

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Medicare & Medicaid Services



News Flash – The Centers for Medicare & Medicaid Services (CMS) has posted the 2011 versions of the ICD-10-CM and ICD-10-PCS crosswalks, formally referred to as the General Equivalence Mappings (GEMs) at <http://www.cms.gov/Medicare/Coding/ICD10/index.html> on the ICD-10 website. See the links on that page for 2011 ICD-10-CM and GEMs and 2011 ICD-10-PCS and GEMs. In addition, CMS has also posted a document, ICD-10 GEMs 2011 Version Update, Update Summary. This document describes the number of comments CMS received, the type of changes recommended, the types of changes made based on the comments, the types of comments not accepted, and the reasons why some comments were not accepted.

MLN Matters® Number: MM7284 **Revised**

Related Change Request (CR) #: 7284

Related CR Release Date: January 21, 2011

Effective Date: January 1, 2011

Related CR Transmittal #:R8400TN

Implementation Date: July 5, 2011

Revision of the ICD-9 CM Codes Recognized for a Co-morbidity Payment Adjustment under the End-Stage Renal Disease (ESRD) Prospective Payment System (PPS)

Note: This article was updated on August 14, 2012, to reflect current Web addresses. All other content remains the same.

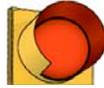
Provider Types Affected

This article is for providers submitting claims to Medicare contractors (Fiscal Intermediaries (FIs), and/or A/B Medicare Administrative Contractors (A/B MACs)) for services provided to Medicare beneficiaries and paid under the ESRD PPS.

Disclaimer

This article was prepared as a service to the public and is not intended to grant rights or impose obligations. This article may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations and other interpretive materials for a full and accurate statement of their contents. CPT only copyright 2009 American Medical Association.

Provider Action Needed



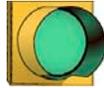
STOP – Impact to You

This article is based on Change Request (CR) 7284 which points out that ICD-9-CM Diagnosis codes 484.6 (Pneumonia in aspergillosis) and 484.7 (Pneumonia in other systemic mycoses) are two diagnoses that are not eligible for a co-morbidity payment adjustment under the ESRD PPS.



CAUTION – What You Need to Know

CR 7284 removes ICD-9-CM diagnosis codes 484.6 (Pneumonia in aspergillosis) and 484.7 (Pneumonia in other systemic mycoses) from the bacterial pneumonia co-morbidity category under the ESRD PPS to prevent incorrect payment on ESRD PPS claims effective January 1, 2011.



GO – What You Need to Do

The volume of claims reporting these codes is expected to be minimal, therefore, your Medicare contractors are not required to identify and adjust any claims with these codes. ESRD facilities that identify claims requiring adjustments for these diagnoses should adjust their claims within the timely filing period.

Additional Information

The official instruction, CR7284, issued to your FIs and A/B MACs regarding this change may be viewed at <http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/downloads/R8400TN.pdf> on the CMS website.

If you have any questions, please contact your FIs or A/B MACs 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> on the CMS website.

News Flash – Get Your Flu Vaccine - Not the Flu. Don't forget to immunize yourself and your staff. Protect your patients. Protect your family. Protect yourself. While seasonal flu outbreaks can happen as early as October, flu activity usually peaks in January. This year's vaccine will protect against three different flu viruses, including the H1N1 virus that caused so much illness last flu season. 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. Health care workers, who may spread the flu to high risk patients, should get vaccinated too. **Remember** – the influenza vaccine

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plus its administration are covered Part B benefits. Note that the 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 health care staff, please visit http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/downloads/Flu_Products.pdf and <http://www.cms.gov/Medicare/Prevention/Immunizations/index.html> on the CMS website.

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