



Provider Inquiry Assistance

Medicare Contractor Annual Update of the International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) – JA6107

Related CR Release Date : July 29, 2008

Date Job Aid Revised: August 26, 2008

Effective Date: October 1, 2008

Implementation Date: October 6, 2008

Key Words MM6107, CR6107, R1566CP, ICD-9-CM

Contractors Affected

- Medicare Carriers
- Part A/B Medicare Administrative Contractors (A/B MACs)
- Durable Medical Equipment MACs (DME MACs)
- Fiscal Intermediaries (FIs)
- Regional Home Health Intermediaries (RHHIs)

Provider Types Affected Physicians, suppliers, and providers billing Medicare Carriers, A/B MACs, DME MACs, and FIs including RHHIs



The annual ICD-9-CM coding update will be effective for dates of service on and after October 1, 2008 (for institutional providers, effective for discharges on or after October 1, 2008).

Provider Needs to Know...

- The new, revised, and discontinued ICD-9-CM diagnosis codes can be viewed on the Centers for Medicare & Medicaid Services (CMS) website at http://www.cms.hhs.gov/ICD9ProviderDiagnosticCodes/07_summarytables.asp#TopOfPage or at the National Center for Health Statistics website at <http://www.cdc.gov/nchs/icd9.htm> in June of each year.
- An ICD-9-CM code is required for all professional claims (including those from physicians, non-physician practitioners, independent clinical diagnostic laboratories, occupational and physical therapists, independent diagnostic testing facilities,

audiologist, ambulatory surgical centers, and for all institutional claims but is not required for ambulance supplier claims.

- The annual ICD-9-CM code changes are also in a CD-ROM, which providers can purchase for \$25.00 from the Government Printing Office), stock number 017-022-01573-1.

Background

The ICD-9-CM codes are updated annually as stated in the *Medicare Claims Processing Manual*, Chapter 23 (Fee Schedule Administration and Coding Requirements), Section 10.2 (Relationship of ICD-9-CM Codes and Date of Service).

**Operational
Impact**

N/A

**Reference
Materials**

The related MLN Matters article can be found at <http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM6107.pdf> on the CMS website.

The official instruction (CR6107) regarding this change may be viewed at <http://www.cms.hhs.gov/Transmittals/downloads/R1566CP.pdf> on the CMS website.

To learn more about ICD-9-CM codes, providers can read the *Medicare Claims Processing Manual*, Chapter 23 (Fee Schedule Administration and Coding Requirements), Section 10.2 (Relationship of ICD-9-CM Codes and Date of Service) or look at the information provided at http://www.cms.hhs.gov/ICD9ProviderDiagnosticCodes/01_overview.asp#TopOfPage on the CMS website.
