

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services



News Flash – Vaccination is the Best Protection Against the Flu. The Centers for Disease Control and Prevention (CDC) is encouraging everyone 6 months of age and older to get vaccinated against the seasonal flu. The risks for complications, hospitalizations, and deaths from the flu are higher among individuals aged 65 years and older. Medicare pays for the seasonal flu vaccine and its administration for seniors and others with Medicare with no co-pay or deductible. And remember, vaccination is particularly important for healthcare workers, who may spread the flu to high risk patients. Don't forget to immunize yourself and your staff. Protect your patients. Protect your family. Protect yourself. **Get the Flu Vaccination -- Not the Flu. Remember –** Influenza vaccine plus its administration are covered Part B benefits. CMS has posted the 2011-2012 seasonal influenza vaccine payment limits at <http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Part-B-Drugs/McrPartBDrugAvgSalesPrice/index.html> on the CMS website. Note that influenza vaccine is NOT a Part D-covered drug. For information about Medicare's coverage of the influenza vaccine and its administration, as well as related educational resources for healthcare professionals and their staff, visit <http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/index.html> on the CMS website.

MLN Matters® Number: MM7506 Revised

Related Change Request (CR) #: 7506

Related CR Release Date: August 26, 2011

Effective Date: Discharges on or after October 1, 2011

Related CR Transmittal #: R2289CP

Implementation Date: October 3, 2011

Fiscal Year (FY) 2012 Inpatient Psychiatric Facility Prospective Payment System (IPF PPS) Changes

Note: This article was revised on March 22, 2013, to add a reference to article SE1239 at <http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/SE1239.pdf> on the CMS website. SE1239 announces the revised ICD-10 implementation date of October 1, 2014. All other content remains the same.

Provider Types Affected

Hospitals submitting claims to Medicare Fiscal Intermediaries (FIs) or Part A/B Medicare Administrative Contractors (A/B MACs) for inpatient psychiatric services

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provided to Medicare beneficiaries and paid under the Inpatient Psychiatric Facility Prospective Payment System (IPF PPS) are affected.

What You Need to Know

This article is based on Change Request (CR) 7506, which informs Medicare contractors about the FY 2012 update to the Medicare Severity Diagnosis Related Groups (MS-DRGs) and ICD-9-CM coding. The coding changes require an update to the IPF PPS' comorbidity adjustment, effective October 1, 2011. Please be sure to inform your staffs of these changes.

Background

IPF PPS Rate Changes

The IPF PPS rate changes occurred on July 1, 2011. Please see the MLN Matters® article MM7367, "Update-Inpatient Psychiatric Facilities Prospective Payment System (IPF PPS) Rate Year 2012," issued on May 20, 2011, for the IPF PPS policy changes. To review this article, visit <http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/downloads/MM7367.pdf> on the Centers for Medicare & Medicaid Services (CMS) website.

DRG Adjustment Update

The IPF PPS has DRG specific adjustments for MS-DRGs. The Centers for Medicare & Medicaid Services (CMS) provides payment under the IPF PPS for claims with a principal diagnosis included in Chapter Five of the ICD-9-CM or the DSM-IV-TR. However, only those claims with diagnoses that group to a psychiatric MS-DRG will receive a DRG adjustment and all other applicable adjustments. Although the IPF will not receive a DRG adjustment for a principal diagnosis not found in one of Medicare's identified psychiatric DRGs, the IPF will still receive the Federal per diem base rate and all other applicable adjustments.

The IPF PPS uses the same GROUPER as the IPPS, including the same diagnostic code set and MS-DRG classification system, in order to maintain consistency. The updated codes are effective October 1 of each year. Although the code set is being updated, note that these are the same adjustment factors in place since implementation.

Based on changes to the ICD-9-CM coding system used under the IPPS, the following changes are being made to the principal diagnoses that are used to assign MS-DRGs under the IPF PPS. The following table lists the FY 2012 new ICD-9-CM diagnosis codes that group to one of the MS-DRGs for which the IPF PPS provides an adjustment. This table is only a listing of FY 2012 new codes, and does not reflect

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all of the currently valid and applicable ICD-9-CM codes classified in the MS-DRGs. When coded as a principal diagnosis, these codes receive the correlating MS-DRG adjustment.

Diagnosis Codes	Description	MS-DRG
294.20	Dementia, unspecified, without behavioral disturbance	884
294.21	Dementia, unspecified with behavioral disturbance	884
310.81	Pseudobulbar affect	056,057
310.89	Other specified nonpsychotic mental disorders following organic brain damage	056,057
358.30	Lambert-Eaton syndrome, unspecified	056, 057
358.31	Lambert-Eaton syndrome, in neoplastic disease	056, 057
358.39	Lambert-Eaton syndrome in other diseases classified elsewhere	056, 057
331.6	Corticobasal degeneration	056, 057

The following table lists the FY 2012 **invalid** ICD-9-CM diagnosis code that is no longer applicable for the DRG adjustment.

Diagnosis Code	Description	MS-DRG
310.8	Other specified nonpsychotic mental disorders following organic brain damage	884

The table below lists the FY 2012 **revised** ICD-9-CM diagnosis code that impacts the MS-DRG adjustment under the IPF PPS. The table only lists the FY 2012 **revised** code and does not reflect all of the currently valid ICD codes applicable for the IPF PPS MS-DRG adjustment.

Diagnosis Code	Description	MS-DRG
317	Mild intellectual disabilities	884
318.0	Moderate intellectual disabilities	884
318.1	Severe intellectual disabilities	884
318.2	Profound intellectual disabilities	884
319	Unspecified intellectual disabilities	884

The table below lists the seventeen MS-DRG adjustment categories for which CMS is providing an adjustment, their respective codes and their respective adjustment factors. The MS-DRG adjustment factors, shown below, are effective October 1, 2011, and will continue to be paid for FY 2012.

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MS-DRG	MS-DRG Description	Adjustment Factor
056	Degenerative nervous system disorders w MCC	1.05
057	Degenerative nervous system disorders w/o MCC	1.05
080	Nontraumatic stupor & coma w MCC	1.07
081	Nontraumatic stupor & coma w/o MCC	1.07
876	O.R. procedure w principal diagnosis of mental illness	1.22
880	Acute adjustment reaction & psychosocial dysfunction	1.05
881	Depressive neurosis	0.99
882	Neurosis except depressive	1.02
883	Disorders of personality & impulse control	1.02
884	Organic disturbances & mental retardation	1.03
885	Psychoses	1.00
886	Behavioral & developmental disorders	0.99
887	Other mental disorder diagnoses	0.92
894	Alcohol/drug abuse or dependence, left AMA	0.97
895	Alcohol/drug abuse or dependence w rehabilitation therapy	1.02
896	Alcohol/drug abuse or dependence w/o rehabilitation therapy w MCC	0.88
897	Alcohol/drug abuse or dependence w/o rehabilitation therapy w/o MCC	0.88

Comorbidity Adjustment Update

The following table lists the FY 2012 **new** ICD-9-CM diagnosis codes which group to one of the 17 comorbidity categories for which the IPF PPS provides an adjustment. The table lists only the FY 2012 new codes, and does not reflect all of the currently valid ICD codes applicable for the IPF PPS comorbidity adjustment. The FY 2012 IPF Pricer will be updated to include these codes in the comorbidity tables, effective for discharges on or after October 1, 2011.

Diagnosis Code	Description	Comorbidity category
173.00	Unspecified malignant neoplasm of skin of lip	Oncology Treatment
173.01	Basal cell carcinoma of skin of lip	Oncology Treatment
173.02	Squamous cell carcinoma of skin of lip	Oncology Treatment
173.09	Other specified malignant neoplasm of skin of lip	Oncology Treatment
173.10	Unspecified malignant neoplasm of eyelid, including canthus	Oncology Treatment
173.11	Basal cell carcinoma of eyelid, including canthus	Oncology Treatment
173.12	Squamous cell carcinoma of eyelid, including canthus	Oncology Treatment
173.19	Other specified malignant neoplasm of eyelid, including canthus	Oncology Treatment

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Diagnosis Code	Description	Comorbidity category
173.20	Unspecified malignant neoplasm of skin of ear and external auditory canal	Oncology Treatment
173.21	Basal cell carcinoma of skin of ear and external auditory canal	Oncology Treatment
173.22	Squamous cell carcinoma of skin of ear and external auditory canal	Oncology Treatment
173.29	Other specified malignant neoplasm of skin of ear and external auditory canal	Oncology Treatment
173.30	Unspecified malignant neoplasm of skin of other and unspecified parts of face	Oncology Treatment
173.31	Basal cell carcinoma of skin of other and unspecified parts of face	Oncology Treatment
173.32	Squamous cell carcinoma of skin of other and specified parts of face	Oncology Treatment
173.39	Other specified malignant neoplasm of skin of other and unspecified part of face	Oncology Treatment
173.40	Unspecified malignant neoplasm of scalp and skin of neck	Oncology Treatment
173.41	Basal cell carcinoma of scalp and skin of neck	Oncology Treatment
173.42	Squamous cell carcinoma of scalp and skin of neck	Oncology Treatment
173.49	Other specified malignant neoplasm of scalp and skin of neck	Oncology Treatment
173.50	Unspecified malignant neoplasm of skin of trunk, except scrotum	Oncology Treatment
173.51	Basal cell carcinoma of skin of trunk, except scrotum	Oncology Treatment
173.52	Squamous cell carcinoma of skin of trunk, except scrotum	Oncology Treatment
173.59	Other specified malignant neoplasm of skin of trunk, except scrotum	Oncology Treatment
173.60	Unspecified malignant neoplasm of skin of upper limb, including shoulder	Oncology Treatment
173.61	Basal cell carcinoma of skin of upper limb, including shoulder	Oncology Treatment
173.62	Squamous cell carcinoma of skin of upper limb, including shoulder	Oncology Treatment
173.69	Other specified malignant neoplasm of skin of upper limb, including shoulder	Oncology Treatment
173.70	Unspecified malignant neoplasm of skin of lower limb, including hip	Oncology Treatment
173.71	Basal cell carcinoma of skin of lower limb, including hip	Oncology Treatment
173.72	Squamous cell carcinoma of skin of lower limb, including hip	Oncology Treatment

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Diagnosis Code	Description	Comorbidity category
173.79	Other specified malignant neoplasm of skin of lower limb, including hip	Oncology Treatment
173.80	Unspecified malignant neoplasm of other specified sites of skin	Oncology Treatment
173.81	Basal cell carcinoma of other specified sites of skin	Oncology Treatment
173.82	Squamous cell carcinoma of other specified sites of skin	Oncology Treatment
173.89	Other specified malignant neoplasm of other specified sites of skin	Oncology Treatment
173.90	Unspecified malignant neoplasm of skin, site unspecified	Oncology Treatment
173.91	Basal cell carcinoma of skin, site unspecified	Oncology Treatment
173.92	Squamous cell carcinoma of skin, site unspecified	Oncology Treatment
173.99	Other specified malignant neoplasm of skin, site unspecified	Oncology Treatment

The table below lists the FY 2012 **invalid** ICD-9-CM codes no longer applicable for the comorbidity adjustment. The FY 2012 IPF Pricer will be updated to remove these codes in the comorbidity tables, effective for discharges on or after October 1, 2011.

Diagnosis Code	Description	Comorbidity Category
173.0	Other malignant neoplasm of skin of lip	Oncology Treatment
173.1	Other malignant neoplasm of skin of eyelid, including canthus	Oncology Treatment
173.2	Other malignant neoplasm of skin of ear and external auditory canal	Oncology Treatment
173.3	Other malignant neoplasm of skin of other and unspecified parts of face	Oncology Treatment
173.4	Other malignant neoplasm of scalp and skin of neck	Oncology Treatment
173.5	Other malignant neoplasm of skin of trunk, except scrotum	Oncology Treatment
173.6	Other malignant neoplasm of skin of upper limb, including shoulder	Oncology Treatment
173.7	Other malignant neoplasm of skin of lower limb, including hip	Oncology Treatment
173.8	Other malignant neoplasm of other specified sites of skin	Oncology Treatment
173.9	Other malignant neoplasm of skin, unspecified	Oncology Treatment

Because CMS has a new requirement to include related ICD-10 codes where applicable, the following table provides the current equivalent ICD-10-CM code for

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informational purposes only. The IPF PPS will be fully converted to ICD-10 by October 1, 2013. Note that the following ICD-10-CM codes were obtained from the ICD-10-CM 2011 Mappings because the FY 2012 Mappings are not available at this time.

Diagnosis Code	ICD-10-CM	Description
173.0	C44.0	Malignant Neoplasm of Skin of Lip
173.1	C44.10	Malignant Neoplasm Skin Uns Eyelid Incl Canthus
	C44.11	Malignant Neoplasm Skin Rt. Eyelid Incl Canthus
	C44.12	Malignant Neoplasm Skin Left Eyelid Incl Canthus
173.2	C44.20	Malignant Neoplasm Skin Uns Ear & Ext Auricular canal
	C44.21	Malignant Neoplasm Skin Rt. Ear & Ext Auricular Canal
	C44.22	Malignant Neoplasm Skin Left Ear & Ext Auricular Canal
173.3	C44.30	Malignant Neoplasm of Skin unspecified Part Face
	C44.31	Malignant Neoplasm of Skin of Nose
	C44.39	Malignant Neoplasm of Skin other Parts of Face
173.4	C44.4	Malignant Neoplasm of Skin of Scalp and Neck
173.5	C44.51	Malignant Neoplasm of Anal Skin
	C44.52	Malignant Neoplasm of Skin of Breast
	C44.59	Malignant Neoplasm of Other Part of Trunk
173.6	C44.60	Malignant Neoplasm Skin Uns Up Limb Incl Shoulder
	C44.61	Malignant Neoplasm Skin Right Up Limb Incl Shoulder
	C44.62	Malignant Neoplasm Skin left Up limb Incl Shoulder
173.7	C44.70	Malignant Neoplasm of Skin Uns Low Limb Incl Hip
	C44.71	Malignant Neoplasm of Skin of Rt. Low Limb Incl Hip
	C44.72	Malignant Neoplasm of Skin Left of Low Limb Incl Hip
173.8	C44.8	Malignant Neoplasm of overlapping sides of Skin
173.9	C44.9	Malignant Neoplasm of Skin Unspecified

The table below lists the FY 2012 revised ICD-9-CM diagnosis codes that impact the comorbidity adjustment under the IPF PPS. The table only lists the FY 2012 revised codes and does not reflect all of the currently valid ICD codes applicable for the IPF PPS comorbidity adjustment.

Diagnosis Code	Description	Comorbidity Category
317	Mild intellectual disabilities	Development Disabilities
318.0	Moderate intellectual disabilities	Development Disabilities
318.1	Severe intellectual disabilities	Development Disabilities
318.2	Profound intellectual disabilities	Development Disabilities

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Diagnosis Code	Description	Comorbidity Category
319	Unspecified intellectual disabilities	Development Disabilities
968.5	Surface (topical) and infiltration anesthetics	Poisoning

The ICD-10-CM codes for the Revised Diagnosis Codes were obtained from the ICD-10-CM 2011 Mappings.

Diagnosis Code	Description	ICD-10-CM
317	Mild intellectual disabilities	F70 Mild intellectual disabilities
318.0	Moderate intellectual disabilities	F71 Moderate intellectual disabilities
318.1	Severe intellectual disabilities	F72 Severe intellectual disabilities
318.2	Profound intellectual disabilities	F73 Profound intellectual disabilities
319	Unspecified intellectual disabilities	F78 Other mental retardation
		F79 Unspecified mental retardation
968.5	Surface (topical) and infiltration anesthetics	T41.3x1A Poison by Local Anes Acc Unintentional Int Enc
		T41.3x2A Poison by Local Anes Self-Harm Init Enc
		T41.3x3A Poisoning by Local Anes Assault Initial Encntr
		T41.3x4A Poisoning by Local Anes Undet initial Encntr

The table below lists the seventeen comorbidity categories for which we are providing an adjustment, their respective codes, including the new FY 2012 ICD codes, and their respective adjustment factors.

Description of Comorbidity	Diagnoses Codes	Adjustment Factor
Developmental Disabilities	317, 3180, 3181, 3182, and 319.	1.04
Coagulation Factor Deficits	2860 through 2864.	1.13
Tracheostomy	51900 through 51909 and V440.	1.06
Renal Failure, Acute	5845 through 5849, 63630, 63631, 63632, 63730, 63731, 63732, 6383, 6393, 66932, 66934, 9585.	1.11
Renal Failure, Chronic	40301, 40311, 40391, 40402, 40412, 40413, 40492, 40493, 5853, 5854, 5855, 5856, 5859, 586, V4511, V4512, V560, V561, and V562.	1.11
Oncology Treatment	1400 through 2399 with a radiation therapy code 92.21-92.29 or chemotherapy code 99.25.	1.07

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Description of Comorbidity	Diagnoses Codes	Adjustment Factor
Uncontrolled Diabetes-Mellitus with or without complications	25002, 25003, 25012, 25013, 25022, 25023, 25032, 25033, 25042, 25043, 25052, 25053, 25062, 25063, 25072, 25073, 25082, 25083, 25092, and 25093.	1.05
Severe Protein Calorie Malnutrition	260 through 262	1.13
Eating and Conduct Disorders	3071, 30750, 31203, 31233, and 31234.	1.12
Infectious Disease	01000 through 04110, 042, 04500 through 05319, 05440 through 05449, 0550 through 0770, 0782 through 07889, and 07950 through 07959.	1.07
Drug and/or Alcohol Induced Mental Disorders	2910, 2920, 29212, 2922, 30300, and 30400.	1.03
Cardiac Conditions	3910, 3911, 3912, 40201, 40403, 4160, 4210, 4211, and 4219.	1.11
Gangrene	44024 and 7854.	1.10
Chronic Obstructive Pulmonary Disease	49121, 4941, 5100, 51883, 51884, V4611, V4612, V4613 and V4614.	1.12
Artificial Openings—Digestive and Urinary	56960 through 56969, 9975, and V441 through V446.	1.08
Severe Musculoskeletal and Connective Tissue Diseases	6960, 7100, 73000 through 73009, 73010 through 73019, and 73020 through 73029.	1.09
Poisoning	96500 through 96509, 9654, 9670 through 9699, 9770, 9800 through 9809, 9830 through 9839, 986, 9890 through 9897.	1.11

Additional Information

The official instruction, CR7506, issued to your FI and A/B MAC regarding this change may be viewed at <http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/downloads/R2289CP.pdf> on the CMS website. If you have any questions, please contact your FI or A/B MAC their toll-free number, which may be found at <http://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/provider-compliance-interactive-map/index.html> on the CMS website.

For current information on the new ICD-10 implementation date of October 1, 2014, see article SE1239 at <http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/SE1239.pdf> on the CMS website.

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