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

SUMMARY REPORT

ICD-9-CM COORDINATION AND MAINTENANCE COMMITTEE

March 5, 2012

PROCEDURE DISCUSSIONS

Introductions and Overview

Pat Brooks welcomed the participants to the ICD-9-CM Coordination and Maintenance (C&M) Committee meeting. The purpose of this meeting is to discuss updates to the ICD-9-CM and ICD-10 coding systems. The public is encouraged to make comments on these proposals at the meeting and to make written comments following the meeting. No final decisions on code updates are made at the meeting. The nature of the code request is described and then proposed coding options are presented. CMS and CDC evaluate comments made at the meeting and subsequent written comments prior to finalizing any code updates. CMS provided phone lines on a first come, first serve basis for callers to listen to the presentations. We would encourage all those listening to the proceedings to send their written comments after the meeting. The agenda and handouts were posted on CMS' and CDC's websites in advance of the meeting to allow listeners to follow the discussions.

This was a one day meeting with procedure code issues discussed in the morning, followed by diagnosis codes. CMS has the lead on procedure codes and CDC has the lead on diagnosis codes. 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 were the last regular updates to ICD-9-CM prior to implementation of ICD-10. Participants were referred to page 4 of the handouts for information on the partial code freeze, which has been discussed at multiple prior C&M meetings. 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.

The ICD-9-CM procedure code issues discussed at the March 5, 2012 C&M meeting are being considered for implementation on October 1, 2012. As shown on the timeline document in the handout on page 5, the deadline for comments is April 6, 2012. E-mail 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

For **diagnosis** code related information including due dates for comments and proposed implementation dates, please see the summary report on CDCs homepage at http://www.cdc.gov/nchs/icd9.htm

Comments on the **diagnosis** part of the meeting should be sent to:
Donna Pickett
Dfp4@cdc.gov

The participants are encouraged to refer to the timeline for future meeting information, deadlines for receipt of public comments, and publication of final code updates.

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.**

Announcement of ICD-10 Delay

The Health and Human Services Secretary Kathleen G. Sebelius announced on February 16, 2012 that HHS will initiate a process to postpone the date by which certain health care entities have to comply with International Classification of Diseases, 10th Edition diagnosis and procedure codes (ICD-10). The press release for this announcement was included as page 12 of the handouts. Denise Buenning, Office of E-Health Standards and Services (OESS), attended the meeting to provide an explanation of what the announcement means and what information will be available in the future. OESS has the lead for the national implementation of ICD-10. At future C&M meetings there will be more detailed discussions on the issue of delaying ICD-10 and the impact this might have on code updates.

Pat Brooks introduced Denise Buenning, Office of E-Health Standards and Services (OESS). Ms. Buenning stated that the Secretary announced the Department's intention to delay ICD-10 compliance. OESS is looking at all options for implementing that delay, and is currently gathering data to help inform that decision. OESS is also working to determine the most appropriate, expeditious and legal vehicle through which to effect this change. OESS understands everyone's "need to know" just as soon as possible and is working toward that end. A participant asked where comments could be sent concerning an ICD-10 delay. Denise recommended that comments be sent to her via e-mail at Denise.Buenning@cms.hhs.gov.

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#TopOfPage

April 1 code updates
There will be no new procedure codes implemented on April 1, 2012 since there were no requests from the September 2011 meeting.

ICD-9-CM TOPICS:

1. Administration of Fidaxomicin

Sherwood Gorbach, MD facilitated a clinical presentation on the administration of a new antibacterial agent, DIFICID® (Fidaxomicin), to treat Clostridium difficile diarrhea. Celeste Beauregard led the coding proposal discussion. An issue paper on this topic begins on page 8 of the agenda and handouts document found on the ICD-9-CM Coordination and Maintenance Committee webpage mentioned previously. One commenter opposed adding oral medications to ICD-9-CM since this is not a procedure and has not been captured in the history of ICD-9-CM. Another commenter, who worked on the request for the new code, supported the creation of a new code and expressed that the need to capture a new technology should negate the fact that this would establish a new precedent within ICD-9-CM. The participants were encouraged to submit additional written comments.

2. Injection or Infusion of Glucarpidase

Suzanne Ward, Pharm. D., BTG Medical Affairs, provided a clinical presentation on the use of glucarpidase (Voraxaze®) to treat cancer patients with toxic levels of methotrexate in their blood due to impaired renal function. Amy Gruber facilitated the coding discussion. One attendee asked for clarification that the potential implementation of a new code for the injection or infusion of glucarpidase would be effective October 1, 2012 even though there is a partial ICD-9-CM code freeze. It was explained that new technology would be considered during the partial code freeze and if new code 00.95, Injection and Infusion of Glucarpidase, was approved, the effective date would be October 1, 2012. One commenter stated that they would support the new code if it was necessary for new technology. A clinical question regarding the methotrexate concentration analyzed by HPLC assay was addressed by Suzanne Ward. Suzanne stated that during the clinical trial, methotrexate was analyzed by HPLC assay because post-Voraxaze® methotrexate could not be reliably measured due to DAMPA metabolite interference. However, a local immunoassay could be used prior to Voraxaze® administration in order to assess need for therapy, if HPLC assay is not available. The participants were encouraged to submit written comments after the meeting.

ICD-10 Topics

1. ICD-10 MS-DRG Update

Pat Brooks introduced Janice Bonazelli, 3M, who reviewed information on ICD-10 MS-DRG V29.0 update activities as shown on pages 13-14 of the agenda and handouts document found on the ICD-9-CM Coordination and Maintenance Committee webpage mentioned previously.

Ms. Bonazelli provided an overview of the MS-DRG Definitions Manual updates and briefly discussed actions taken in response to public comments received. These updates included informing participants of the finalized diagnosis and procedure code description lengths for ICD-10 and a new "Summary of Changes" document that is forthcoming which will highlight revisions made from V28.0 to V29.0 of the Definitions Manual.

Lastly, Ms. Bonazelli announced that the V29.0 Definitions Manual is now available in both text and HTML versions on the CMS website at http://www.cms.gov/ICD10.

2. Translation of HAC List to ICD-10 Codes

Celeste Beauregard informed participants that the ICD-9-CM HAC codes have been translated into ICD-10-CM/PCS codes and are available for public review and comment on the CMS ICD-10 website located at:
http://www.cms.gov/ICD10/17_ICD10_MS_DRG_Conversion_Project.asp#TopOfPage

Reviewers should click on the link for the most recent post, versionV29 of the ICD-10 MS-DRG Definitions Manual and see Appendix I for the translation lists.

The translation list can also be found on the CMS HAC webpage located at:
http://www.cms.gov/HospitalAcqCond/06h_icd10_hacs.asp#TopOfPage

A CMS ICD-10-CM/PCS HAC Translation Feedback Mailbox has been set up for reviewers to submit comments. This feedback link is titled 'CMS HAC Feedback' and is located under the Related Links Inside CMS section on the HAC webpage. We refer readers to page 15 of the agenda and handouts documents for additional information.

3. Impact of the Transition to ICD-10 on Medicare Inpatient Hospital Payments

Elizabeth McCullough, 3M, provided participants with an overview of the process used to simulate the payment impact of the transition to ICD-10. Ms. McCullough discussed how ICD-9-CM data was converted to ICD-10-CM/PCS data and the results of the analysis. Further detailed information can be found on pages 16-22 of the agenda and handouts document. That concluded the procedure code discussions.