

# Eli's Rehab Report

## **New ICD-9 Codes Allow Site Specificity for Decubitus Ulcers**

### You have until Oct.1 to implement the new diagnosis code changes

Coders, take notice: At midnight on Sept. 30, you'll have to remove one set of decubitus ulcer ICD-9 codes and implement another.

The Centers for Disease Control and Prevention and CMS have unveiled their new 2005 **ICD9 Codes**, and because payers do not allow a grace period for the new codes, you should update your superbills by Sept. 30.

Although the new codes won't dramatically change the way physiatrists submit claims, says **Gregory Mulford, MD**, medical director at Atlantic Rehabilitation Services and chairman of rehabilitation medicine at Morristown Memorial Hospital in New Jersey, the following new codes will have the most relevance to PM&R practices.

#### Assign 9 New Decubitus Ulcer Codes Based on Site

"Decubitus ulcers include any chronic ulcer of the skin, including bedsores, plaster ulcers, and pressure ulcers," says **Mary J. Brown, CPC, CMA,** coding specialist at OrthoWest PC, a seven-physician practice in Omaha, Neb. Foot and ankle specialists and orthopedic surgeons may use these codes for chronic or non-healing skin ulcers that can occur from casts rubbing a patient's skin or prolonged periods of bed rest, Brown says.

"The code that you would use now is 707.0 (Decubitus ulcer), which is a generalized decubitus ulcer code," Brown says. "However, it appears that this code range (707.00-707.09, see below for definitions) will now require a fifth digit to specify the location of the decubitus ulcer." The new bedsore codes follow:

- 1. 707.00 -- Decubitus ulcer, unspecified site
- 2. 707.01 -- ... elbow
- 3. 707.02 -- ... upper back
- 4. 707.03 -- ... lower back
- 5. 707.04 -- ... hip
- 6. 707.05 -- ... buttock
- 7. 707.06 -- ... ankle
- 8. 707.07 -- ... heel
- 9. 707.09 -- ... other site.

Report Diabetes According to Latest Terminologies

Physiatrists who address medical nutrition therapy (MNT) should pay close attention to ICD-9's updated diabetes code series (250.00-250.93). These codes no longer reflect insulin versus non-insulin dependency. Physicians should now dictate either type I, type II, unspecified, or juvenile diabetes instead of pass terminologies NIDM and IDDM.

#### New DVT Codes Make Their Debut

Also on the ICD-9 horizon are three new venous embolism codes. These better clarify deep venous thrombosis, which patients sometimes have after joint-replacement surgery. The following three codes are more specific than 453.8 (Other venous embolism and thrombosis; of other specified veins), which orthopedists previously used for this diagnosis:



- 10. 453.40 -- Venous embolism and thrombosis of unspecified deep vessels of lower extremity
- 11. 453.41 -- Venous embolism and thrombosis of deep vessels of proximal lower extremity
- 12. 453.42 -- Venous embolism and thrombosis of deep vessels of distal lower extremity.

#### ICD-9 Creates New West Nile Fever Codes

No longer should you report infectious disease code 066.4 for West Nile fever. ICD-9 released four new codes for this disease:

- 13. 066.40 -- West Nile fever, unspecified
- 14. 066.41 -- West Nile fever with encephalitis
- 15. 066.42 -- West Nile fever with other neurologic manifestation
- 16. 066.49 -- West Nile fever with other complications.

Get Specific With New V Codes

In addition, the following new codes may be relevant to your PM&R practice:

- 17. 524.64 -- Temporomandibular joint sounds on opening and/or closing the jaw
- 18. 705.21 -- Primary focal hyperhidrosis
- 19. 705.22 -- Secondary focal hyperhidrosis
- 20. V46.11 -- Dependence on respirator, status
- 21. V58.66 -- Long-term (current) use of aspirin
- 22. V58.67 -- Long-term (current) use of insulin
- 23. V69.4 -- Lack of adequate sleep.

To review a full listing of the new ICD-9 codes, visit the CMS Web site at <a href="http://www.cms.hhs.gov/medlearn/icd9code.asp#coding">http://www.cms.hhs.gov/medlearn/icd9code.asp#coding</a>.