DEPARTMENT OF HEALTH & HUMAN SERVICES
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CENTER FOR MEDICARE

# ICD-10 Coordination and Maintenance Committee Meeting
# Department of Health and Human Services
# Centers for Medicare & Medicaid Services
# ICD-10-PCS Topics Clarifications, Questions and Answers
# March 19, 2024

ICD-10 Coordination and Maintenance Committee Meeting Updates

1) This document provides updated guidance on the interim coding advice that was recommended for *Topic # 02 – Tibiotalocalcaneal Fusion with Internal Fixation Device* discussed during the virtual meeting.

On page 20 of the agenda packet the Interim Coding Advice is currently displayed as follows:

> **Interim Coding Advice**: Continue using codes as described in current coding.

The coding options are currently displayed as follows:

> **Current Coding:** There are no unique ICD-10-PCS codes to describe a gyroid-sheet lattice designed porous internal fixation device for tibiotalocalcaneal fusion to provide stabilization of the hindfoot and ankle. Code the procedure using the appropriate ankle joint body part value in table 0SG, Fusion of Lower Joints, with approach value 0 Open and device value 4 Internal Fixation Device.

| | |
|---|---|
| *Section* | **0** Medical and Surgical |
| *Body System* | **S** Lower Joints |
| *Operation* | **G** Fusion: Joining together portions of an articular body part rendering the articular body part immobile |

| *Body Part* | *Approach* | *Device* | *Qualifier* |
|---|---|---|---|
| **9** Hip Joint, Right<br>**B** Hip Joint, Left<br>**C** Knee Joint, Right<br>**D** Knee Joint, Left<br>**F** Ankle Joint, Right<br>**G** Ankle Joint, Left<br>**H** Tarsal Joint, Right<br>**J** Tarsal Joint, Left<br>**K** Tarsometatarsal Joint, Right<br>**L** Tarsometatarsal Joint, Left<br>**M** Metatarsal-Phalangeal Joint, Right<br>**N** Metatarsal-Phalangeal Joint, Left<br>**P** Toe Phalangeal Joint, Right<br>**Q** Toe Phalangeal Joint, Left | **0** Open<br>**3** Percutaneous<br>**4** Percutaneous Endoscopic | **3** Internal Fixation Device, Sustained Compression<br>**4** Internal Fixation Device<br>**5** External Fixation Device<br>**7** Autologous Tissue Substitute<br>**J** Synthetic Substitute<br>**K** Nonautologous Tissue Substitute | **Z** No Qualifier |

**Coding Options**

**Option 1.** Do not create new ICD-10-PCS codes to describe a gyroid-sheet lattice designed internal fixation device for tibiotalocalcaneal fusion to provide stabilization of the hindfoot and ankle. Continue coding as described in current coding.

**Option 2**. In New Technology Fusion Table XRG, Fusion of Joints, create new device value C Internal Fixation Device, Gyroid-Sheet Lattice Design, applied to body part values J Ankle Joint, Right and K Ankle Joint, Left, to identify a gyroid-sheet lattice design fusion device for the ankle joint that is used to provide stabilization of the hindfoot and ankle.

| | |
|---|---|
| *Section* | **X** New Technology |
| *Body System* | **R** Joints |
| *Operation* | **G** Fusion: Joining together portions of an articular body part rendering the articular body part immobile |

| *Body Part* | *Approach* | *Device / Substance / Technology* | *Qualifier* |
|---|---|---|---|
| **J** Ankle Joint, Right<br>**K** Ankle Joint, Left | **0** Open | **ADD C** Internal Fixation Device, Gyroid-Sheet Lattice Design | **A** New Technology Group 10 |

**CMS Recommendation**: Option 2, as described above.

During the virtual meeting, a commenter asked if the coding options listed describe the fusion of the ankle portion only and if fusion of the talar joint should be coded separately? In subsequent conversation with the requestor to gain additional clarification, the requestor confirmed that fusion of the talar joint should be reported separately.

We are therefore revising the current coding and interim advice to reflect the codes that should be reported to describe a gyroid-sheet lattice designed internal fixation device for tibiotalocalcaneal fusion to provide stabilization of the hindfoot and ankle.

We are correcting current coding for this request to the following:

**Current Coding:** There are no unique ICD-10-PCS codes to describe a gyroid-sheet lattice designed porous internal fixation device for tibiotalocalcaneal fusion to provide stabilization of the hindfoot and ankle. Code the procedure using two codes with the appropriate ankle joint and tarsal joint body part values in table 0SG, Fusion of Lower Joints, with approach value 0 Open and device value 4 Internal Fixation Device.

| | |
|---|---|
| *Section* | **0** Medical and Surgical |
| *Body System* | **S** Lower Joints |
| *Operation* | **G** Fusion: Joining together portions of an articular body part rendering the articular body part immobile |

| *Body Part* | *Approach* | *Device* | *Qualifier* |
|---|---|---|---|
| **9** Hip Joint, Right<br>**B** Hip Joint, Left<br>**C** Knee Joint, Right<br>**D** Knee Joint, Left<br>**F** Ankle Joint, Right<br>**G** Ankle Joint, Left<br>**H** Tarsal Joint, Right | **0** Open<br>**3** Percutaneous<br>**4** Percutaneous Endoscopic | **3** Internal Fixation Device, Sustained Compression<br>**4** Internal Fixation Device<br>**5** External Fixation Device<br>**7** Autologous Tissue Substitute<br>**J** Synthetic Substitute | **Z** No Qualifier |

| | | | |
|---|---|---|---|
| **J** Tarsal Joint, Left<br>**K** Tarsometatarsal Joint, Right<br>**L** Tarsometatarsal Joint, Left<br>**M** Metatarsal-Phalangeal Joint, Right<br>**N** Metatarsal-Phalangeal Joint, Left<br>**P** Toe Phalangeal Joint, Right<br>**Q** Toe Phalangeal Joint, Left | | **K** Nonautologous Tissue Substitute | |

We are also correcting coding option 2 for consideration of this request to the following:

**Option 2**. In New Technology Fusion Table XRG, Fusion of Joints, create new device value C Internal Fixation Device, Gyroid-Sheet Lattice Design, applied to body part values J Ankle Joint, Right and K Ankle Joint, Left, as well as body part values L Tarsal Joint, Right and M Tarsal Joint, Left, to identify a gyroid-sheet lattice design fusion device for the ankle joint that is used to provide stabilization of the hindfoot and ankle. Code the procedure using two codes with the appropriate ankle joint and tarsal joint body part values from Table XRG with approach value 0 Open and device value C Internal Fixation Device, Gyroid-Sheet Lattice Design .

| | |
|---|---|
| *Section* | **X** New Technology |
| *Body System* | **R** Joints |
| *Operation* | **G** Fusion: Joining together portions of an articular body part rendering the articular body part immobile |

| *Body Part* | *Approach* | *Device / Substance / Technology* | *Qualifier* |
|---|---|---|---|
| **J** Ankle Joint, Right<br>**K** Ankle Joint, Left<br>**L** Tarsal Joint, Right<br>**M** Tarsal Joint, Left | **0** Open | **ADD C** Internal Fixation Device, Gyroid-Sheet Lattice Design | **A** New Technology Group 10 |

CORRECTIONS

*Topic # 24 – Posterior Fixation of the Thoracolumbar Spine*

On page 87 of the agenda packet, Coding Option 2 is currently displayed as follows:

**Option 2**. Create new codes in section X, New Technology, to identify the use of a carbon/PEEK spinal stabilization device. Separately assign the applicable ICD-10-PCS code(s) from table 0RG or 0SG if spinal fusion is also performed.

| | |
|---|---|
| *Section* | **X** New Technology |
| *Body System* | **R** Joints |
| *Operation* | **ADD H** Insertion: Putting in a nonbiological appliance that monitors, assists, performs, or prevents a physiological function but does not physically take the place of a body part |

| *Body Part* | *Approach* | *Device / Substance / Technology* | *Qualifier* |
|---|---|---|---|
| **ADD 6** Thoracic Vertebral Joint<br>**ADD 7** Thoracic Vertebral Joints, 2 to 7<br>**ADD 8** Thoracic Vertebral Joints, 8 or more<br>**ADD A** Thoracolumbar Vertebral Joint<br>**ADD B** Lumbar Vertebral Joint<br>**ADD C** Lumbar Vertebral Joints, 2 or more<br>**ADD D** Lumbosacral Joint | **0** Open<br>**3** Percutaneous<br>**4** Percutaneous Endoscopic | **ADD F** Carbon/PEEK Spinal Stabilization Device, Pedicle Based | **A** New Technology Group 10 |

An error was noted in the table where the existing row in Table XRH Insertion of Joints, was not displayed. We are correcting the display of Coding Option 2 for consideration to the following:

**Option 2**. In section X New Technology table XRH, Insertion of Joints, create new device value F Carbon/PEEK Spinal Stabilization Device, Pedicle Based, applied to the new body part values 6 Thoracic Vertebral Joint, 7 Thoracic Vertebral Joints, 2 to 7, 8 Thoracic Vertebral Joints, 8 or more, A Thoracolumbar Vertebral Joint, C Lumbar Vertebral Joints, 2 or more, and also applied to existing body part values B Lumbar Vertebral Joint and D Lumbosacral Joint, to identify the use of a carbon/PEEK spinal stabilization device. Separately assign the applicable ICD-10-PCS code(s) from table 0RG or 0SG if spinal fusion is also performed.

| | |
|---|---|
| *Section* | **X** New Technology |
| *Body System* | **R** Joints |
| *Operation* | **H** Insertion: Putting in a nonbiological appliance that monitors, assists, performs, or prevents a physiological function but does not physically take the place of a body part |

| *Body Part* | *Approach* | *Device / Substance / Technology* | *Qualifier* |
|---|---|---|---|
| **B** Lumbar Vertebral Joint<br>**D** Lumbosacral Joint | **0** Open | **1** Posterior Spinal Motion Preservation Device | **8** New Technology Group 8 |
| **ADD 6** Thoracic Vertebral Joint<br>**ADD 7** Thoracic Vertebral Joints, 2 to 7<br>**ADD 8** Thoracic Vertebral Joints, 8 or more<br>**ADD A** Thoracolumbar Vertebral Joint<br>**B** Lumbar Vertebral Joint<br>**ADD C** Lumbar Vertebral Joints, 2 or more<br>**D** Lumbosacral Joint | **0** Open<br>**3** Percutaneous<br>**4** Percutaneous Endoscopic | **ADD F** Carbon/PEEK Spinal Stabilization Device, Pedicle Based | **A** New Technology Group 10 |

*Topic # 26 - ICD-10-PCS Index Addenda - Radiofrequency Ablation of Renal Sympathetic Nerves*

On page 110 of the agenda packet, the proposed update to New Technology section Table X05, Destruction of Nervous System is currently displayed as follows:

**EXAMPLE**

| | |
|---|---|
| *Section* | **X** New Technology |
| *Body System* | **0** Nervous System |
| *Operation* | **5** Destruction: Physical eradication of all or a portion of a body part by the direct use of energy, force, or a destructive agent |

| *Body Part* | *Approach* | *Device / Substance / Technology* | *Qualifier* |
|---|---|---|---|
| **1** Renal Sympathetic Nerve(s) | **3** Percutaneous | **2** Ultrasound Ablation<br>**ADD 3** Radiofrequency Ablation | **A** New Technology Group 10 |

An error was noted in the axis 7 qualifier value where "A New Technology Group 10" was applied to the axis 6 device/substance/technology value 2 Ultrasound Ablation instead of "9 New Technology Group 9". We are correcting the display of the proposed update to Table X05, Destruction of Nervous System for consideration to the following:

**EXAMPLE**

| | |
|---|---|
| *Section* | **X** New Technology |
| *Body System* | **0** Nervous System |
| *Operation* | **5** Destruction: Physical eradication of all or a portion of a body part by the direct use of energy, force, or a destructive agent |

| *Body Part* | *Approach* | *Device / Substance / Technology* | *Qualifier* |
|---|---|---|---|
| **1** Renal Sympathetic Nerve(s) | **3** Percutaneous | **2** Ultrasound Ablation | **9** New Technology Group 9 |
| **1** Renal Sympathetic Nerve(s) | **3** Percutaneous | **ADD 3** Radiofrequency Ablation | **A** New Technology Group 10 |

QUESTIONS & ANSWERS

Below we provide the responses to questions or comments submitted for the procedure code topics related to new technology add-on payment (NTAP)-related code requests that involve the administration of a therapeutic agent and for the procedure code topics discussed during the March 19, 2024 virtual ICD-10 Coordination and Maintenance Committee Meeting.

**Question:** Why does the code proposal for the *Administration of Orca-T* reflect a single code instead of three codes since there are three separate infusion bags (CD34+, Treg, and Tcon)?

**CMS Response:** The Orca-T cellular drug product is comprised of three infusion bags for the single dose administration of the product as reflected in the code proposal. It is the combination of the three products in totality that reflect the Administration of Orca-T.

**Question:** What happens if only two infusion bags for the Orca-T cellular drug product are administered versus all three infusion bags (CD34+, Treg, and Tcon)?

**Response:** All three infusion bags must be infused for a single dose administration of Orca-T. In clinical trials, all patients receiving Orca-T have been treated with all three cellular drug product infusions (CD34+, Treg, and Tcon). There have not been any cases or situations where a patient has received only two cellular drug products.

**Question:** In the reviewing coding option 2 proposed for *Topic # 04 – Visualization and Analysis of Brain Networks in Magnetic Resonance Imaging*, if finalized, would the magnetic resonance imaging (MRI) be coded separately?

**CMS Response:** Yes. If desired, facilities can report the brain MRI/fMRI using the appropriate code in section B, Imaging.

**Question:** If lymphatic bypass is not performed prophylactically with procedures such as mastectomy or radical prostatectomy, how much time must elapse before a lymphatic bypass can be performed?

**Response:** The literature does not speak of any required waiting time for the lymphatic bypass procedure. However, the decision is likely to be made based on what type of post-surgical treatment the patient must undergo. Elective surgery is almost always postponed while the patient is undergoing chemotherapy or radiation therapy to the area.

**Question:** I have a question regarding *Topic # 10 – Fixation of Lumbar Facet Joint*. When coding a lumbar facet joint fusion using paired titanium cages, would a laminectomy be separately coded, if performed?

**CMS Response:** A laminectomy would only be coded separately when decompression is documented, and there is a distinct surgical objective, not just incidental removal of the lamina to reach the site of the procedure. If the laminectomy is done as an operative approach to prepare for the lumbar facet joint fusion using paired titanium cages fusion, it is not coded separately.[1]

**Question:** Is prademagene zamikeracel (pz-cel) indicated for the elderly? Can it be used on their wounds?

**Response:** Prademagene zamikeracel (pz-cel) is a genetically engineered autologous cell therapy studied for treating wounds in patients with recessive dystrophic epidermolysis bullosa (RDEB). It is not intended for use in non-DEB patients or for treating conditions like pressure ulcers commonly seen in elderly individuals. The gene correction in pz-cel aims to address the underlying cause of RDEB. The study's eligibility criteria included patients aged 6 years and older, with no maximum age limit. While RDEB patients typically have a decreased life expectancy and may not reach elderly age, in cases where they do, elderly RDEB patients could be considered for pz-cel treatment for their wounds. This decision would be based on their overall health status and the recommendation of their physician, provided there are no other health issues that would preclude treatment.

**Question:** Is the 7$^{th}$ character qualifier value '3 Full Thickness' the appropriate qualifier to describe prademagene zamikeracel (pz-cel) epidermal sheets?

**CMS Response:** Yes. Pz-cel is a biologic product, manufactured as multilayer cellular epidermal sheets containing functional copies of collagen producing transgene (COL7A1). The qualifier "full thickness" is the default

[1] American Hospital Association (AHA) Coding Clinic, First Quarter 2019, page 30.

value for bio-engineered skin substitutes except where they are specifically designated as partial thickness.[2]

**Question:** It is my understanding that engineered (non-CAR T-cell) immune cell effector therapies are always administered through a central vein. Are the proposed codes for administration of these therapies via an intravenous (IV) infusion into a peripheral vein considered clinically valid?

**CMS Response:** Yes. The administration of immune effector cell therapies can be performed via an IV infusion of the investigational agent into a peripheral or central vein.

**Question:** Is vessel preparation (for example, percutaneous angioplasty) a mandatory step before inserting the everolimus-eluting resorbable scaffold? Is there ever a scenario where the scaffold is inserted without pre-dilation?

**Response:** Each lesion is evaluated by angiogram prior to the procedure and a treatment is determined. While not required, it is standard of care to pre-dilate the vessel to be able to insert and fully expand the scaffold. Without pre-dilatation, the risk increases of not being able to expand the stent or scaffold. Therefore, it would be a rare case when pre-dilation is not required.

**Question:** If angioplasty, lithotripsy, or atherectomy are performed to optimize lumen diameter prior to placing an everolimus-eluting resorbable scaffold, should these procedures be coded separately?

**CMS Response:** Angioplasty performed prior to placing an everolimus-eluting resorbable scaffold would not be coded separately. As stated in ICD-10-PCS Guideline B3.1.b, "components of a procedure specified in the root operation definition or explanation as integral to that root operation are not coded separately." However, a separate code for any atherectomy and/or intravascular lithotripsy performed at the site prior to balloon dilation and placement of the scaffold should be assigned as these procedures have a distinct surgical objective.

GENERAL QUESTIONS

**Question:** I may have missed this at the beginning of the session this morning. The ICD-10-PCS codes discussed at the ICD-10 Coordination and Maintenance Committee Meeting will possibly be implemented on October 1, 2024 for FY 2025. Is that correct?

**CMS Response:** Yes, as reflected in the Agenda packet, the ICD-10-PCS code proposals presented on March 19, 2024 are being considered for

[2] American Hospital Association (AHA) Coding Clinic, Third Quarter 2014, page 15.

implementation on October 1, 2024. If any portion of the meeting was missed, the link to the recording from the procedure code portion of the March 19, 2024 ICD-10 Coordination and Maintenance Committee Meeting will be made available at https://www.cms.gov/medicare/coding-billing/icd-10-codes/icd-10-coordination-maintenance-committee-materials.

April 19, 2024 is the deadline for receipt of public comments on proposed new procedure codes and revisions discussed at the March 19, 2024 ICD-10 Coordination and Maintenance Committee meeting being considered for implementation on October 1, 2024.

**Question:** How do we get certificates of attendance to get Continuing Education Units (CEUs) for attending today?

**CMS Response:** CMS does not provide certificates of attendance for ICD-10 Coordination and Maintenance (C&M) Committee Meetings. After registering to attend the March 19-20, 2024 ICD-10 Coordination and Maintenance Committee meeting, a confirmation email containing information about joining the webinar as proof of registration should have been received.

As reflected on page 9 of the Agenda packet, CEUs may be awarded by the American Academy of Professional Coders (AAPC) or the American Health Information Management Association (AHIMA) for participation. If you have any questions concerning obtaining your continuing education credits, please contact the respective organization, not CMS.

**Question:** Where can we get the Agenda and meeting materials?

**CMS Response:** The Final Agenda and meeting materials for the procedure code topics discussed during the virtual meeting on March 19, 2024 are available on the CMS website at https://www.cms.gov/medicare/coding-billing/icd-10-codes/icd-10-coordination-maintenance-committee-materials.

The Agenda packet for the diagnosis code topics discussed during the virtual meeting on March 19-20, 2024 is available on the CDC website at https://www.cdc.gov/nchs/icd/icd10cm_maintenance.htm.

We encourage attendees to join our ICD-10 subscriber list to receive information such as when meeting materials have been made available and other ICD-10 related updates.

**Question:** How do I join the ICD-10 Coordination and Maintenance Committee Meetings subscriber list?

**CMS Response:** Instructions for joining the ICD-10 Coordination and Maintenance Subscriber GovDelivery list were included in the March 19, 2024 Agenda packet for the procedure code topics and are also available in the Downloads section of the CMS webpage at: https://www.cms.gov/medicare/coding-billing/icd-10-codes/icd-10-coordination-maintenance-committee-meetings.