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

Note: This article was revised on January 17, 2018, to update Web addresses. All other information remains the same.

Provider Types Affected

Physicians, suppliers, and providers billing Medicare contractors (carriers, Part A/B Medicare Administrative Contractors (A/B MACs), Durable Medical Equipment Medicare Administrative Contractors (DMACs), and fiscal intermediaries (FIs) including regional home health intermediaries (RHHIs)).

Impact on Providers

This article is based on Change Request (CR) 6107 and reminds the Medicare contractors and providers that the annual ICD-9-CM 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). You can see the new, revised, and discontinued ICD-9-CM diagnosis codes on the Centers for Medicare & Medicaid Services (CMS) website at http://www.cms.gov/Medicare/Coding/ICD9ProviderDiagnosticCodes/index.html.

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).

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CMS issued CR 6107 as a reminder that the annual ICD-9-CM coding update will be effective for dates of service on or after October 1, 2008 (for institutional providers, effective for discharges on or after October 1, 2008).

**Remember that 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 (ASCs)), and for all institutional claims; but is not required for ambulance supplier claims.**

**Additional Information**


As mentioned, you can find the new, revised, and discontinued ICD-9-CM diagnosis codes at [http://www.cms.gov/Medicare/Coding/ICD9ProviderDiagnosticCodes/index.html](http://www.cms.gov/Medicare/Coding/ICD9ProviderDiagnosticCodes/index.html). The annual ICD-9-CM code changes are also included in a CD-ROM, which you can purchase for $25.00 from the Government Printing Office (GPO), stock number 017-022-01573-1.

To learn more about ICD-9-CM codes, you might want to read *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.gov/Medicare/Coding/ICD9ProviderDiagnosticCodes/index.html](http://www.cms.gov/Medicare/Coding/ICD9ProviderDiagnosticCodes/index.html).

If you have questions, please contact your Medicare contractor at 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](http://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/provider-compliance-interactive-map/index.html) on the CMS website.

**Document History**

- July 31, 2008 – Initial article released.
- January 17, 2018 – The article is revised to update Web addresses. All other information remains the same.

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