
SUMMARY REPORT

ICD-9-CM COORDINATION AND MAINTENANCE COMMITTEE

September 14, 2011

PROCEDURE DISCUSSIONS

Introductions and Overview

Pat Brooks welcomed the participants to the ICD-9-CM Coordination and Maintenance (C&M) Committee meeting. This was a one day meeting with procedure code issues discussed in the morning, followed by diagnosis code issues. There were a very small number of code requests on the agenda because of the implementation of the partial code freeze. The code updates effective October 1, 2011 are the last regular updates to ICD-9-CM prior to implementation of ICD-10 on October 1, 2013. Page 4 of the agenda and handouts packet includes information on the partial code freeze. Only codes for new technologies or new diseases will be considered for inclusion in ICD-9-CM and ICD-10 for the October 1, 2012 updates. Only codes for new technologies or new diseases will be considered for inclusion in ICD-10 for the October 1, 2013 updates. Regular updates to ICD-10 will begin on October 1, 2014.

The purpose of this meeting is to discuss updates to the ICD-9-CM and ICD-10 coding systems. CMS provided phone lines on a first come, first serve basis for callers to listen to the presentations. *For details on each presentation and discussion, please listen to the audio file of the meeting located at the following website under the September 14, 2011 link <https://www.cms.gov/ICD9ProviderDiagnosticCodes/ICD9/list.asp>*

CMS and CDC have “gone green” for the meetings beginning with the March 2010 C&M meeting. CMS no longer prepares paper handouts of the proposal package. This information was included on the meeting announcements and on the website. Those who wished to have a copy of the handouts would need to print their own copies prior to the meetings.

The agenda and handouts were posted on CMS’ and CDC’s websites in advance of the meeting to allow listeners to follow the discussions. Callers were in listen-only mode and not able to make comments or ask questions during the meeting. Everyone was encouraged to send their written comments after the meeting.

The morning meeting began with one ICD-9-CM procedure code topic, Electromagnetic Navigation Bronchoscopy. This is a repeat of a topic discussed at the March 9, 2011 meeting. We then discussed one ICD-10-PCS topic, Non-autologous Mesh which is under consideration for the October 1, 2014 ICD-10-PCS update. Following these two procedure code topics we provided updates on several ICD-10 related issues.

Following the procedure code topics and the ICD-10-PCS updates, the diagnosis portion of the meeting began. The diagnosis part of the meeting was conducted by staff from the Centers for Disease Control and Prevention (CDC). A summary report of their topics can be found on their website as stated on the Timeline in the agenda and handouts packet.

The ICD-9-CM procedure code issues discussed at the September 14, 2011 C&M meeting are being considered for implementation on October 1, 2012. There were no requests for implementation of new codes on April 1, 2012. Therefore, no new ICD-9-CM codes will be implemented on April 1, 2012.

The public is offered an opportunity to make additional written comments by mail or e-mail through November 18, 2011 for codes proposed to be implemented on October 1, 2012. Email comments are preferred since this avoids delays in mailroom screenings and deliveries.

Comments on the **procedure** part of the meeting should be sent to:

Pat Brooks

Patricia.brooks2@cms.hhs.gov

Comments on the **diagnosis** part of the meeting should be sent to:

Donna Pickett

Nchsied9CM@cdc.gov

The participants were encouraged to refer to the timeline for future meeting information and the deadline for receipt of public comments.

The C&M Committee meetings serve as a public forum to discuss proposed revisions to the ICD-9-CM and ICD-10. The public is given a chance to offer comments and ask questions about the proposed revisions. **No final decisions on code revisions take place at the meeting.**

CMS ICD-9-CM home page

CMS has information on several ICD-9-CM related issues at the following web address:

<http://www.cms.hhs.gov/ICD9ProviderDiagnosticCodes>.



Registration for the ICD-9-CM Coordination and Maintenance Committee Meetings

CMS utilizes an online registration for the ICD-9-CM Coordination and Maintenance Committee Meetings. A link to the registration site is provided on the ICD-9-CM Coordination and Maintenance Committee meeting homepage, under the Related Links Inside CMS section, at the following web address: http://www.cms.gov/ICD9ProviderDiagnosticCodes/03_meetings.asp.

April 1 code updates

There will be no new procedure codes implemented on April 1, 2012 since there were no requests.

ICD-9-CM TOPICS

1. Electromagnetic Navigation Bronchoscopy

Leah Amir conducted a presentation on electromagnetic navigation or “EM tip tracked” technology. This technology is an aid to bronchoscopy that allows the bronchoscopist to rapidly reach lesions in the periphery of the lung. Celeste Beauregard led the coding proposal discussion. An issue paper on this topic begins on page 10 of the agenda and handouts document found on the ICD-9-CM Coordination and Maintenance Committee webpage mentioned previously. One commenter asked for clarification and questioned if this technology is ever used without a bronchoscopy being performed at all. Ms. Amir responded that a bronchoscopy may be performed first to check the airway (trachea) for obstruction and then an EM tip tracked procedure may follow. The commenter then asked if the procedure was ever performed without a biopsy because there are existing ICD-9-CM codes to identify biopsies and excision of lesions of the bronchus or lung. Ms. Amir responded that she agreed if a biopsy were performed then the existing codes would be appropriate to report but stated she felt it was also important to note how the biopsy was obtained for improved outcomes research. One commenter questioned what they would see documented in the medical record to describe this technology. Ms. Amir stated she has asked physicians for copies of reports and the documentation includes terms such as “EM tip tracked”, “Super D (dimensional)” or “Veran procedure” with the most common being “EM tip tracked.” Another commenter questioned how this technology relates to the codes for computer-assisted surgery (CAS) that is used for localization in neurosurgery or video-assisted thoracoscopic (VAT) procedures. Ms. Amir replied that they have found many of the papers show that procedures that might have gone to VAT would not need to go to VAT and the CAS codes are different from the EM tip tracked technology because the device is internal and it communicates back to the device on the tip with a CT image. One commenter stated that in reviewing literature they have seen a spectrum of interventions and noticed the EM tip tracked products on one end of the spectrum and on the other end competing products with different approaches to get from the central to the peripheral lung. This commenter had concerns on how coders would tease out information related to these similar products when some use bronchoscopy or introduce the catheter through the bronchoscope and all appear to share the same basic technique in preparing for a bronchoscopy. Ms. Amir indicated she was not familiar with the various modalities from a clinical standpoint and may need to follow up

in a separate discussion; however, she stated that one would not want to use a bronchoscope with the Veran product because the outer diameter would be increased. The commenter indicated the other products were being utilized for smaller diameters according to the literature and agreed, further discussion would be appropriate. Another commenter discussed terminology issues for the proposed code and suggested that perhaps consideration should be given to alternate terms so as not to limit the use of the code to a specific product and also for research purposes. The participants were encouraged to submit additional written comments.

ICD-10-PCS Code Requests

1. Non-autologous Mesh

Parag Bhanot, MD, facilitated a clinical presentation on the types, use and benefits of nonautologous mesh in abdominal wall reconstruction. Pat Brooks led the coding proposal discussion. A discussion of this item begins on page 12 of the agenda and handouts document found on the ICD-9-CM Coordination and Maintenance Committee webpage mentioned previously. One commenter questioned the terms “autologous” and “nonautologous” for use as devices in ICD-10-PCS indicating that there is currently difficulty in physician documentation trying to distinguish one from the other. Pat Brooks acknowledged it can be confusing and stated there would be a discussion regarding the PCS Device Key that may assist coders in differentiating among the various terms used to describe devices in ICD-10-PCS. Participants were encouraged to submit their written comments regarding the proposal.

ICD-10 TOPICS

Pat Brooks and Rhonda Butler, 3M, reviewed information on ICD-10-PCS update activities as shown on pages 14-25 of the agenda and handouts document found on the ICD-9-CM Coordination and Maintenance Committee webpage mentioned previously.

An announcement was also made regarding the ICD-10-PCS Guidelines in response to public comments. Pat Brooks informed the participants that these guidelines are considered official guidelines as they were developed by the Cooperating Parties. Additional public comments, questions and suggestions to further refine the existing guidelines are welcome and encouraged.

Janice Bonazelli, 3M, provided an overview of the MS-DRG Definitions Manual structure and the differences between the MS-DRG Definitions Manual and the MS-DRG Software on pages 26-29 of the agenda and handouts document.

Pat Brooks informed participants that availability of the draft ICD-10 IOCE is anticipated to be completed and posted to the CMS website by early 2012.

That concluded the procedure code discussions.

