

An orange speech bubble containing the word "Fiscal".

Fiscal

Happy New Year

2023 Updates

Go into effect October 1, 2022

Summary of “New” ICD-10-CM Codes

1179 New Codes Were Delivered



# of New Codes	Chapter
2	Infectious and Parasitic
20	Blood and Blood Forming Organs
11	Endocrine, Nutritional and Metabolic
83	Behavioral & neurodevelopment disorders
14	Nervous
43	Circulatory
1	Respiratory
1	Digestive
35	Musculoskeletal
137	Genitourinary

Number of New Codes	Chapter
175	Pregnancy/CB & Puerperium
10	Perinatal
16	Congenital Malformations
104	Injuries, Poisonings
479	External causes
48	Factors Influencing health status

Table 6A: includes the listing of new diagnoses codes, CC/MCC designations and associated MS-DRGs

New Codes! New Codes! New Codes!

Freshly Baked and Ready to Use:



We cannot cover the entire list of new diagnoses- Please refer to table 6A- final rule

Hemolytic –Uremic Syndrome (HUS)

MCC as a Secondary Diagnosis

- D59.30 Hemolytic-uremic syndrome, unspecified
- D59.31 Infection-associated hemolytic-uremic syndrome
- D59.32 Hereditary hemolytic-uremic syndrome
- D59.39 Other, hemolytic syndrome

DRG Mapping:

791 Prematurity with major problems

792 Prematurity without major problems

793 Full term neonate with major problems

811 Red blood cell disorders w/ MCC

812 Red blood cell disorders w/o MCC

977 HIV with or without other related condition

D59.3 Hemolytic-uremic Syndrome (HUS)

Code also, if applicable, any associated:

Acute kidney failure (N17.-)

Chronic kidney disease (N18.-)

D59.30 hemolytic-uremic syndrome, unspecified

Hemolytic-uremic syndrome NOS

D59.31 Infection- associated hemolytic-uremic syndrome

Siga toxin-producing E. coli (STEC) related HUS

Typical hemolytic uremic syndrome

Use additional code to identify the associated infection

D59.32 Hereditary hemolytic-uremic syndrome

Atypical hemolytic-uremic syndrome with an identified genetic cause

Code also, if applicable: defects in the complement system (D84.1)

methylmalonic acidemia (E71.120)

D59.3 Hemolytic-uremic Syndrome (HUS)

D59.39 Other hemolytic-uremic syndrome

Atypical (nongenetic) hemolytic uremic syndrome

Secondary hemolytic-uremic syndrome

Code first, if applicable, any associated:

COVID-19 (U07.1)

complications of kidney transplant (T86.1-)

complications of heart transplant (T86.2-)

complications of liver transplant (T86.4-)

Code also, if applicable, any associated condition, such as:

hypertensive emergency (I16.1)

malignant neoplasm (C00-C96)

systemic lupus erythematosus

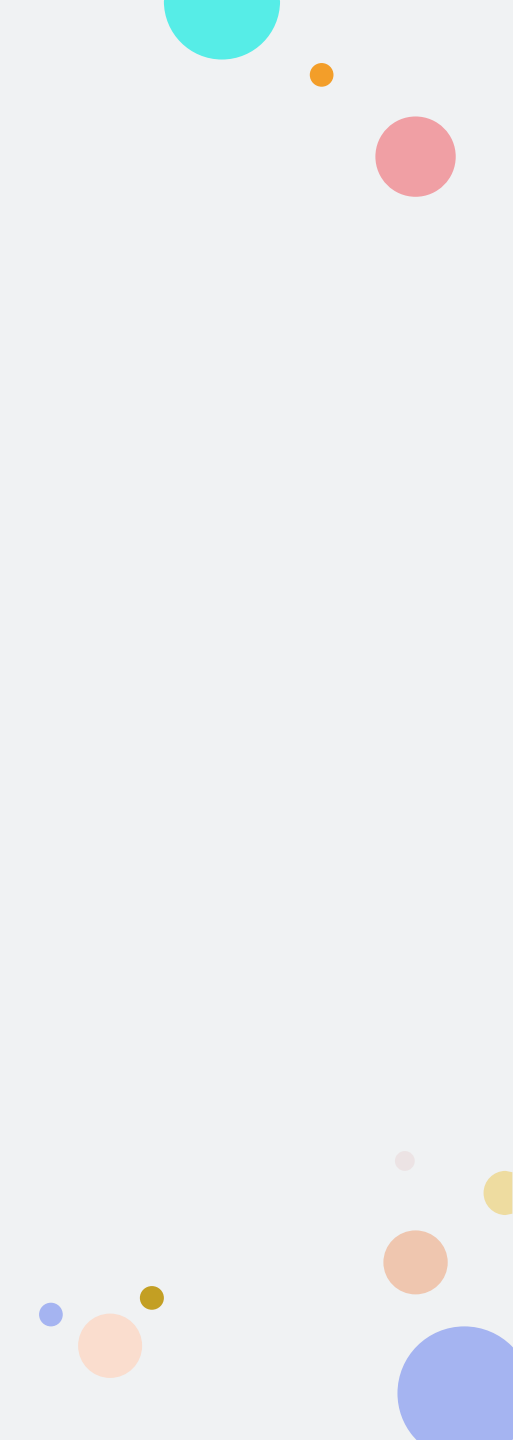
Use Additional code if applicable, for adverse effect to identify drug (T36-T50 with 5th or 6th character 5)



Von Willebrand Disease (VWD)

Provides a CC as a Secondary Diagnosis

DRG 813 Coagulation Disorders when Pdx.

- D68.00 Von Willebrand disease, unspecified
 - D68.01 Von Willebrand disease, type 1
 - D68.020 Von Willebrand disease, type 2A
 - D68.021 Von Willebrand disease, type 2B
 - D68.022 Von Willebrand disease, type 2M
 - D68.022 Von Willebrand disease, type 2N
 - D68.029 Von Willebrand disease, type 2, unspecified
 - D68.03 Von Willebrand disease, type 3
 - D68.04 Acquired Von Willebrand disease
 - D68.09 Other Von Willebrand disease
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Von Willebrand Disease

- **Type 1** – the mildest and most common type. People with type 1 VWD have a reduced level of von Willebrand factor in their blood. Bleeding is mostly only a problem if you have surgery, injure yourself, or have a tooth removed.
- **Type 2** – in people with this type of VWD, von Willebrand factor does not work properly. Bleeding tends to be more frequent and heavier than in type 1.
- **Type 3** – the most severe and rarest type. People with type 3 VWD have very low levels of von Willebrand factor, or none at all. Bleeding from the mouth, nose and gut is common, and you can have joint and muscle bleeds after an injury.
- Acquired von Willebrand disease is very rare and is usually associated with other conditions that affect the blood, immune system or heart.

E87.2 Acidosis

Excludes 1: Diabetic acidosis

E87.20 Acidosis, unspecified

Lactic acidosis NOS

Metabolic acidosis NOS

E87.21 Acute metabolic acidosis

Acute lactic acidosis

E87.22 Chronic metabolic acidosis

Chronic lactic acidosis

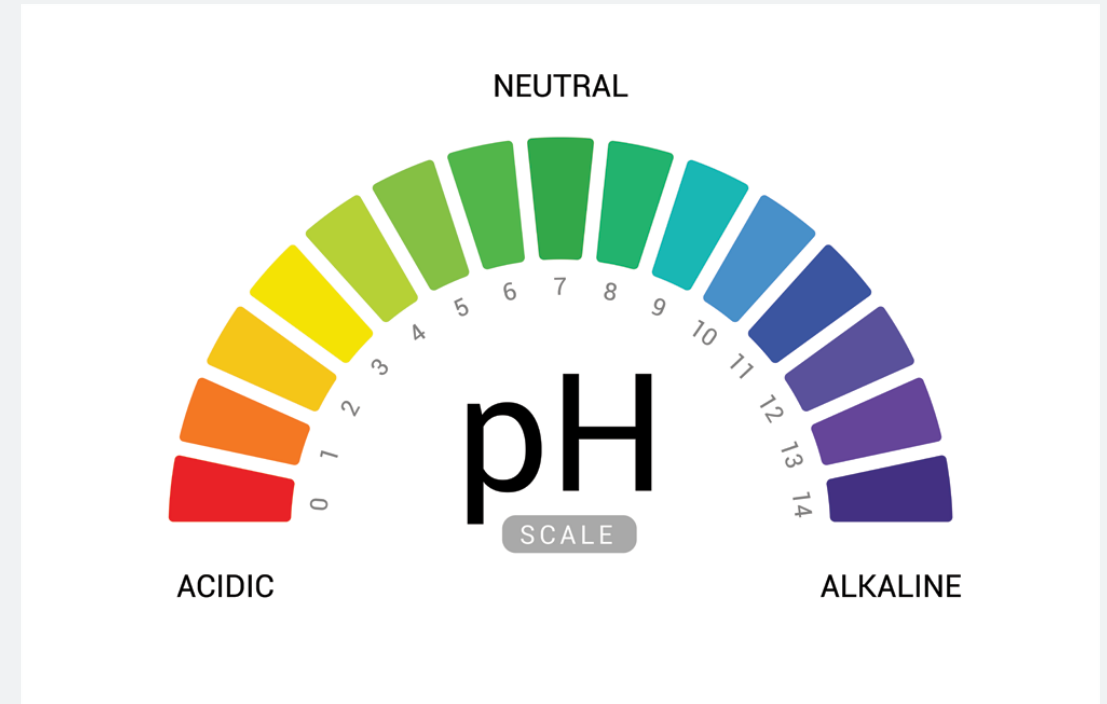
Code first the underlying etiology, if applicable

E87.29 Other Acidosis

Respiratory acidosis NOS

Excludes2: acute respiratory acidosis (J96.02)

chronic respiratory acidosis (J96.12)



ACUTE Respiratory Acidosis

CHRONIC Respiratory Acidosis

J96.0 Acute respiratory failure

J96.00 Acute respiratory failure, unspecified whether with hypoxia or hypercapnia

J96.01 Acute respiratory failure with hypoxia

J96.02 Acute respiratory failure with hypercapnia
Acute respiratory acidosis

J96.1 Chronic respiratory failure

J96.10 Chronic respiratory failure, unspecified whether with hypoxia or hypercapnia

J96.11 Chronic respiratory failure with hypoxia

J96.12 Chronic respiratory failure with hypercapnia
Chronic respiratory acidosis

Expansion of Dementia Codes

Vascular Dementia (F01.5-)

Dementia in diseases classified elsewhere (F02.8-)

Unspecified dementia (F03.9-)

- **F01.5** Vascular dementia, unspecified severity, without behavioral disturbance, psychotic disturbance, mood disturbance and anxiety
- **F01.511** Vascular dementia, unspecified severity with agitation
- **F01.518** Vascular dementia, unspecified severity, with other behavioral disturbance
- **F01.52** Vascular dementia, unspecified severity, with psychotic disturbance
- **F01.53** Vascular dementia, unspecified severity, with mood disturbance
- **F01.54** Vascular dementia, unspecified severity, with anxiety

A CC is assigned for code descriptions (mild, moderate & severe) that include:

- **With agitation**
- **With other behavioral disturbance**
- **With psychotic disturbance**
- **With mood disturbance**
- **With anxiety**



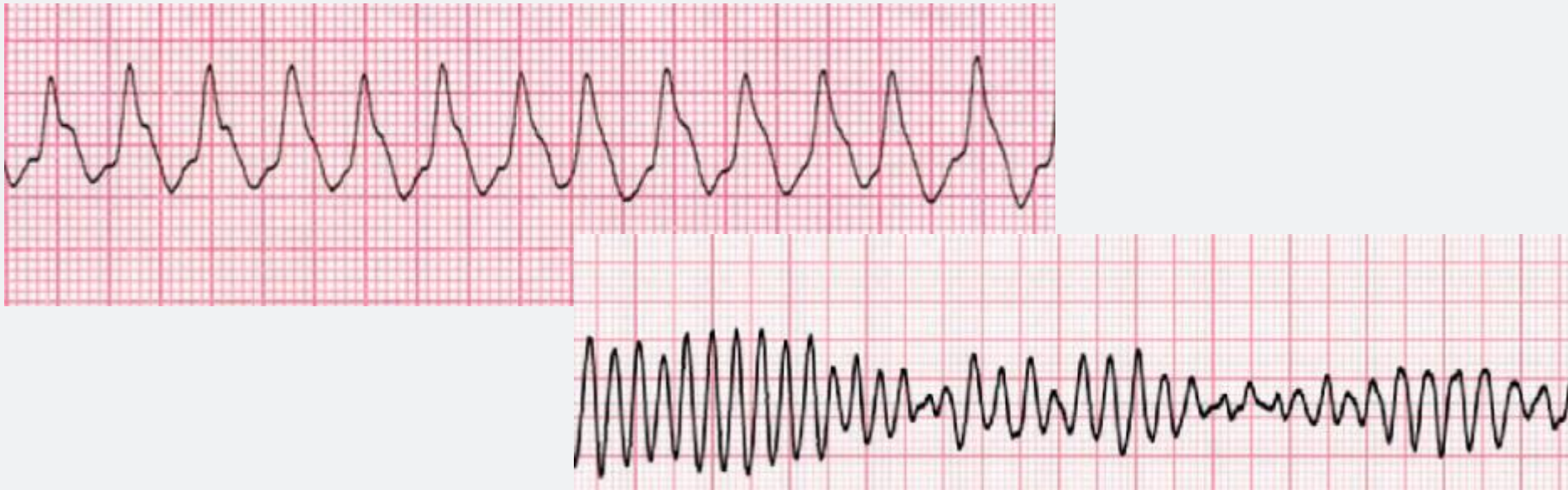
I20.2 Refractory Angina Pectoris Provides a CC as a Secondary Diagnosis

- Refractory angina pectoris (RAP) describes the occurrence of frequent angina attacks that are uncontrolled by optimal drug therapy
- These attacks significantly limit the patient's daily activity
- It occurs in the presence of coronary artery disease that prohibits the use of percutaneous coronary intervention or bypass surgery

I47.2 Ventricular Tachycardia

Provides a CC as a Secondary Diagnosis

- I47.20 Ventricular tachycardia, unspecified
- I47.21 Torsades de pointes
- I47.29 Other ventricular tachycardia



J95.87 Transfusion Associated Dyspnea

Provide a CC as a Secondary Diagnosis

Excludes1:

Transfusion associated circulatory overload (TACO) (E87.71)

Transfusion-related acute lung injury (TRALI) (J95.84)

- Transfusion reactions are defined as harms occurring during or after blood transfusion, with new heart/lung stress (eg. troubled breathing) regarded as cardiorespiratory transfusion reactions (CRTRs).
- CRTRs are among the most important, as the leading cause of transfusion-related harm and death.
- Though there are distinct classifications for these events, real life cases often don't fall neatly into a given category, with outliers regarded as "transfusion associated dyspnea (TAD)".
- It is unknown what TAD is -- whether it has a unique root cause, is a milder version of other known CRTRs, or is a blend of events.

K76.82 Hepatic Encephalopathy

No CC/MCC

K76.82 Hepatic encephalopathy

Hepatic encephalopathy, NOS
Hepatic encephalopathy without coma
Hepatocerebral intoxication
Portal-systemic encephalopathy

Code also underlying liver disease, such as:

acute and subacute hepatic failure without coma (K72.00)
alcoholic hepatic failure without coma (K70.40)
chronic hepatic failure without coma (K72.10)
hepatic failure with toxic liver disease without coma (K71.10)
hepatic failure without coma (K72.90)
icterus of newborn (P55-P59)
postprocedural hepatic failure (K91.82)
viral hepatitis without hepatic coma (B15.9, B16.1, B16.9, B17.10, B19.10, B19.20, B19.9)

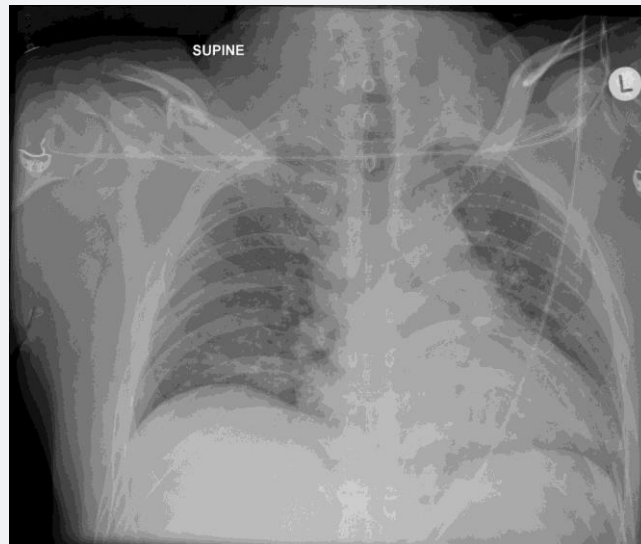
Excludes1: acute and subacute hepatic failure with coma (K72.01)

alcoholic hepatic failure with coma (K70.41)
chronic hepatic failure with coma (K72.11)
hepatic failure with coma (K72.91)

Fracture Associated with Chest Compression

M96.A-

- M96.A1 Fx. Of sternum associated with chest compression and CPR
- M96.A2 Fx. Of one rib associated with chest compression and CPR
- M96.A3 Multiple fx. Of ribs associated with
- **M96.A4 Flail chest associated with chest compression and CPR**
- M96.A9 Other fracture associated with chest compressions and CPR



Flail chest — defined as **two or more contiguous rib fractures with two or more breaks per rib** — is one of the most serious of these injuries and is often associated with considerable morbidity and mortality.

Your future lies within the FY 2023 Final Rule Tables



FY 2023 Final Rule Tables

1. **Table 1A-1E (ZIP)**: This excel spreadsheet contains the FY 2023 Operating and Capital National Standardized Amounts.
2. **FY 2023 Final Rule Tables 2, 3 and 4A and 4B (Wage Index Tables) (ZIP)**: Table 2-Case-Mix Index and Wage Index Table by CMS Certification Number (CCN); Table 3-Wage Index Table by CBSA; Table 4A - List of Counties Eligible for the Out-Migration Adjustment under Section 1886(d)(13) of the Act; Table 4B Counties Redesignated under Section 1886(d)(8)(B) of the Act (LUGAR COUNTIES)
3. **Table 5 (ZIP)**: MS-DRGs, Relative Weighting Factors and Geometric and Arithmetic Mean Length of Stay
4. **Tables 6A-6K and Tables 6P.1a-6P.1f (ZIP)**: Table 6A-New Diagnosis Codes; Table 6B-New Procedure Codes; Table 6C-Invalid Diagnosis Codes; Table 6D-Invalid Procedure Codes; Table 6E-Revised Diagnosis Code Titles; Table 6G.1-Secondary Diagnosis Order Additions to the CC Exclusions List; Table 6G.2-Principal Diagnosis Order Additions to the CC Exclusions List; Table 6H.1-Secondary Diagnosis Order Deletions to the CC Exclusions List; Table 6H.2-Principal Diagnosis Order Deletions to the CC Exclusions List; Table 6I-Complete MCC List; Table 6I.1-Additions to the MCC List; Table 6I.2-Deletions to the MCC List; Table 6J-Complete CC List; Table 6J.1-Additions to the CC List; Table 6J.2-Deletions to the CC List; Table 6K-Complete List of CC Exclusions;
Tables 6P.1a-6P.1f (ICD-10-CM and ICD-10-PCS Codes for MS-DRG Changes): See summary tab in excel spreadsheet called "CMS-1771-F TABLE 6P ICD-10-CM and ICD-10-PCS Codes for MS-DRG Changes.xlsx" for complete description of all tables.
5. **Tables 8A, 8B, and 8C (ZIP)**: Tables 8A and 8B contain the FY 2023 IPPS operating and capital statewide average cost-to-charge-ratios. Table 8C contains the FY 2023 LTCH statewide average cost-to-charge-ratios.
6. **Table 15 (ZIP)**: FY 2023 Hospital Readmissions Reduction Program Payment Adjustment Factors: This table contains the final FY 2023 payment adjustment factors CMS applies to discharges occurring on or after October 1, 2022.
7. **Table 16A and 16B**: Hospital Value-Based Purchasing (VBP) Program Adjustment Factors: *Note, this table is not necessary for FY 2023.*
8. **Table 18 (ZIP)**: FY 2023 Medicare DSH Uncompensated Care Payment Factor 3.