

New Codes for the New Year?

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Q: I do not want to bill any incorrect codes this year, and I know there are always some updates to coding for the new year. Do you know what they may be, or where I may find them? Also should I be looking to purchase an *ICD-10*? I am hearing a lot of buzz about this version.

A: Every new year brings about updates and changes to the current coding structures for both diagnosis (*ICD-9*) and procedure codes (CPT), and this year does have some changes. However, they are very minor in relation to the common codes and services used by chiropractic providers.

The 2010 *ICD-9* codes have a large and broad update to the E codes, which are for external causes of injury. These new codes include injuries from running E001.1, various sports (water polo E002.2, and ice hockey E003.1), arts and handicrafts E012.9, food preparation E015.0, and roller-coaster riding E017.0, just to name a few. There are more than 30 new categories, with multiple subcategories in each. These diagnoses would not be primary but used as a secondary or tertiary diagnoses to indicate causation. E codes are not required for billing nor do they add any factor of complication or co-morbidity. Acupuncture claims essentially are driven by the diagnosis of pain, emesis, nausea and osteoarthritis, and these E codes will have no factor to indicate such. However, they may be useful to indicate when there is a trauma not related to a third party and may allow a bypass of the typical questionnaire sent to the patient by the insurance, inquiring about other third-party liability for a traumatic diagnosis.

Gout was updated with new codes 274.00 gouty arthritis, unspecified; 274.01 Acute gouty arthropathy; 274.02 chronic gouty arthropathy without mention of tophus (tophi); 274.03 chronic gouty arthropathy with tophus (tophi).

The common codes and conditions treated by acupuncture professionals have no changes for 2010. For those wishing a complete list of the code changes for *ICD-9* in 2010, e-mail me at sam@aacinetwork.com and request the 2010 diagnosis change list, and it will be forwarded in PDF format.

For the Current Procedural Terminology (CPT), there are no new or revised codes to the physical medicine and rehabilitation codes in 2010. There are some grammatical and punctuation changes to a few codes in this section, which does allow them to be noted as updated, but there are no meaningful changes to definition or description of the services. This includes the codes for acupuncture 97810 to 97814.

In Evaluation and Management (E&M), there is a new code 94990 which is for e-mail or similar evaluation and management services. Similar to the revised phone-call codes added in 2008, use is limited to when this style of evaluation does not lead to an office visit within 24 hours or is the result of a previous office visit within the last seven days.

As far as the use of the coding under *ICD-10*, those codes are not currently viable or accepted and therefore have no bearing on the coding used for current 2010 claims. I began a career in health

care in 1981. During that time, there were lots of ads and other promotions to buy and prepare for *ICD-10*, yet in 2010, the diagnosis codes are still the *ICD-9* version.

It is very unlikely the *ICD-10* version will be adopted, as the World Health Organization is currently working on an 11th revision that is due in 2013. I would think it unlikely that there would be a move to adopt a version that would technically be obsolete with publication of the 11th revision. If the *ICD-10* were adopted, it would be big news for all health care providers and you will readily know. I will certify that when and if this happens, I will be putting that information in this column. Its acceptance would not be by surprise, and we should have many months to prepare and implement changes if it were to happen. Bottom line: use the *ICD-9*.

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