

Eli's Rehab Report

READER QUESTION: Don't Ignore the Fifth Digit in Diagnosis Codes

Question: Our billing system does not accept **721.91**. Our biller said that this is a deleted ICD-9 code. We see a lot of cervical cases, and coding their diagnoses is hard. We usually use 721.91 or 723.4. Should we be using something else instead?

Idaho Subscriber

Answer: Code 721.91 (Spondylosis of unspecified site; with myelopathy) and 723.4 (Other disorders of cervical region; brachial neuritis or radiculitis NOS) are active and valid codes, according to the 2006 ICD-9-CM manual. A common mistake to check for is the absence of a fifth digit. That could be your problem because 721.9 is an invalid code without the fifth digit.

In terms of what ICD-9 code you should use on the claim form, in most states, you have two options. The first is to use the ICD-9 code that corresponds to the physician's medical diagnosis. A second option (check state and local laws as well as your respective practice act) is to use the therapy/treatment diagnosis the therapist determines after he completes his initial examination. Whichever ICD-9 code(s) you use on the claim form, either the physician's referral or the therapist's initial evaluation must support it.