
C Temporomandibular Joint, Right **D** Temporomandibular Joint, Left **E** Sternoclavicular Joint, Right **F** Sternoclavicular Joint, Left **G** Acromioclavicular Joint, Right **H** Acromioclavicular Joint, Left	**0** Open **3** Percutaneous **4** Percutaneous Endoscopic	**4** Internal Fixation Device **7** Autologous Tissue Substitute **J** Synthetic Substitute **K** Nonautologous Tissue Substitute **DELETE Z** No Device	**Z** No Qualifier

J Shoulder Joint, Right K Shoulder Joint, Left			
L Elbow Joint, Right M Elbow Joint, Left N Wrist Joint, Right P Wrist Joint, Left Q Carpal Joint, Right R Carpal Joint, Left S Carpometacarpal Joint, Right T Carpometacarpal Joint, Left U Metacarpophalangeal Joint, Right V Metacarpophalangeal Joint, Left W Finger Phalangeal Joint, Right X Finger Phalangeal Joint, Left	0 Open 3 Percutaneous 4 Percutaneous Endoscopic	4 Internal Fixation Device 5 External Fixation Device 7 Autologous Tissue Substitute J Synthetic Substitute K Nonautologous Tissue Substitute DELETE Z No Device	Z No Qualifier

Medical and Surgical Section
Axis 7 Qualifier

Descending Thoracic Aorta Bypass Qualifiers

Source	Description	Code specification
2016, public comment & CMS internal review	In the Heart and Great Vessels body system of the Medical and Surgical section, add the qualifier value Abdominal Artery, to the root operation Bypass table 021 for the body part value Thoracic Aorta, Descending. These changes enable capture of detail for bypass procedures from the thoracic aorta to abdominal artery sites such as the abdominal aorta, the celiac artery, and the mesenteric arteries. In addition, in table 021 create new qualifier value Lower Extremity Artery, for the body part value Thoracic Aorta, Descending. This change enables capture of detail for limb salvage procedures from the thoracic aorta to lower extremity arteries such as the femoral arteries. In the Heart and Great Vessels body system of the Medical and Surgical section, add the qualifier values Axillary Artery and Brachial Artery, to the root operation Bypass table 021 for the body part value Thoracic Aorta, Descending and the device values Zooplastic Tissue, Autologous Venous Tissue, and Autologous Arterial Tissue. These changes complete	021W0[89AJK][FV] (10 codes) 021W0[89A][GH] (6 codes)

	the available device values for aorto-axillary and aorto-brachial bypass procedures.	

EXAMPLES

Section	**0** Medical and Surgical			
Body System	**2** Heart and Great Vessels			
Operation	**1** Bypass: Altering the route of passage of the contents of a tubular body part			
Body Part	*Approach*	*Device*		*Qualifier*
W Thoracic Aorta, Descending	**0** Open	**8** Zooplastic Tissue **9** Autologous Venous Tissue **A** Autologous Arterial Tissue **J** Synthetic Substitute **K** Nonautologous Tissue Substitute		**B** Subclavian **D** Carotid **ADD F** Abdominal Artery **G** Axillary Artery **H** Brachial Artery **P** Pulmonary Trunk **Q** Pulmonary Artery, Right **R** Pulmonary Artery, Left **ADD V** Lower Extremity Artery

Section	**0** Medical and Surgical		
Body System	**2** Heart and Great Vessels		
Operation	**1** Bypass: Altering the route of passage of the contents of a tubular body part		
Body Part	*Approach*	*Device*	*Qualifier*
W Thoracic Aorta, Descending	**0** Open	**8** Zooplastic Tissue **9** Autologous Venous Tissue **A** Autologous Arterial Tissue	**B** Subclavian **D** Carotid **ADD G** Axillary Artery **ADD H** Brachial Artery **P** Pulmonary Trunk **Q** Pulmonary Artery, Right **R** Pulmonary Artery, Left

Bypass Axillary Artery to Abdominal Artery

Source	Description	Code specification
2016, public comment & CMS internal review	In the Upper Arteries body system of the Medical and Surgical section, create new qualifier value Abdominal Artery, for the root operation Bypass table 031, applied to the body part values Axillary Artery, Right and Axillary Artery, Left. These changes enable capture of additional detail for procedures such as axillary artery to superior mesenteric artery bypass.	031[56]0^T (10 codes)

EXAMPLE

Section	**0** Medical and Surgical
Body System	**3** Upper Arteries
Operation	**1** Bypass: Altering the route of passage of the contents of a tubular body part

Body Part	Approach	Device	Qualifier
5 Axillary Artery, Right **6** Axillary Artery, Left	**0** Open	**9** Autologous Venous Tissue **A** Autologous Arterial Tissue **J** Synthetic Substitute **K** Nonautologous Tissue Substitute **Z** No Device	**0** Upper Arm Artery, Right **1** Upper Arm Artery, Left **2** Upper Arm Artery, Bilateral **3** Lower Arm Artery, Right **4** Lower Arm Artery, Left **5** Lower Arm Artery, Bilateral **6** Upper Leg Artery, Right **7** Upper Leg Artery, Left **8** Upper Leg Artery, Bilateral **9** Lower Leg Artery, Right **B** Lower Leg Artery, Left **C** Lower Leg Artery, Bilateral **D** Upper Arm Vein **F** Lower Arm Vein **J** Extracranial Artery, Right **K** Extracranial Artery, Left **ADD T** Abdominal Artery **V** Superior Vena Cava

Bypass Common Carotid Artery to Other Upper Artery

Source	Description	Code specification
2016, Coding Clinic Editorial Advisory Board & CMS internal review	In the Upper Arteries body system of the Medical and Surgical section, add the qualifier value Upper Artery to the root operation Bypass table 031, for the body part values Common Carotid Artery, Right and Common Carotid Artery, Left. These changes will enable capture of detail for bypass procedures from the common carotid artery to other upper arteries, such as the subclavian artery.	031[HJ]0^Y (10 codes)

EXAMPLE

Section	**0** Medical and Surgical
Body System	**3** Upper Arteries
Operation	**1** Bypass: Altering the route of passage of the contents of a tubular body part

Body Part	Approach	Device	Qualifier
H Common Carotid Artery, Right **J** Common Carotid Artery, Left	**0** Open	**9** Autologous Venous Tissue **A** Autologous Arterial Tissue **J** Synthetic Substitute **K** Nonautologous Tissue Substitute **Z** No Device	**G** Intracranial Artery **J** Extracranial Artery, Right **K** Extracranial Artery, Left **ADD Y** Upper Artery

Obstetrics Section
Axis 7 Qualifier

Cesarean Delivery Qualifiers

Source	Description	Code specification
2017, Coding Clinic Editorial Advisory Board & CMS internal review	In the Obstetrics section, in the root operation Extraction table 10D revise the qualifier value from Classical to High, and revise the qualifier value from Low Cervical to Low, to facilitate the appropriate classification of cesarean delivery procedures using existing codes.	10D00Z[01] (2 codes)

EXAMPLE

Section	**1** Obstetrics		
Body System	**0** Pregnancy		
Operation	**D** Extraction: Pulling or stripping out or off all or a portion of a body part by the use of force		

Body Part	Approach	Device	Qualifier
0 Products of Conception	**0** Open	**Z** No Device	**REVISE from 0** Classical **REVISE to 0** High **REVISE from 1** Low Cervical **REVISE to 1** Low **2** Extraperitoneal

Rerelease for MS-DRG Version 35 Software on CMS Website

- CMS will be providing the rerelease of MS-DRG Grouper and Medicare Code Editor (MCE) Version 35 software through download on CMS' website
  - https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/AcuteInpatientPPS/FY2018-IPPS-Final-Rule-Home-Page.html
  - Errata document available
  - See Related Links section at the bottom of the page
  - NTIS is no longer providing the software