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ICD-9-CM

Professional for Physicians

Volumes 1 and 2

International Classification of Diseases
9th Revision
Clinical Modification

Sixth Edition

Effective October 1, 2003–September 30, 2004

Edited by:
Anita C. Hart, RHIA, CCS, CCS-P
Catherine A. Hopkins, CPC

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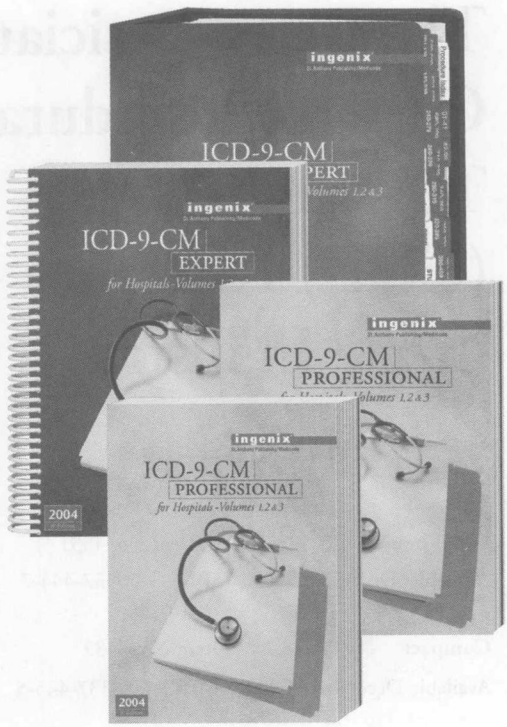

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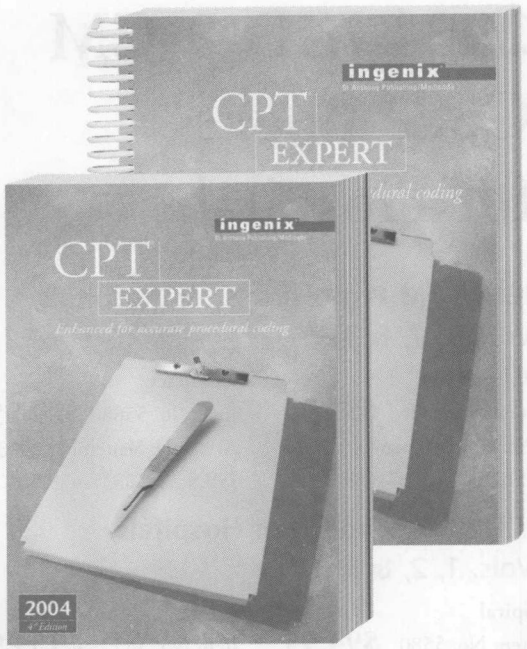

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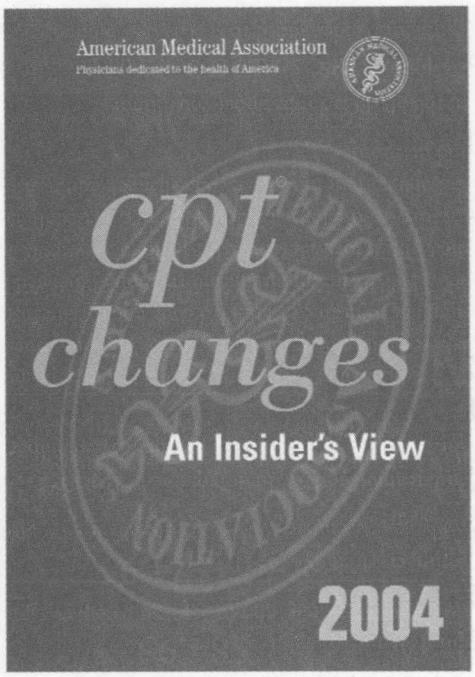

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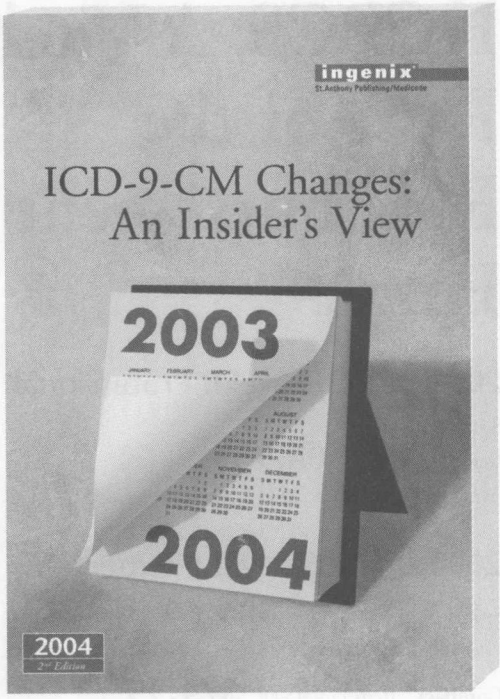

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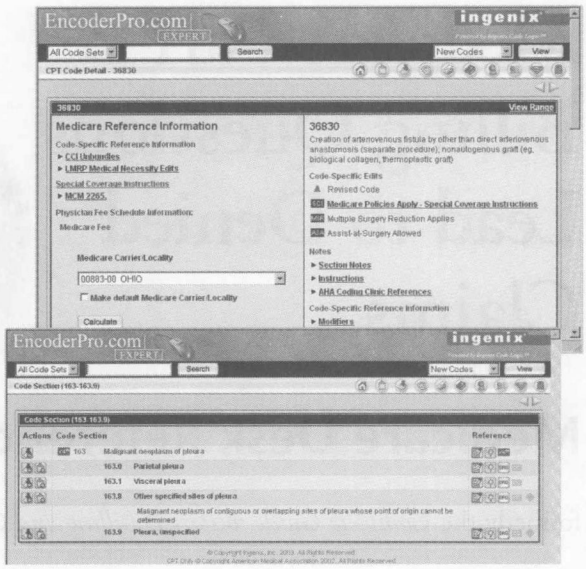

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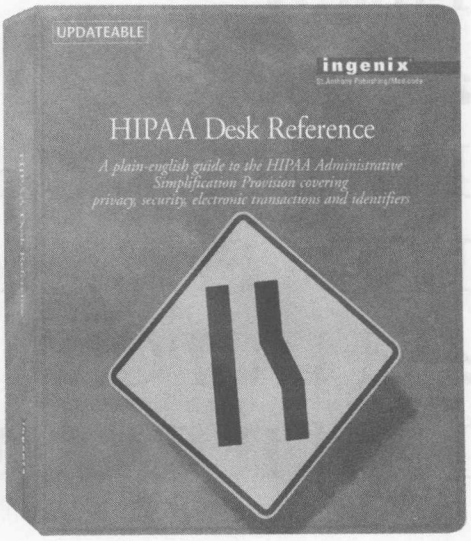

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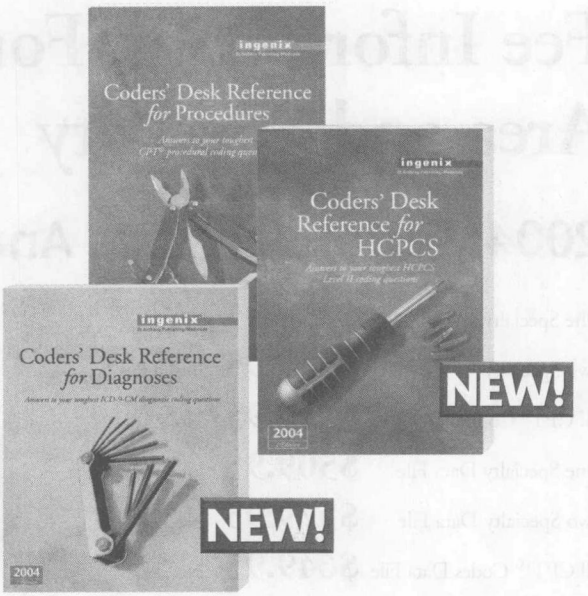

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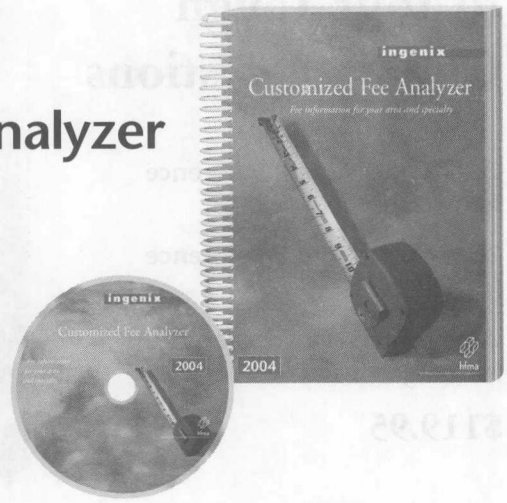

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Preface

ICD-9-CM for Physicians has been designed with the physician office coder in mind. The most recent official government versions of volumes 1 and 2 have been combined to provide physicians and their office staff with an ICD-9-CM book that is easy to use.

In addition, our technical experts have drawn upon their extensive hands-on experience to enhance the government's official version with valuable features essential to correct coding and reimbursement. With these enhancements, physician office coders will increase the efficiency and timeliness of claim submission for both Medicare and other third-party payers.

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TECHNICAL EDITORS

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Product Manager, Ingenix, Inc.

Ms. Hart's experience includes 15 years conducting and publishing research in clinical medicine and human genetics for Yale University, Massachusetts General Hospital, and Massachusetts Institute of Technology. In addition, Ms. Hart has supervised medical records management, health information management, coding and reimbursement, and worker's compensation issues as the office manager for a physical therapy rehabilitation clinic. Ms. Hart is an expert in physician and facility coding, reimbursement systems, and compliance issues. Ms. Hart developed the *Complete Coding Tutor, ICD-9-CM Changes: An Insider View*, and has served as technical consultant for numerous other publications for hospital and physician practices. Currrently, Ms. Hart is the Product Manager and Technical Editor for the ICD-9-CM, ICD-10-CM/PCS and DRG product lines.

Catherine A. Hopkins, CPC
Clinical/Technical Editor, Ingenix, Inc.

Ms. Hopkins has 17 years experience in the health care field. Her experience includes six years as office manager and senior coding specialist for a large multi-specialty practice. Ms. Hopkins has written several coding manuals and newsletters and has taught seminars on CPT, HCPCS, and ICD-9-CM coding. She also serves as technical support for various software products.

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Introduction

HISTORY AND FUTURE OF ICD-9

The *International Classification of Diseases, Ninth Revision, Clinical Modification* (ICD-9-CM) is based on the official version of the World Health Organization's Ninth Revision, International Classification of Diseases (ICD-9). ICD-9-CM classifies morbidity and mortality information for statistical purposes, indexing of hospital records by disease and operations, data storage, and retrieval.

This modification of ICD-9 supplants the Eighth Revision International Classification of Diseases, Adapted for Use in the United States (ICDA-8) and the Hospital Adaptation of ICDA (H-ICDA).

The concept of extending the *International Classification of Diseases* for use in hospital indexing was originally developed in response to a need for a more efficient basis for storage and retrieval of diagnostic data. In 1950, the U.S. Public Health Service and the Veterans Administration began independent tests of the International Classification of Diseases for hospital indexing purposes. The following year, the Columbia Presbyterian Medical Center in New York City adopted the International Classification of Diseases, Sixth Revision, with some modifications for use in its medical record department. A few years later, the Commission on Professional and Hospital Activities (CPHA) in Ann Arbor, Mich., adopted the International Classification of Diseases with similar modifications for use in hospitals participating in the Professional Activity Study.

The problem of adapting ICD for indexing hospital records was addressed by the U.S. National Committee on Vital and Health Statistics through its subcommittee on hospital statistics. The subcommittee reviewed the modifications made by the various users of ICD and proposed that uniform changes be made. This was done by a small working party.

In view of the growing interest in the use of the International Classification of Diseases for hospital indexing, a study was undertaken in 1956 by the American Hospital Association and the American Medical Record Association (then the American Association of Medical Record Librarians) of the relative efficiencies of coding systems for diagnostic indexing. This study indicated the International Classification of Diseases provided a suitable and efficient framework for indexing hospital records. The major users of the International Classification of Diseases for hospital indexing purposes then consolidated their experiences, and an adaptation was first published in December 1959. A revision was issued in 1962 and the first "Classification of Operations and Treatments" was included.

In 1966, the international conference for revising the International Classification of Diseases noted the eighth revision of ICD had been constructed with hospital indexing in mind and considered the revised classification suitable, in itself, for hospital use in some countries. However, it was recognized that the basic classification might provide inadequate detail for diagnostic indexing in other countries. A group of consultants was asked to study the eighth revision of ICD (ICD-8) for applicability to various users in the United States. This group recommended that further detail be provided for coding of hospital and morbidity data. The American Hospital Association was requested to develop the needed adaptation proposals. This was done by an advisory committee (the Advisory Committee to the Central Office on ICDA). In 1968 the United States Public Health Service published the product, Eighth Revision International Classification of Diseases, Adapted for Use in the United States. This became commonly known as ICDA-8, and beginning in 1968 it served as the basis for coding diagnostic data for both official morbidity and mortality statistics in the United States.

In 1968, the CPHA published the Hospital Adaptation of ICDA (H-ICDA) based on both the original ICD-8 and ICDA-8. In 1973, CPHA published a revision of H-ICDA, referred to as H-ICDA-2. Hospitals throughout the United States were divided in their use of these classifications until January 1979, when ICD-9-CM was made the single classification intended primarily for use in the United States, replacing these earlier related, but somewhat dissimilar, classifications.

Physicians have been required by law to submit diagnosis codes for Medicare reimbursement since the passage of the Medicare Catastrophic Coverage Act of 1988. This act requires physician offices to include the appropriate diagnosis codes when billing for services provided to Medicare beneficiaries on or after April 1, 1989. The Centers for Medicare and Medicaid Services (CMS) designated ICD-9-CM as the coding system physicians must use.

In 1993 the World Health Organization published the newest version of International Classification of Diseases, Tenth Revision, ICD-10. This version contains the greatest number of changes in the history of ICD. There are more codes (5,500 more than ICD-9) to allow more specific reporting of diseases and newly recognized conditions. ICD-10 consists of three volumes; tabular list (volume I), instructions (volume 2) and the alphabetic index (volume 3). It contains 21 chapters including two supplementary ones. The codes are alphanumeric (A00–T98, V01–Y98 and Z00–Z99). Currently ICD-10 is being used in some European countries with implementation expected after the year 2000 in the United States.

ICD-9-CM BACKGROUND

In February 1977, a steering committee was convened by the National Center for Health Statistics to provide advice and counsel in developing a clinical modification of ICD-9. The organizations represented on the steering committee included the following:

- American Association of Health Data Systems
- American Hospital Association
- American Medical Record Association
- Association for Health Records
- Council on Clinical Classifications
- Centers for Medicare and Medicaid Services (formerly known as Health Care Financing Administration), Department of Health and Human Services
- WHO Center for Classification of Diseases for North America, sponsored by the National Center for Health Statistics, Department of Health and Human Services

The Council on Clinical Classifications was sponsored by the following:

- American Academy of Pediatrics
- American College of Obstetricians and Gynecologists
- American College of Physicians
- American College of Surgeons
- American Psychiatric Association
- Commission on Professional and Hospital Activities

The steering committee met periodically in 1977. Clinical guidance and technical input were provided by task forces on classification from the Council on Clinical Classification's sponsoring organizations.

ICD-9-CM is a clinical modification of the World Health Organization's ICD-9. The term "clinical" is used to emphasize the modification's intent: to serve as a useful tool to classify morbidity data for indexing medical records, medical care review, and ambulatory and other medical care programs, as well as for basic health statistics. To describe the clinical picture of the patient, the codes must be more precise than those needed only for statistical groupings and trend analysis.

CHARACTERISTICS OF ICD-9-CM

ICD-9-CM far exceeds its predecessors in the number of codes provided. The disease classification has been expanded to include health-related conditions and to provide greater specificity at the fifth-digit level of detail. These fifth digits are not optional; they are intended for use in recording the information substantiated in the clinical record.